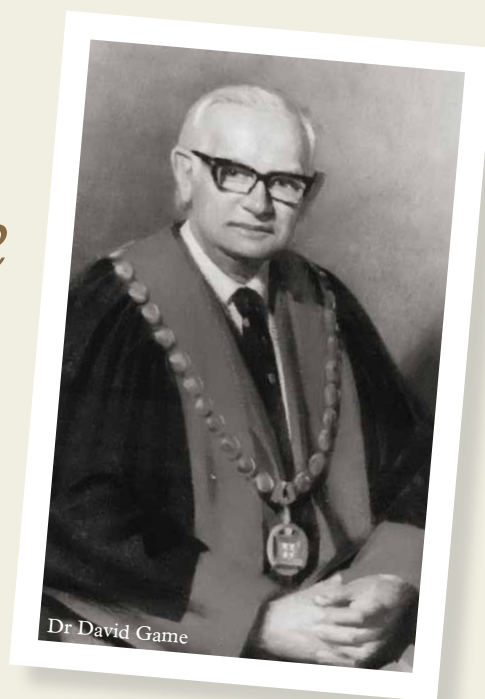




David A Game

*MBBS, AO, KCSJ, FRACGP, FRCGP,
MCFPC, FHKCGP(Hon)*

David Aylward Game was born in Adelaide, South Australia, 31 March 1926. He is the fourth son of Tasman Aylward, a bank manager, and Clarice Mary (nee Turner) Game, an ex-trained nurse. David was educated at St Peter's College, Adelaide and the University of Adelaide.



Secondary school education and early university years were heavily influenced by World War II and the subsequent restrictions on educational scope and recreational activities. At the beginning of our secondary education, myself and several others were directed by the manpower authorities to select either an arts or scientific direction for our secondary education. We selected a science direction. We bypassed Years 8 and 9 and went straight to Year 10. We had completed Year 12 at the age of 15 so were not permitted to enter university because of our tender age. We repeated Year 12, so it was fairly easy to obtain credits in physics, chemistry and maths, which most of us did.

The decision to take up medicine as a career was largely influenced by these manpower authority directions. Also my eldest brother had just graduated in medicine and an uncle was in general practice in Ballarat. However, I also had a strong interest in architecture which still persists.

The first preclinical years at university were fairly leisurely as several others and I were excused from physics and chemistry on the basis of the satisfactory achievement at secondary school level and the scarcity of teaching facilities. The undergraduate years were 1944 to 1949.

I met Patricia Jean Hamilton, a fellow medical student, on my first day at university. We were married a week after the final MBBS results and a week before formal graduation and degree conferring. Pat and I were the first married medical graduates of the university to receive our degrees on the same day. Pat subsequently developed her own very busy anaesthetic practice.

Our children are:

- Ann Aylward BA(Hons), MA, PhD, Professor of Sociology, University of NSW
- Philip Aylward MBBS, DObst RACOG, FRCS(Edin), FRACS, general surgeon
- Timothy Aylward LLB BA SC, NSW practicing barrister
- Ruth Aylward, physiotherapist, Director of Therapy Services for Southern Cross Homes, SA.

We built our first house on Payneham Road, Payneham, entirely with a bank loan (we had \$100 in the bank), and commenced solo general practice in 1953 in our new home on the basis of my father-in-law's previous part time general practice which he had discontinued to take up a full time specialist surgical practice. The practice developed into a five man practice with three practice sites. The practice was involved with medical students from both medical schools in South Australia, the University of Adelaide and Flinders University, and with graduates in the College's Family Medicine Program (FMP) training scheme. Also for a short time social work students from the University of Adelaide were attached to the practice.

In 1983 after extensive spinal surgery and 9 months on sick leave, I retired from the practice and several months later commenced, with my previous partners' approval, a small solo practice in an office building well removed from the previous practice sites. Shortly after this my son Philip was commencing his specialist surgical practice, so we shared these rooms which very quickly proved to be far too small and inadequate – from the beginning of his surgical practice he was very busy. Consequently we purchased a large typical South Australian bluestone villa in St Peters and converted it into four very attractive consulting suites.

In late 1983 I also took up the newly established part time position as Coordinator of General Practice at the Adelaide Children's Hospital (now the Women's and Children's Hospital). These coordinator positions, one in each teaching hospital, were an initiative of the RACGP SA Faculty, with the financial support of the SA Health Department and approved by the hospitals.

The appointments were recommended by the faculty to the hospitals who officially made the appointments to their institution, and the government paid for three sessions per week. The principles for these positions were to supervise the training of those residents who were planning to enter general practice, to assist with student training and to be a liaison with the GPs who referred to the hospital. In my position I was accepted with great scepticism and almost hostility (I was regarded as a mole instilled by the government to spy on them). I feel fairly confident that I won them over. One successful outcome was the change in attitude of the hospital to GPs which previously had been particularly poor. On my retirement in 1991 I was given an official farewell dinner and presented with a silver tray in recognition of my work there, so I think I was finally accepted.

The reason for my retirement from this position was that I had been appointed part time Lorna Laffer Medical Director of the South Australian Postgraduate Medical Education Association, and I continued in that role until 1998. This organisation started its life as the postgraduate medical education committee of the University of Adelaide which later combined with the similar committee of Flinders University. It later evolved into an independent body funded by membership fees, a very generous bequest (Lorna Laffer) and fees for its educational services. Its main objective is to provide continuing education for all medical graduates, but this applied almost exclusively to general practice. At the time this was a very busy task and involved a lot of planning, arranging country educational visits, city programmes, etc. I became an active member of the medical education committees of all the teaching hospitals in South Australia and in several cases organised their annual general practice refresher weeks.

As well as my roll of Coordinator of General Practice Training at the Adelaide Children's Hospital I have had an intermittent association with the teaching hospitals.

I was a resident medical officer at the Royal Adelaide Hospital (RAH) in 1950, followed by a year as Outpatients Registrar, which was a wonderful experience for general practice.

From 1970 to 1983 I was an associate GP at the newly established Modbury Hospital. I was quite involved in the establishment of this new public hospital in the northeast of Adelaide.

The hospital was initially managed by the RAH but quite quickly became independent.

I was a Senior Visiting Practitioner at the RAH in the newly established Primary Care Unit from 1970 to 1983 and then from 1983 to 1991 in the Accident and Emergency Department. From 2006 to 2010 I was a Senior Medical Specialist working in medical administration with the responsibility for answering incoming medical correspondence.

In 1991 I was appointed an Emeritus Specialist, Royal Adelaide Hospital – as I understand the only GP to hold this appointment.

In December 2010 the Royal Adelaide Hospital Staff Society presented me with a plaque in recognition for my years of service over 60 years.

From 1989 to 1991 I was Senior Visiting Practitioner at the Adelaide Children's Hospital with the role of supervising junior resident staff and medical students in the Accident and Emergency Department.

