

**INTERVIEW BETWEEN
Marion Hastings & Mr. Norman James.**

21.5.98 - N.H.S.

Mr.J The Health Service started on July 5th 1948. We were given the forms on the 3rd and we had already made arrangements with the Health Service to modify them because the forms that they had in England were a bit more complicated and also we were working with the same regulations as England. As time went on there was various little hiccups, where, I will give you an example, the Health Services Board on one occasion attempted to modify the service, by example, removing the children from our treatment and we could only attend to them in an emergency. Well of course, we didn't agree with that, we had to inform the British Dental Association that the Health Services Board were not carrying out the terms of service as we were, had to do our terms of service and of course that got settled. And then the next occasion they wanted to reduce the items that we were allowed to do and again we had to contact the British Dental Association and they managed to pacify the Health Service because we had worked it out that the items when they were removed, the service, the Dental Service was being reduced to half.

M.H. Can I just ask you was there a school dentist at that time, then?

Mr.J Oh, yes, they had, as far as I know, they had a couple, two or three, up at Ballakermeen and Ramsey, now I think one or two of the Ramsey ones worked at Peel as well, I don't know any more than that.

M.H. So they went to the schools?

Mr.J Went to the schools, yes. So, however, that was, I say, when the schoolchildren we got back again. Then the other thing was, the Health Service had been in being approximately five to six months and we hadn't received a payment or our fees which we had charged and we were getting nasty letters from the Assessor of Income Tax as to why we weren't paying anything, so, I won't mention the name, there was one of the practitioners contacted the Government Secretary about it and he was very surprised to learn that, he thought that we were getting our payments.

M.H. He didn't know?

Mr.J No. right.

Mr.J So of course, however, we did get two payments very quickly and one other little item I thought, you will probably remove it, was we got a letter from the Health Services Board that the person who had contacted the Government Secretary was to appear before the Health Services Board for a reprimand.

M.H. Because he had been trying to get his money back?

Mr.J So, however, we had a Dental Health Service Meeting and it was agreed that nobody would go. We never heard another word about it. Let's see now, what else was there? I think I should go back, prior to the Health Service there were approximately seventeen or eighteen dental practitioners on the Island - the majority were old, there

was only two of us, as far as I can work out, did service in the forces. So one can imagine that how old they were and that was why they decreased in numbers very rapidly and we got, dental practitioners from England wanted to come here, they thought it was an easy thing, but we had to work out, because the population at that time was only about 50,000, 52,000 and it meant that we wouldn't be earning a living.

M.H. If you had too many coming over?

Mr.J If we had too many coming over, so it was made into, as one would term it, a closed shop and, let's see, the other thing was that again living on an Island where we had visitors coming, mainly in the summer time, we had a lot of workers in hotels, boarding houses, and that, used to come for treatment. So, particularly, as regards dentures, an edict was made that they had to be on the Island, they had to sign a form to the effect that they had been on the Island two months and they had to give the date, so of course, there could be a check up and I did have, on one occasion, where this person, I made a denture and I eased it on a couple of occasions, and they said well that's the best denture I have had, so I chastised the person concerned, and I said what do you mean by that and he said, well I have already this year had one from Northern Ireland, one from Scotland and one from England.

M.H. So that was his hobby, going round collecting dentures?

Mr.J Going round collecting dentures, yes, so that was why we had to tighten the regulations up, as you could see. One thing we could do as regards a visitor, we could do a fractured denture for them, which of course it was a real emergency, and then of course it did happen one or two occasions where patients who had had teeth out just before, prior to arriving on the Island, they got a secondary haemorrhage, well naturally that had to be done.

M.H. So these were all done on the National Health?

Mr.J All on the National Health, yes. I should think there was very little private and I did have one case, now talking about private patients, who came into me for a set of teeth, under the Health Service and as I therefore mentioned about the article, I said that the Health Service started on July 5th. During the month of March this person was provided with a set of teeth privately and he came in wanting a set under the Health Service, which of course, needless to say, I didn't agree to signing a form and of course I informed the Health Service Board accordingly that if this person's form came in you knew not to approve it.

