

MY LIFE SINCE GRADUATION - ARCHIE KALOKERINOS

I graduated due to a mixture of cunning, a legal form of cheating, a lot of good luck and a small amount of talent. Then as a young doctor, much to my surprise, I found that I did possess the one thing that did matter—clinical acumen. This encouraged me to aim for what appeared to be the ultimate glory—the possession of a degree in surgery. So off I went to England where I joined the queue and attempted to cram into limited brain space the vast amount of knowledge that would be needed to satisfy the examiners.

I soon realised then that I would never become a surgeon however I spent five years working in English hospitals surrounded by first-class physicians and surgeons who taught me most of what I needed to know. I even learned how to extract teeth.

In 1957 I returned to Australia and agreed to act for a few weeks as a locum in the town of Collarenebri, 500 miles north-west of Sydney. It so happened that my father's next-door neighbour in Greece had established a café and milkbar there. This was one reason I decided to stay. Another was the fact that my training placed me in a position where, according to standards at the time, I could handle 'anything'.

But 'anything' did not include one awful fact: although the figures were small, Collarenebri had one of the highest infant mortality rates in the world. Most of the deaths occurred amongst Aboriginal infants. Many could be classified, by accepted criteria at the time, as 'cot' deaths, but a significant number could only be described as 'strange'. Collarenebri was not alone in this regard, although, strangely it was universally ignored and its existence denied. So I was left isolated and even regarded as someone with a need for psychiatric assistance.

In 1962 I noted that most of the infant deaths occurred among infants who had suffered from a multitude of apparently 'minor' infections and/or gastrointestinal disturbances. This corresponded with the arrival in Tamworth, 250 miles away, of the first specialist physician in the area, Douglas Harbison. It soon became apparent that he was a man of considerable ability so I decided to send him a little boy who was passing through the multiple illness stage. Douglas noted the presence of some extremely minute haemorrhagic areas in some of the hair roots. A diagnosis of scurvy was made, some vitamin C injections were ministered, and a few days later the boy was sent back to Collarenebri.

Now I had a problem because I had been supplementing the boy with more than the recommended allowances of vitamin C for months and 'everybody' knew that a few milligrams of vitamin C, administered daily by mouth, would prevent scurvy. But the boy looked better, was more active and more alert. How could this be explained? For several nights I tossed and turned restlessly then I forgot about it, or nearly forgot, because the issue never went fully away.

In 1965, totally disillusioned by my failure to reduce the infant death rate, I decided to throw medicine to the dogs and become an opal miner in Coober Pedy. For a while all went well, but I soon found myself involved in a terrible brawl that left me with six fractured ribs and a ruptured kidney. While recovering I sought solace in the desert and that is how I met an elderly Aboriginal woman who told me that before white men came the Aboriginal children did not die as they did now.

I recalled how Douglas Harbison had treated the little boy. It seemed possible that when infants are ill they need high blood levels of vitamin C and the only way to achieve this is to administer the vitamin by injection. So it was back to Collarenebri. And the rest as they say is history: there were no more strange infant deaths.

That was the easy part. Explaining it was more difficult and this took many years. In most cases the initiating factor is endotoxin. This disturbs what are known as vitamin C and glucose transporters, so Vitamin C and glucose in sufficient amounts can no longer be transported into many important tissues.

That is; this is not scurvy due to dietary deficiency. It is a matter of disturbed transporters. Needless to say, I have over simplified some extremely complex issues. But the basis of it all is correct.

As the years passed I expanded my knowledge and experience. Two syndromes stand out clearly. The first I observed when seeking a safe method for detoxifying violent and drunken Aborigines. To administer standard sedatives was dangerous because the doses required to achieve control sometimes caused major problems. Furthermore I was usually without adequate assistance. It was, of course, medical practice at its worst.

I had, however, noticed that many sick and irritable infants rapidly became calm after I administered injections of Vitamin C. Adult patients too became drowsy and wanted to sleep. Maybe, I thought, this may happen after the administration of intravenous vitamin C to inebriated Aborigines. I mixed up 240 grams of sodium ascorbate powder in 500 mls of water and began to quickly inject it intravenously. I had used doses like this many times in patients suffering from a variety of conditions, without observable side effects. Almost immediately, the patient became unconscious, resembling exactly an overdose of morphine. I stopped the infusion and within a few seconds the patient woke up. I quickly learned to administer the infusion at a moderate rate. This resulted in rapid detoxification without the excessive response. The mechanisms involved are not fully understood so I will not attempt to explain them. But I will say that I learned a lot about endorphins.

The second observation was far more complex. I had become interested in some subsets of shaken baby cases. I was able to demonstrate that retinal and subdural haemorrhages, haemorrhages elsewhere, and spontaneous fractures, can occur when endotoxin-induced disturbances lead to subsets of scurvy that include these pathologies. With the help of colleagues overseas some accused individuals have been freed from death row and regained their freedom. Others have had charges dropped. Unfortunately our case reports are very often ignored because they are complex and do not follow what has wrongly become accepted. But that is the way we are made. To simplify is not possible, just as it is not possible to teach infants about quantum mechanics

I have reasons to be proud of what has been achieved. I have even more reason to admire and respect those who have helped to make these achievements possible. Finally my wife Catherine deserves a medal for standing by me when life became extremely difficult.

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