I finally retired from general practice on my seventieth birthday, 31 March 1996.

Awards

- *Order of Australia*

In 1983 I was appointed as an officer in the Order of Australia for service to general practice on a national and international basis. I have been a Life Member of the Order of Australia Association since 1983 and was Chairman of the SA Branch from 2007 to 2009. In this later position I was also a member of the National Committee.

- *The Sovereign Order of Saint John of Jerusalem, Knights Hospitaller*

In 1995 I was made a Knight and in 2001 promoted to Knight of Grace, 2005 Knight Commander of Grace and in 2008, Knight of Justice. I am registrar of the SA Priory.

- *Rose Hunt Award, RACGP, 1980*

- *AMA (SA) President's Award, 2006*

Not essentially an award but I do regard it with great honour to have been the official medical officer to the Queen and other members of the royal family whenever they visited South Australia from the mid 1970s until I retired from general practice. I do not think I am divulging medical secrets if I report they are a very healthy family!

Professional qualifications

- MBBS, University of Adelaide, 1949
- FRACGP by admission, 1968
- MACGP (later MRACGP) by examination, 1966 subsequently upgraded to FRACGP
- Life Fellowship, RACGP, 1998
- Member (Hon) College of Family Physicians of Canada, 1976
- Life Member, College of Family Physicians of Canada, 1995
- FRCGP ad eundem, 1986
- FHKCGP (Hon), 1987
- Emeritus Specialist Royal Adelaide Hospital, 1991
- Life Member, RACGP, 2004
- Life Governor, Australian Postgraduate Federation in Medicine, 1994
- Fellow, Australian Postgraduate Federation in Medicine, 1997
- Patron, Australian Postgraduate Federation in Medicine, 1997

RACGP

How I joined the College

In a manner I was just made a member. In 1959 I was doing a night call to see the crying newborn baby of the newly appointed rector of my parish. I was aware that the mother concerned was the daughter of Dr Conolly, the President of the College, but during my assessment of the problem, I did not realise that he was the dark figure in the shadows at the back of the room. Furthermore, I did not have a clue as to the diagnosis except that I was sure there was nothing which required urgent attention. I prescribed 'love and kindness' and said I would re-assess the situation in the morning. Dr Conolly then revealed himself and asked if I was member of the College. In response to my negative reply he said, "You are now." I never discovered if his decision was based on my clinical acumen or he thought it was so hopeless that only the College could save my medical career.

South Australia faculty

I officially joined the RACGP in 1960 but I understand that I am classified as a founding member.

In 1961 I was invited to be nominated for the Faculty Board. I agreed thinking that this would be a gentle entry into College affairs. I was surprisingly elected but then immediately I was taken aside by the Faculty Provost and Board Chairman, Sir Leonard Mallen, and bluntly told I was now the Faculty Treasurer. This was rather ironical as my fiscal skills were nil – I left it to my wife to manage our meagre financial affairs.

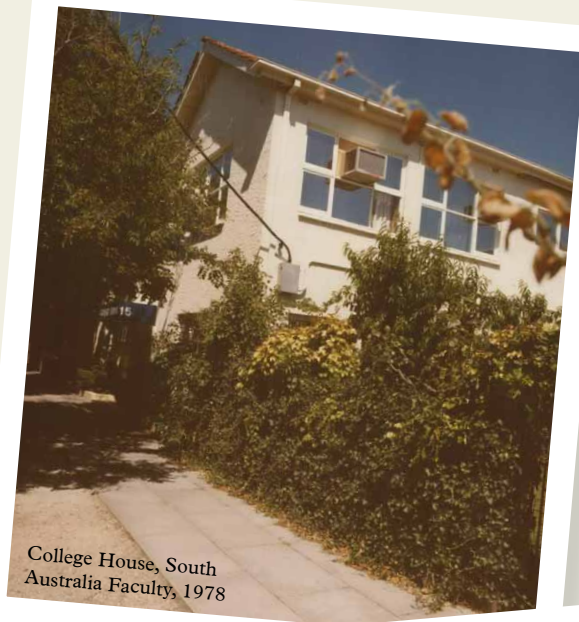
I need not have worried. The faculty's financial assets were rather more imaginary than real. Also at that time the faculty's management was in the hands of Mr Max Jarvis, the manager of AMA (SA) Services Ltd which operated within the AMA headquarters, Newland House, Brougham Place, North Adelaide. In fact all of the faculty's paperwork was stored in the top right hand drawer of his desk.

However, work did expand and the faculty required some more assistance in the office, although Mr Jarvis remained the manager. A search of Newland House revealed that the only unoccupied space was the anteroom to the men's toilet. With a little adjustment this became the official office of the faculty. It had a limited life as the AMA soon decided that they would need to demolish this part of the building for extensions. Also at this time the FMP was evolving and it required its own office and teaching facilities. It acquired an acre of space – the top floor of a new medical suites building in Tynte Street, North Adelaide. The faculty was allocated two rooms in the southwest corner of this paddock and also had access to FMP's meeting rooms. It was a great improvement.

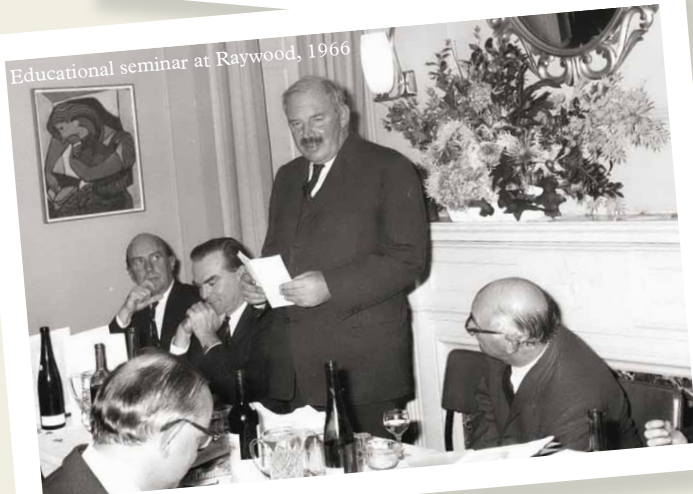
Rationalisation prevailed and a search was made for the faculty to obtain its own premises. As a result, College House, Gover Street, North Adelaide was purchased and occupied in 1977. It was my idea that the building should be given an anonymous name rather than naming it after an individual. The faculty occupied the ground floor and FMP the upper floor. At the time it was hoped that other professional bodies would take up some of the vacant space. The Physiotherapy

Association were tenants for a short time but, with growth of both their organisation and the increasing needs for the faculty, they needed to move on. With the eventual end of FMP the faculty occupied the whole building, with the Rural Faculty also establishing their headquarters in the building.