M.H. I suppose people felt it was their right?

Mr.J That's what it was, yes, their right. Oh yes, the other thing, too, the day that the Health Service started on July 5th, I don't know whether I had come back from my hospital appointment, or work, and I just happened to say to my surgery attendant, 'what have we got now, because', I said, 'when I came in there was about five or six people standing in the hall', 'oh', he said, 'you want to have a look at the waiting room, it's absolutely packed', so I said, 'right, get the first patient in' and this person

said 'I want a set of teeth' so I said 'what's your address?' They came from somewhere, Lancashire, so I said, 'I am very sorry, you can't have one' 'but there's the Health Service here' I said 'yes, but it is nothing to do with the English Health Service'. So the next person that came in was likewise, so I went into the waiting room and I asked 'you all live in England, don't you?' 'Yes'. 'Are you all wanting dentures?' 'Yes'. I said 'I'm sorry you can't have them', and there was twenty people walked out. I was just turning work away, like that.

M.H. But they were just, it's my right ...

Mr.J Yes, that's right, they thought they would get it in the Isle of Man. Actually what I have said, now one or two of the things are slightly out of context.

M.H. That's all right, we will sort that out.

Mr.J Now, as for the Health Service, well I carried on, of course I was doing work at the hospital. Again prior to the Health Service there was three practitioners working there and as regards remuneration I am afraid I can't mention anything about it because I think they were doing, whether they got an honorarium or not I never heard anything at all about it - it was just voluntary work really. Then, it was 1950 about, they wanted somebody to work in the hospital as these other practitioners decided to retire so I applied and I was taken on under item of service. Now that, of course, is, I found out afterwards, it was really wrong, because it should have been under sessional basis and because I found out from England that I'd soon find I'd get into trouble which I did as to give an example, when I had fractures to do of the jaws and the nose, I put in, I'd found out what fee that I should make a claim for, and I put in for twenty guineas as the British Dental Association advised. The Dental Officer, who checked over the form that I had to send in, which I thought was rather ignominious to have to fill in a form, working at the hospital, that's where this item of service was wrong, so, and he would reduce it down to five guineas, so I had a large number of cases, twenty guineas it should be and I was only getting five guineas. However, some time later on they decided that I was assisted by Mr. Brown, for a time, I don't know whether, maybe a couple of years, then after that Mr. Edward Curphey from Ramsey, who'd come over to take his father's practice over, and he was with me for a couple of years, and then he left and got an appointment with Wythenshawe hospital and he got a grading of Consultant and however I was still doing the consultant's work and I mentioned that I should be put on a sessional basis and I would probably find out what my grading was, and however, they sent a professor from Liverpool and he explained to me, he agreed with the work that I was doing that I should get the grading of a full consultant but because of the population in the Island at that time was round about 50 to 52,000, it didn't warrant it. So however I was put on a sessional basis and I was allowed an extra half session for treating patients during the night hours and that. But, lets see, is there anything else now.

M.H. So you were actually not getting recognition for actually all

Mr.J No nothing like it, nothing at all. no.

M.H. Did you find it difficult being isolated on the Isle of Man or did you go across and

have plenty of contact with your peers across.

Mr.J Well, I had plenty of contacts, oh yes I should mention that, I can't remember what the date was, Doctor Alty ??? came over here, he was a Consultant in Liverpool and he used to come once a month and he did pass a comment after two months that 'I don't know why I should be coming here because you are doing all the work or a lot of the work and I am leaving my work in Liverpool', however it was the Dental Association here they said they wanted somebody to come over from England so that was that. Was there anything else that I can give? There was something else.

M.H. So all the time you were doing your hospital work you were still working in your own surgery?

Mr.J In my own surgery as well, yes.

M.H. There was quite a lot of extra work

Mr.J Oh yes, it was extra work and of course I was very fortunate I had a, one technician, well I had two technicians, but they followed each other, both of them had done fractured work for making splints and that sort of thing so that gave me a great assistance instead of having to send the work to England. Well of course I found the work very interesting indeed at the hospital and of course it gave one very great satisfaction to see a person walking out of hospital after having a badly fractured upper and lower jaw and possibly a nose, to the patient who went out of your surgery after just having one extraction.