College House had some sentimental attraction to me personally. Before its conversion from a private house to an office building (prior to the College's purchase) it was the private family home of a fellow medical student (who was my wife's bridesmaid) and was the venue for some very memorable medical students' parties! Some of the old home features are still identifiable (at least to me). Through my association the faculty has made available to the Order of Australia Association, SA Branch the Council room for its meetings. The only disadvantage for the committee is that they now have to sit through meetings with my peering down on them from my three pictures hanging on the walls.



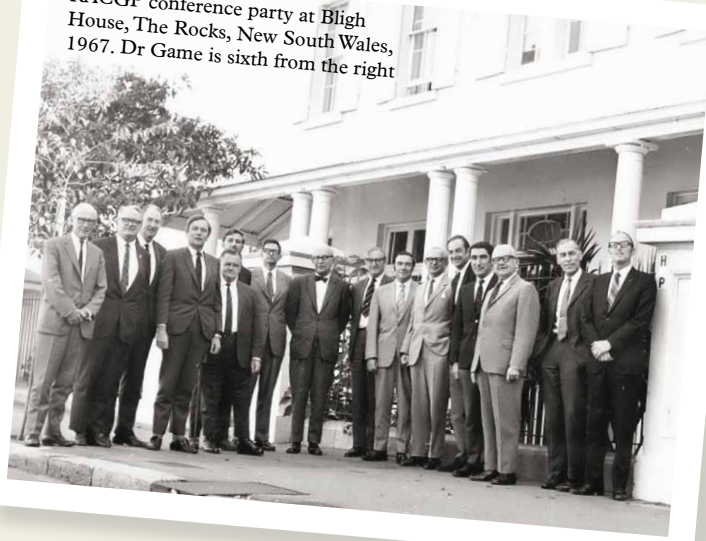
College House, South Australia Faculty, 1978



Educational seminar at Raywood, 1966

One task I was faced with as my role of Faculty Treasurer was my appointment in 1961 as SA Director of the Development and Research Foundation Fund. We initially raised \$11 000 from faculty members. A public appeal, Project Family Medical Care, was launched in 1965 with Sir Richard Hawker as the SA patron. Our target was \$24 000 and we had raised \$12 000 when further action was deferred (and never revived) because of the deteriorating national finances at the time.

RACGP conference party at Bligh House, The Rocks, New South Wales, 1967. Dr Game is sixth from the right



Incidentally the funds raised by these efforts were used to implement the Postgraduate Fellowship scheme, the details of which are adequately recorded elsewhere. My main involvement was that Cliff Jungfer later requested me to prepare a report of their activities. This was presented to Council in 1968. What was most apparent in this report is how different the roles were interpreted in each state by the individual Fellows. None went about their commitment in the same manner or with the same intentions, so outcomes were very different and no comparisons of effectiveness could be made. Perhaps the initial intentions of the scheme were either inadequately explained or inadequate guidance given during the implementation stage. Personally I found the task of preparing the report rather frustrating and it certainly was in my mind an unsatisfactory one. I am not implying any criticism of the individual Fellows or their achievements but rather criticism of the process and inadequate supervision.

After my arduous term as treasurer, I subsequently became chairman of the Faculty Board from 1967 to 1969 and then Provost from 1970 to 1972. I represented the faculty on the Federal Council from 1968 to 1972. I was also involved with the Medical Education Committee, the Undergraduate Subcommittee and the Accreditation Committee. I was the Co-Director of the Raywood Teaching Seminar, the first such teaching seminar following the initial teaching seminar held nationally, and also very involved in the coordination of the College examination in SA.

As a representative of general practice and because of my involvement with the RACGP SA Faculty, I was elected (together with the late David Muecke) as a member of the Faculty of Medicine, University of Adelaide – another first for general practice.

I also represented the SA faculty on many occasions on many deputations and committees involving educational and government matters.

College Council

My introduction to College Council was when I was appointed one of the SA faculty's two representatives in 1967. Faculty representation was reduced to one representative following the College's reorganisation conference.

At the 1969 RACGP Council meeting following the College AGM, during a tea break I was asked if I would accept nomination as Vice Chairman. At this stage on Council I was still trying to work out the complicated agendas, the differing personalities of the various members and what they were all meant to be doing, but I thought that with 2 years as Vice Chairman I would discover what it was all about and feel more confident, so agreed to be nominated. On the resumption of Council nominations were called for the positions of officers. To my horror I suddenly found I was nominated for Chairman (not Vice Chairman) and elected before I had time to think! All this was not unlike a parliamentary party spill and as a result I was not particularly popular with the member who was expecting to be elected Chairman unopposed. I immediately assumed the Chair and somehow got through an agenda, which was almost in a foreign language to me.

I remained Chairman until 1972 when I was elected President Elect, which in those days was a 2 year term. My term as President was from 1974 to 1976. In 1972 the Censor in Chief, Dr Kevin Cullen, suddenly resigned, during a Council meeting, on a matter of principal due to his disagreement with a decision of Council and in particular my handling of Council affairs as Chairman. The College examinations were due in several weeks, so placed with the emergency of examinations and no Censor in Chief to be responsible for their conduct, I found myself elected by Council as Censor in Chief until the next AGM. Following my term as President I was again elected Censor in Chief from 1976 to 1979.

Dr James Watson was elected President in 1976. Unfortunately during his term he suffered a severe myocardial infarction followed by some serious complications and he requested me to deputise for him at times of his incapacity.

During my term on Council the headquarters of the College was Bligh House, Lower Fort Street, Sydney. This was a beautiful old heritage building for which a peppercorn rental was being paid to the Maritime Services Board. It was quite adequate in the very early days of the College. By my time of introduction it had a very well furnished Council room, and several other downstairs rooms furnished by a wives' committee in the fashion of an old boys' club. Upstairs it had about four bedrooms and one bathroom. The basement was a storeroom. Somewhere in the building was accommodation for a resident caretaker cum breakfast cook. The NSW faculty office was also in the building. The College Secretary, Dr John Radford, occupied a bureau type desk in the 'club room' area. He was Medical Officer for AMP and came at lunchtime from Circular Quay to attend to College business.

The major problem with the building was that it was virtually under the Harbour Bridge with trains continually roaring overhead. Because of the noise the Council room was almost hermetically sealed and there was no air conditioning. It became almost unbearable and to make it worse smoking was permitted! While I was Chairman a motion was proposed that the College should continue to financially support the Australian Anti Smoking Council. I boldly assumed a dictatorial attitude and stated that as Chairman I would not let the Council be so hypocritical as to let this motion stand or even consider it while the majority were actually smoking at the time. It was replaced by a successful motion banning smoking in the Council room – it was still permitted in the hall so the diehards stood in the doorways smoking and continued to participate in the meeting. At any rate that was the beginning of the College's no smoking policy.

To continue the club image, it was decreed that interstate Council members would occupy the upstairs bedrooms with up to five per room and just one bathroom. And of course the trains continued to go overhead almost all night and all windows shut. To my personal discomfort as Chairman, I had to endure one very torrid night, kept awake by the trains and very severe sciatic pain. Two days later I required a laminectomy. I refused from then on to never sleep there again.

– I paid for my own accommodation elsewhere. That virtually was the end of boarding school accommodation at Bligh House. Also the College was getting busier and upstairs was required for office and meeting space. It could perhaps be noted that however dear Bligh House was to the NSW members of Council they all retreated to the comfort of their own homes as soon as Council was over for the day.

College reorganisation, 1971

During my term as Chairman, the Council held a College reorganisation conference. This was held on a Monday and Tuesday following a weekend long regular Council meeting. Council had become too large to be workable and was becoming bogged down with endless debate, most of which was by vocal individuals who were determined to get their own way (and in many cases to get a bigger slice of the budget). All this was going on in the grossly overcrowded smoke filled Council room at Bligh House. The main outcome was reducing faculty representation from one to two. The new Council then consisted of office bearers, the chairmen of standing committees (ie. education, research, practice management, preventive and community), and the faculty representatives. A formal executive committee was established. I remember well the interminable and acrimonious debate as to its composition and size. Everybody wanted to be part of it. In the end in desperation I took control and simply said “hands up for an executive of seven or five.” Fortunately five won the day.

In retrospect I regret that at the time of this conference, I was not aware of procedures for composition or management of councils in one other international college. In 1984 I attended a regular meeting of the Japanese Academy Council meeting in Tokyo in my role as President of the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA). All business and all formalities were concluded in half an hour. After the meeting I congratulated the President on his superb management of council affairs and as an innocent Australian, inquired how the members of council were elected and whom do they represent? His reply was, “I appoint them.” What a wonderful example of democracy – it would solve many of our problems!

A later development, as a solution to the problem of the standing committee chairmen using Council meetings as a forum for them to debate their relative value and therefore a bigger slice of the budget, was the establishment of the Committee of Chairman (the CoC Committee). This committee met prior to Council meetings and presented an agreed report to Council. As Censor in Chief I chaired this group at some times. I notice in the 1980 Annual Report of the College, Dr BS Alderson as the then Chairman, stated in his report that among other things, the committee was considering the future goals of general practice and discussion of standing committee projects, including a move towards a more acceptable way of funding these projects.

Recognition of general practice as a speciality was always an aim of mine. In the early 70s, Cliff Jungfer and I prepared a small booklet entitled *The Recognition and Registration of General Practice*. This was designed to support the College’s justification for recognition and for something tangible to show for our proposal.

I went to a meeting of the chairmen of the State Medical Boards of Australia in Darwin in 1978, armed with our document, to put the case formally for recognition as a speciality.

This was rejected outright without any compromise. I persevered and finally requested that they accept general practice as a specific and defined discipline. This obviously looked like a good let out for them and they readily accepted the definition. Later at dinner I casually asked one of the chairmen what he understood by the term ‘specific and defined discipline’. Without any hesitation he responded, “a speciality of course!” That meeting certainly was the first official launch of the College’s long battle for full recognition.

During my term as President I was very involved in discussions which resulted in the Federal Government's support of the development of departments of community medicine, with sections of general practice in all university medical schools, by making them funded for a year, dependent upon such developments. All medical schools took up this offer and all initial heads of these new departments were active GPs. From all this has developed the strong academic wing of general practice in Australia.

College examination

My involvement with the College examination was from its very beginning. I was selected to attend the 1966 Geigy Teaching Seminar which was held at Ridley College, University of Melbourne. This was my introduction to modern examination and assessment processes, and a completely new language! This really was a turning point in my self confidence. All attendees were assigned a teaching modum to present and demonstrate – and have it critically assessed by all others present. My task was to give a 15 minute lecture. I was terrified, shy and very nervous, but it apparently went well. I received congratulations from the supervisors of the seminar and my confidence greatly rose so I became much more involved in the seminar. As part of the teaching aspects of the seminar, some time was devoted to an examination process, mainly under the leadership of Monty Kent-Hughes.

This seminar was followed in 1967 by a 10 day examination seminar at Ormond College, University of Melbourne. I was among the 45 members and Fellows invited to attend. In the mornings we sat the examination under full examination protocols and the papers were marked confidentially by the College Censors. The afternoons were spent in detailed discussion regarding reliability, methods and content. From this evolved the final format of the examination. Those of us who were assessed by the Censors as having demonstrated the required standard were awarded the diploma and the MACGP (later MRACGP). It appears that I had suitably impressed the Censors, so they awarded me.

The following year the first open examination was held in each state under the supervision of visiting College Censors, mainly under the control of Monty Kent-Hughes. Each faculty elected an examination supervisor who was responsible for the scheduling and logistics of a rather complicated system of movement of candidates between examiners and various stations on a very tight time schedule. I take some pride that I spent many hours working on a schedule for rotation, which appeared to work effectively, and subsequently was adopted in principle by other faculties.

In South Australia we well remember the visit of Monty for the first examination. He seemed to have had little confidence in the faculty's ability to assemble the many clinical props for the various clinical stations. He even came with a sample bottle of urine all mixed up in his suitcase with all his other odds and ends (underclothes and socks, etc). Apparently SA can be relied upon to produce good wine, but not urine of the same quality as in Victoria.

As the examination process was based on faculties which provided the physical facilities and also the examiners, it became apparent that College members so involved should be aware of modern teaching and assessment processes. On this premise I was responsible for the organisation of the first teaching seminar in SA, The Raywood Conference. Through my personal friendship with the then State Director of Education, Mr John Walker, we had made available to us Raywood Conference Centre, an expert educationalist and several members of the education department of Flinders University. It was regarded as a very successful exercise and the forerunner of several other, though not so elaborate, conferences. Incidentally Raywood

Conference Centre was the previous family home of Mr Alex Downer, a recent Minister of Foreign Affairs in the Howard Government. And as a sideline, the then Chief Justice of the State, the Hon. Mr John Bray, attended a formal dinner during the conference and provided us with an after dinner talk.

As explained above, the initial recognition of successful completion of the examination was the formal admission as a member (my certificate signed by Dr Cliff Jungfer, President and Dr Bill Connolly, Censor in Chief, still hangs on my office wall). Most state medical boards permitted this to be registered as an additional degree. Hence until the recent demise of the SA Medical Board I was legally entitled in SA to use both MRACGP and FRACGP as my post nominals and in fact all correspondence from the board did so address me. In later years examination success was recognised by admission as a Fellow.

Prior to this there was provision for the College Council, on the advice of the Censors, to elect 'in special circumstance', a member to Fellowship. I was the recipient of such an award in 1968. In my term as Censor in Chief the Censors were requested to provide guidelines for 'special circumstances'. These they defined, in broad terms, as outstanding service to the College and/or general practice in the educational field or relevant research, or in a manner which enhanced the academic principles of the discipline of general practice/family medicine. There had been reasonable circumstances which prevented the member from obtaining Fellowship by the usual manner. It is food for thought for me to contemplate what the special circumstances in my case were.

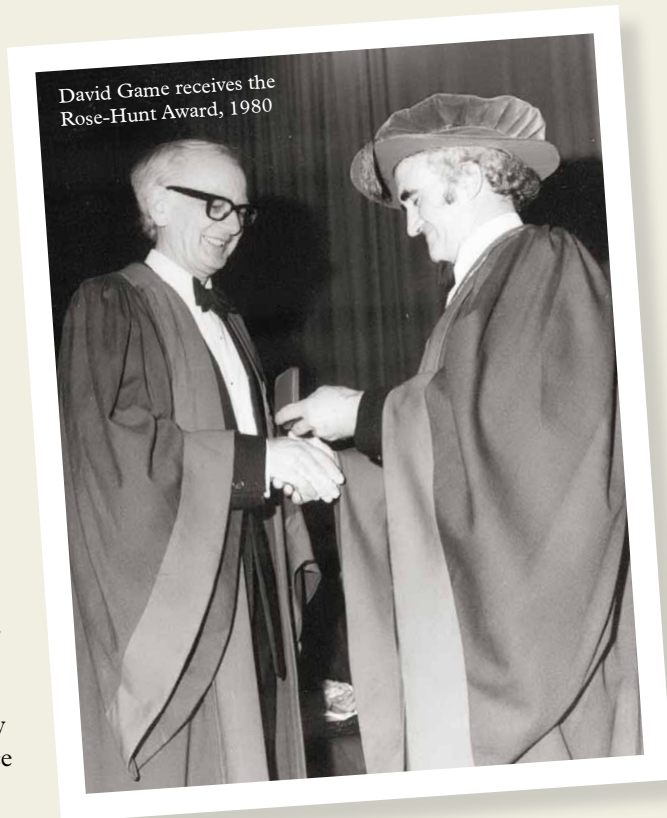
Rose-Hunt Award

This award has always been held in great affection by me. At the Academic Session of the AGM in 1972 I personally was handed the first ten silver medals by Dr G I Watson, President of the RACGP, with the instructions that they were to be awarded by the RACGP Council to any person who, in the opinion of the Council, had rendered outstanding service in the promotion of the aims and objectives of the College. College Council subsequently decided that there should be only one award each year and only then if there was a suitable prospective awardee.

As President, I presented the first three awards to: Dr W A Conolly in 1974, Dr M O Kent-Hughes in 1975 and Dr C C Jungfer in 1975.

To my great honour I received the award myself in 1980.

At the time of each AGM the College Council entertains all awardees at a very pleasant luncheon, hosted by the President, and as an outcome there has evolved an unofficial Rose-Hunt Alumni. Also it has unofficially become a custom for the medal to be worn on a neck chain on such occasions.



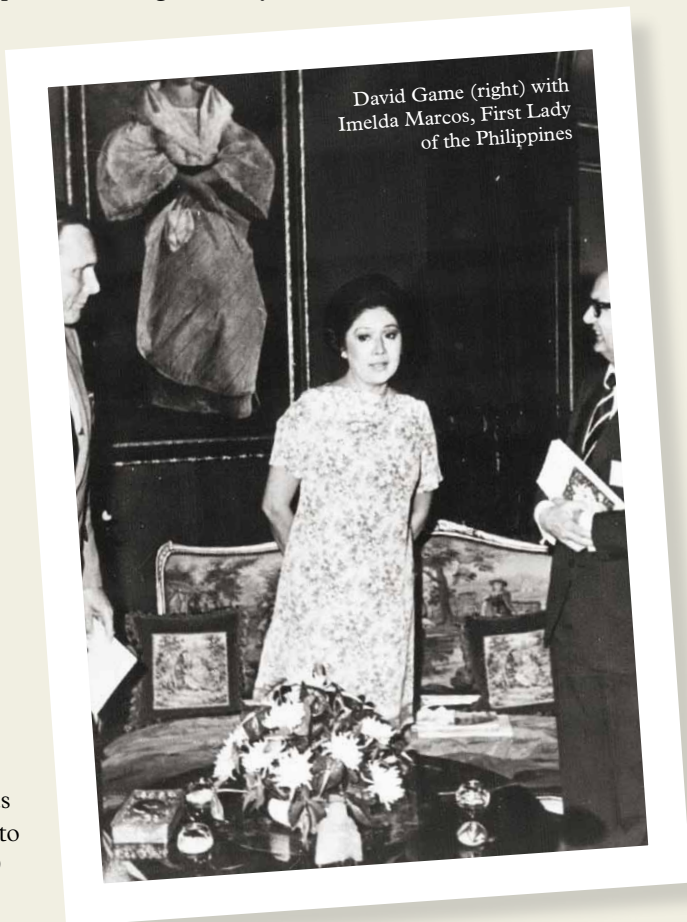
Medico-political and other matters related to time of office

Much has been written and documented about the medico-political turmoil which occurred during my term as Chairman, President and Censor in Chief. Histories of the College, annual reports and other archival material are all on file. I do not intend to reproduce another chronological account of all this, rather I plan just to mention some happenings and events which were of more personal interest or more closely related to my involvement.

One of the Ministers of Health we had contact with was the Hon. A J deB (Jim) Forbes. Despite the fact we were at school together and are both members of the same club in Adelaide, to this day he finds it difficult to even communicate with me other than to say “hello”. I understand from fellow colleagues he will never forgive the College, or me in particular, for the difficult time we gave him during his term as minister! I do recall one very crowded public meeting in the AMA Hall, Adelaide, during the most common fee dispute. I was on the stage with him and was the spokesman for general practice. He would not answer any of my questions directly until he had checked with his aide who was sitting behind him.

Affiliation with the AMA was a very controversial topic during my time in office. Affiliation first came about in 1961 mainly on the urging of Sir Leonard Mallen, President of the AMA, the WMA and also a South Australian! Not of course that it is related to this subject, but it is of some interest to note that when WONCA was established in 1972, Sir Leonard put a lot of pressure on me to have it affiliated with the WMA – this did not occur. During all the debate regarding the proposed changes to the Health Act, relationships became very strained as it was felt the AMA was not supportive of the problems being raised by the College. In 1970 the AMA was informed that it would in future do its own medico-political negotiating. In 1973 disaffiliation was formalised. During my term of Chairman of Council I did make an informal effort to develop better relationships. Just prior to the lunch break at a meeting I informed the Council that I had invited Sir Clarence Reiger, President of AMA (and another South Australian) to join us for lunch. He came and was very affable but no real change occurred.

Prior to this period there was an informal Joint Advisory Committee (JAC) of the clinical colleges between the Royal College of Physicians and Surgeons, and the Royal College of Obstetricians and Gynaecologists. These colleges had indicated to us that should disaffiliation occur, then the RACGP would be invited to be part of this committee. This did occur and I was a member of the committee from 1975 to 1980 and Chairman from 1978 to 1979 (the first GP to become so). The AMA joined these meetings in a conjoined conference after the JAC concluded.



In 1969 the four royal colleges established the Combined Education Committee (CEC). In his history of the College, Ronald Winton gives the AMA full credit for this development. I was a member of the CEC from 1974 to 1978 and Chairman from 1976 to 1978 (again the first GP to hold this position). During this period the membership was enlarged to include 11 clinical colleges.

The General Practitioners Society of Australia (GPSA) was formed by a group of GPs who were very opposed to the College's management of the Most Common Fee and the differential rebate problems. They were very active and outspoken. John Radford in his term as President attended a meeting called by the AMA together with representatives of GPSA and NAGPA (an AMA initiative) at which all agreed to a joint rejection of the government's national health scheme. At the Council meeting at which this action was up for endorsement, it was apparent that there had been some opposing views canvassed among one or two faculties and when the endorsement was rejected by Council, John interpreted it was a vote of no confidence and tendered his resignation in a sealed envelope. As Chairman I did not open the envelope and the Council continued with other business. As John said in his contribution to the history of the College, 1958 to 1978, "an important decision however had been made, viz that the College would not be involved in 'medical politics' in any way in the future."

As President, I personally had a difficult time from GPSA with very open criticism. Several times they requested 'secret' meetings with me. However they would never give me the assurance that our discussions would not be leaked to the media, (as had been done to others on previous occasions) so we never met.

As the final procedure at the 1974 Academic Session following my installation as President, I made the announcement that it had been decided by Council that there should be some emblem for the permanent recognition of past presidents and that was to be an embroidered College crest to be worn on the left lapel of his/her gown. I had made this suggestion after a recent visit to the UK when I noticed that past presidents of the Royal College of General Practitioners (RCGP) were so honoured. I presented the first to John Radford who had just completed his term. There were also six other past presidents who were presented with their emblems on the same occasion. At about the same time the RCGP granted permission for members of RACGP who were Fellows of the RCGP, to wear an embroidered RCGP emblem on the right lapel. So there are a few of us who do wear both these emblems. I must say, having the personal honour to wear both of these, I have to repeatedly make this explanation.

Censor in Chief

As stated earlier, I was Censor in Chief in two bouts. In 1972 I was appointed on the sudden resignation of Dr Kevin Cullen and just filled the remaining time of his term in office until the next AGM. This was really only a caretaker situation to ensure that the forthcoming examinations were correctly conducted and that the other routine tasks were continued.

Dr Neil Carson was appointed the next Censor in Chief and held this position until I was appointed in my own right from 1979 to 1980.

During this term I worked very closely with Wes Fabb in respect of the standard, content and conducting of the examinations. We held many pre-examination seminars.

During my time the concept of electives training and assessment was introduced and developed. It was in no way designed to supplement the training and examination for the FRACGP but rather recognition by the College that many GPs develop special interests and that the College should provide the appropriate training and assessment. This would be available to holders of the FRACGP or those training for the diploma. A very active committee was formed consisting of Censor in Chief, David Game, (Chairman), Chairman of the Education Committee of Council, Eric Fisher, Chairman of the Accreditation Committee of Council, John Summons, and the Director of the FMP, Wes Fabb. The first such programme was in geriatrics and rehabilitation but others were developed. The actual programmes were the responsibility of the faculties.

During my presidency the principle was introduced that Fellowship could be obtained by a process of assessment of competence alternative to formal examination. This was for those who for some particular reason were unable to sit the formal examination. To ensure that courses being attended by such applicants and also courses being run by the FMP and those run by outside bodies but available to FMP trainees were of adequate standard, a Courses Approval Committee of Council was established with corresponding faculty committees. The Chairman was the Censor in Chief and the members were the same as the Electives Committee. It is somewhat disappointing to note that in my annual report of 1980 I stated that "...some faculties do not ensure that their Courses Approval Committees function in an effective manner."

In all, I can say that I gained a great deal of personal experience from my work with the College. I developed my skills in committee work and chairmanship, administration and examination processes. The only negative aspects of this involvement was the paucity of time with family and friends and the inability to enjoy recreational activities and hobbies.

Other professional and community activities

Australian Medical Association

My initial active involvement with the AMA was with the Eastern Suburbs Medical Practitioners Association – one of several regional groups of AMA (SA). These were to provide social and educational opportunities at a local level. Meetings were held in members' homes. I was Secretary in 1965 and President from 1966 to 1967. They have now been discontinued. I was elected to SA Branch Council on 1971 mainly because of my involvement on behalf of the College regarding the Most Common Fee debate. I retired in 1975 as I was becoming too busy with College affairs – I had been invited to join Federal AMA Council and I also thought that would produce a conflict of interest and my prime interests were with the College.

I was a delegate to the AMA Annual Assembly at various times, representing both AMA (SA) and the RACGP.

Also around this time AMA Services SA Pty. Ltd was flourishing. This was a service company for members supplying printing, medical supplies, locum services, etc. I was a member of the board from 1976 to 1986 and Chairman from 1980 to 1986 when it ceased operations as other commercial bodies were supplying these services.

I represented the AMA on the SA Council for the Ageing from 1971 to 1994. This was a most frustrating role, as the organisation had a very strong anti-doctor philosophy. It became pointless attending their meetings. Incidentally they have not changed their attitude.

I was the AMA (SA) representative on Florey Centenary Committee from 1997 to 1998 as well as being a member of a committee set up by the Adelaide Medical Florey Alumni Chapter. Incidentally I was a member of the original committee of the Chapter and was the second Chairman for a number of years.

In 1998 I joined the editorial board of AMA Medical Review, the SA branch's monthly magazine, now titled Medic SA. I have been editor since 2004. We have several times been awarded the best state publication.

In 1970 I was an Australian delegate to the WMA Assembly in Oslo – a very interesting experience.

Community

From 1955 to 1970 I was a rather ineffectual divisional surgeon at St John Ambulance, Adelaide Motorcycle Division. I was never required to demonstrate my non-existent motorcycle riding skills, but I did find the association with the enthusiastic members very rewarding and I may have been able to instruct them in something. Finally they put me on the inactive list, which says a lot.

In 1966, myself and three other GPs decide that there was the need for a GP community orientated hospital in the northeastern suburbs of Adelaide. We had only hope – no money, no land and a background of relevant local councils and government which had no idea of such a concept. We persevered and finally the North Eastern Community Hospital was opened in 1974. Personally I was very involved in the design detail and when the architect presented his final plans to the board he gave me credit by saying “these are not my plans, they are Dr Game's plans.”

The staffing, equipping and furnishing of a hospital from scratch was arduous and extremely challenging but very rewarding. The hospital still is an active non for profit community establishment.

In many ways this hospital was unique. It combined a designated nursing home and specialist's consulting suites. The latter was my idea but I was branded as a traitor by some local GPs (how could you let specialists into our hospital?) not realising that without them the project was doomed from the beginning. Of course this concept is now accepted as the norm for all hospitals.

I remained on the board until 1986 and was on many of the staff and service committees. We were one of the first hospitals to require credentialing of medical staff.

Just prior to being part of the North Eastern Community Hospital's origin, I had performed the first booked operation at a new non for profit war memorial hospital in a nearby suburban area. This is still acknowledged by this hospital.

Similar to my introduction as Secretary of WONCA, was my election to the Council of Girton Girls School. Girton was my wife's old school and our two daughters attended there. Up to 1969 there was a Mothers' Association but nothing for fathers. However, invitations to mothers' meetings always had an addendum – fathers are welcome. I accepted this invitation and during a meeting I asked if I could comment on the matter under discussion. I was denied this request

on the grounds that I was not a member. I persisted and asked how I could become a member, the reply being I must pay the subscription of 5 shillings. I promptly offered my subscription in cash to the chairman (a mother) who refused to accept it as I was not a mother! I was summonsed the next day to meet the Head Mistress to whom I confessed I was trying to make the point that there should be a Parents' and Friends' Association. This was rapidly established, and to pay for my sins and for being outspoken I promptly became the first President of the new association. Also I was elected to the School Council and remained there until 1973 when Girton amalgamated with King's College and became the new co-education school, Pembroke. I did not seek membership of the board of the new school as I was a little opposed to the mechanism (not the concept) of the amalgamation Ironically my daughter in law is currently the Vice Chairman of the School Council and Chairman of the Education Committee.

Government committees

I seem to have been an easy target for governments when they were looking for membership of committees and the like.

From 1971 to 1974 I was a member of the Committee of Inquiry into Health Services in South Australia, The Bright Committee – not so named to indicate that the committee was bright but that it was chaired by Mr Justice Bright. This committee was responsible for some major changes in health administration in SA, including the establishment of the SA Health Commission which still exists in a rather shattered form to this day.

In 1971 abortion in SA became legal under strict conditions which were under the surveillance of the committee to advise government on abortions (SA). I was appointed to the initial committee in 1971 and remained a member until 1995 when the system was changed. I called it 'my abortion committee'.

In 1975 I had the great honour of being one of five members of the first official Australian medical delegation to China. I was the only member of the delegation in private practice, the other four were government department representatives. This in itself caused considerable controversy amongst the Australian medical profession – why did little David Game from little Adelaide be chosen to represent Australian private medicine in China? This 2 week tour of China as an official Australian diplomatic representative is an experience I will never forget.



On the first day Dr Gwynne Howell, the leader of the delegation, introduced me officially as the President of the RACGP. As general practice meant nothing to them at that stage, it obviously went down like a lead balloon, so he said, "David, from now on you will be introduced as the President of Australian doctors." I accepted this on the condition he did not go back to Australia and so identify me in any reports. As a sideline, it was WONCA that eventually introduced the concept of general practice/family medicine into China and it is now gaining considerable recognition.

From 1971 to 1980 I was a member of the Specialist Recognition Advisory Committee for SA and NT. This was in the early days of Medibank (later Medicare). The committee was to advise on the registration as a specialist of those medical practitioners who did hold formal specialist qualifications or whose practice was not fully limited to a speciality.

I was also a member of the Medical Services Committee of Inquiry for SA, also associated with Medicare and responsible for reporting on possible over servicing by individual medical practitioners. I was a member from 1981 to 1983 and then Chairman until 1996 when the system for investigating possible over servicing was replaced by a much simpler process. Being Chairman was not a task which earned one many friends.

Another slightly related committee was the Acute Care Advisory Committee of which I was a member during its lifetime, namely 1984 to 1989 when it was also replaced by another process.

On state level I was the Chairman of the Eastern Region Geriatric and Rehabilitation Advisory Committee from 1978 to 1993. This was a multidisciplinary committee to advise on services in the eastern area of Adelaide. I had a project officer to assist in our review and on the completion of all our enquiries and evidence taking I went on holiday and requested the project officer to prepare the report for me to sign on my return. Eventually on reading it on my return, I pointed out to the project officer that it did not represent the outcome of our findings or the committee's recommendations, on which she replied, "That is what I was told to write." The government had predetermined the outcome of the review! I did not sign the report.

World medicine – WONCA

My introduction to world general practice/family medicine was my attendance in 1968 as a representative of the Australian College, at the Third World Conference in New Delhi, which was arranged under the aegis of the International Liaison Committee of General Practice/Family Medicine. In the same capacity I attended the Fourth World Meeting in Chicago in 1970. At this meeting it was formally agreed to establish a World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA). The American Academy of Family Physicians was given the task of preparing a draft constitution for presentation at the Fifth World Conference which was to be held, at the invitation of the Australian College, in Melbourne in 1972.

The College appointed Monty Kent-Hughes as the President and myself as the Chairman of the organising committee for the conference. Monty had previously been elected the Chairman of the Interim International Council for the Melbourne Council meeting. At this meeting I made myself very unpopular as I was very outspoken regarding the details of the American proposed constitution. It was finally adopted (with many of my amendments accepted) and WONCA was formally established. I paid the price for being outspoken at the meeting by being appointed the first Honorary Secretary/Treasurer (with emphasis on the honorary!) and Monty was appointed the first President. Ronald Winton in his history of the College, *A Body's Body* in reference to these appointments, says, "It is probably a recording of the obvious and the inevitable (and no reflection on the other office bearers) to say that the two Australians were by no means figureheads during their term of office."

As an aside, the acronym WONCA was suggested by Monty during one of the many interminable planning meetings for the Fifth World Conference which were always held at night in Melbourne and all attended by me (at my own expense). Many years later when the executives of WONCA decided that the long official name was too complicated, they employed a publicity expert who came up with the idea that the short title should be World Organization of Family Doctors and that the acronym should be restyled as a word – WONCA. Incidentally we were never told how much that enlightening proposal cost!

For the first 8 years the secretariat, that is, the headquarters of WONCA, was in my own house, in fact for about half that time it was a desk in my dressing room and then when our youngest child deserted the nursery that became the headquarters of WONCA. It was always the understanding of WONCA Council that the parent College/Academy of the Honorary Secretary/Treasurer would provide him/her with back-up office facilities. Unfortunately in my case I must report that this support was never provided.

When elected President Elect in 1980, Wes Fabb, took over the role of Secretary, and so until his move to Hong Kong, it remained in Australia but returned again to Australia when his term in Hong Kong expired. By this time WONCA had grown to the stage that it was able to rent office space in Collins Street, Melbourne and employ a full time office assistant.

I was installed as President at the World Conference in 1983 and remained so until I handed over to Dr Rajakumar at the conclusion of the World Conference in London in 1986.

The highlight of this conference (at least to me) was being host to the Queen at a reception at the London Museum. This is permanently reminded to me by a personal thank you letter from Her Majesty's private secretary, which hangs on the wall just to the right of my computer screen.

As immediate Past President, I was acting President at the World Meeting in Jerusalem in 1989 as Dr Rajakumar was unable to visit Israel because of diplomatic problems between Israel and his home country, Malaysia.

I was always very interested in WONCA News, which I started as a very modest publication in 1973 as part of my secretarial roles. This was for a short time when it was taken over by others. However, I assumed the role from 1981 to 1983 when I thought it inappropriate for a President Elect or President to hold that position. I resumed the position again from 1989 to 2001.

In 1973 His Royal Highness, Prince Philip, Duke of Edinburgh, was elected an Honorary Fellow of the RACGP. On the occasion I was sitting next to him on the platform and when one of the speakers referred to WONCA, he leant over to me and said, "Did he say wombat?" For some years after that, on the initiation of the then president of WONCA, the late Don Rae, retiring presidents of WONCA were presented with the Honorary Wombat Award, a small ceramic model of a wombat. Mine still has pride of place in my office.

Not related to WONCA, but on the same occasion, after receiving his Fellowship, Prince Philip made a small speech of thanks in which he assured those present that we were not to worry – he was not planning to set up practice in Australia in opposition to us.

Also in my role as President, when in Paris late one Friday afternoon, I was picked up by the French WONCA representative from my hotel, which was close to Champs-Elysees and not far from the Arc de Triomphe. We faced a traffic jam of the complexity that only Parisians could contrive. Seeing the problem, my host beckoned to a 'gendarme', pointed to me and said, "Le President of Australia". Whistles were blown, a passage made for us and we sailed up Champs-Elysees and through the Arc as the President of Australia. Incidentally this was before Mr Keating had even thought of the idea of an Australian President.

Anglican Church

When I commenced my general practice in Payneham in 1953, I joined the Payneham Anglican Parish Church of St Aidan. Rather similar to my early involvement in the RACGP Council, I quickly found myself involved in the parish politics while not really understanding what was happening. The parishioners wanted to unseat a long standing church warden. They invited me to accept nomination for warden and I suddenly found myself elected. As may be imagined my relationship with the ousted warden was, after that, never anything other than very frosty.

I was warden for many years and also represented the parish on Anglican Synod for more years than anyone should. I was also a member of the Standing Committee of the Synod for an appreciable number of years. I now find myself in my old age again back on the Parish Council as Parish Secretary. I am also a licensed lay reader and lay assistant. My wife Pat and I were very active in fundraising activities, particularly to build a parish hall. I still, in an anonymous manner, support financially major parish projects.

In the late 1950s I was elected to the Social Welfare Committee of the Diocese (now Anglicare SA). This committee was, by tradition, always chaired by the current assistant bishop. Again I was the victim of a desired change and quite suddenly found myself elected its first lay chairman in the committee's history. I remained so for many years and during this time the organisation grew remarkably by the integration of all welfare and aged care service of the Diocese to come under the ambit of the Social Welfare Committee, which changed its name to Anglican Committee Services, then later to Anglicare SA. During this time I presided over a major building restoration and building program. After my retirement I was honoured by being elected the first Fellow of Anglicare SA and more astoundingly I have the honour of the chapel in a new aged care facility named the David Game Chapel and Hall.

Publications

Books

- *The Nature of General Practice*, Fabb and Marshall, 1983 (contributor)
- *WONCA – The First Twenty Years* (editor)

Journal articles

- Bilateral ovarian cyst in a girl aged seven and a half years. *The Medical Journal of Australia*. April 1963
- Planning Health Services – SA Inquiry. Proceedings of Annual Conference of Australian College of Medical Administrators, 1973
- The Health Team Concept, Can it Work! Proceedings of 29th Annual Conference of Australian and New Zealand Pharmaceutical Society
- Primary Health Care in China – a Comparison. *Australian Family Physician*. Vol 4, July 1975.
- The Roll of the Professional Man in the Community. *Australian Family Physician*. Vol 4, August 1975
- Training of General Practitioners. *New Zealand Physicians*. Vol 2, March 1975.
- Family Medicine Worldwide – Canada's Contribution. *Canadian Family Physician*. June 1975
- Visit of Australian Medical Delegation to China. *The Medical Journal of Australia*. No. 2, 1975
- Fellowship by Assessment. *AMA Gazette*. May 1978

- The Nature of General Practice. *Health Science Press*. 1983
- Family Medicine in the Year 2000. Proceedings of International Conference on General Practice/Family Practice, New Delhi, 1984
- International Trends in General Practice. *The Hong Kong Practitioner*. Vol 7, No 4, July 1985.
- Child Abuse and the General Practitioner. *Australian Family Physician*. Vol 17, No 4, January 1986
- Continuing medical education needs of rural GPs in South Australia. *Australian Family Physician*. Vol 23, No 4, April 1995

Editorials – Australian Family Physician

- Training and registration, June 1980
- Rehabilitation
- Safe obstetrics, January 1977
- What do our patients want? 1995

Orations

- Ninth C C Jungfer Oration, RACGP SA Faculty, 1990
- William Arnold Conolly Oration, RACGP, 1999

Papers delivered

- Life Style – Preparation for Retirement. Seventh World Conference on General Practice, Toronto, 1976
- The Health Team Concept – Can it work! 29th Annual Conference of Australian and New Zealand Pharmaceutical Society
- Primary Care Today and Tomorrow – The Winds of Change Convention, August 1975.
- The Role of the Professional Man in the Community. SA Council of Professions Seminar, 1974
- Continuing Education. 6th World Conference on General Practice, Mexico City, 1974.
- A Universal System of Medical Diagnostic Nomenclature. Computer and General Practice Seminar, April 1978
- The Utilisation of Auxiliary Personal in Australia. 4th World Conference on General Practice, Chicago, 1970
- Teaching of General Practice at the Undergraduate Level. 3rd World Conference on General Practice, New Delhi, 1968
- Teaching of General Practice, Participation of General Practitioners in Teaching Programmes. 3rd World Conference on General Practice, New Delhi, November 1968.
- Planning Health Services of SA – The Bright Committee. Australia College of Medical Administration annual meeting, 1973
- Inaugural Address, Hong Kong College of General Practitioners, 1978
- Is General Practice a Specific Discipline in its own Right? Okayama Medicine Academic Society annual meeting, June 1983
- The Care of the Aged in Australia. Kyoto Prefectural Medical Association, June 1983
- The Role and Organisation of General Practice in Australia. 6th Annual Conference of The Japanese Society of Primary Care, June 1983