M.H. Slightly different!

Mr.J Quite different altogether.

M.H. I don't know if you were still working when the helmet regulations came in? Because, has that made a difference to fractured jaws, motor bikes, presumably a lot of ...

Mr.J Oh the helmet, oh yes, I remember now you are talking about the helmet - I was connected with the TT races and I was one of the assistant, oh dear, what do they call them, oh, controller, I was one of the assistant controllers, and I remember when these helmets came out I didn't agree with them at all and I remember the doctor who was assisting on the medical side, he, we both really agreed about this chin section wasn't necessary at all and we did have one or two cases we found out afterwards in England that they still persisted in having the helmets with this chin section and found out they had got a fractured cervical vertebra because they hit the thing whereas if they had it the other way there was a bit of movement there but with this being solid it broken neck, cervical vertebra but how they got, they are still using them I notice but as I say, I didn't agree with it.

M.H. So it didn't help reduce fractured jaws by having helmets, I just wondered if the greater protection ...?

Mr.J Well, it may have done, but I didn't seem to get a reduction at all. But of course as I say the fractured jaws they mounted up during the practice and the TT week, these riders that came over from England and that, tearing round the course. Yes, I wouldn't say that the helmet made it any better because you see I wouldn't see the person who got killed.

M.H. That's right, yes.

Mr.J As you can imagine that, and we did have a number of fatalities and of course actually when they were examined by the doctor and the pathologist they were given thing, multiple injuries, so of course, they didn't designate then that it was cervical vertebra and that and I never knew exactly. I think I did mention on one occasion to the pathologist 'did you find a fractured jaw?' - not fractured jaw, a fractured vertebra - and he said, 'yes we had one or two, but' he said, 'we're going for other things really when we see that', of course we do know that a fractured vertebra well it can be the spinal column we know that. But I think that's just about all now, but I am glad you reminded me about the helmets, I had forgotten completely about that but you see I gave up attending on the TT course in 1964 so I've lost all this, yes.

M.H. Did you find there was much change in the type of dentistry over the years that you have worked?

Mr.J Oh yes, yes, they did, you see with these amalgam fillings, of course now I notice in the paper, but I think it is rather a remote possibility this, where the person gets mercury poisoning when one thinks that the number of years that amalgam fillings have been done and nobody's thought of it before I don't know, I don't see that but these plastic, plasticised fillings that they have, I found them very helpful as a matter of fact that reminds me one case that I had that this young boy, aged about ten or eleven, I filled three or four of his posterior teeth with amalgam and they were only on a biting surface and his mother happened to have read something, it was after I had completed the work, his mother said 'couldn't you have put one of those plastic fillings in?' I said 'well I can do if you pay for it, but it's not allowed on the health service', so she said 'right I will pay for it', so I said, so I made an appointment and I cut out the amalgam filling and put in the plastic. Of course this was a case that was sent for to be examined by the Health Services Board's Dental Officer and I got a very nasty letter the fact that I was refused payment because I had filled with a plastic filling where it should have been amalgam, although I told them, I said 'you can get the patient's mother and she will agree with what I have said', but I note, to my horror, they just disbelieved it. I think that was quite an interesting case. I don't think there is anything else, unless you can you think, remind me ...

M.H. I was just wondering if there was any major change in, like fads for greater extraction or not, or if things have really stayed much the same through all your work or if you found there were different ways of working with the teeth, new ideas coming in?

Mr.J Oh, I wouldn't say, the principles are still the same, of course, you see, at the hospital I would say, yes it has just come to mind now that I used to do a lot of removing impacted wisdom teeth and unerupted teeth, of course, where previously some of those were never attended to, I am talking about prior to the Health Service but then of course, as, I wouldn't use the word modifications in dentistry, but it was just that

the way, altered the teaching that a lot of the students when they qualified, some of them were capable of removing impacted wisdom teeth after a certain amount of instruction and then apertomies ???, we used to do quite a lot of those, what else was I saying, of course unerupted teeth and occasionally where teeth had to be extracted for orthodontic purposes but that wasn't, I wasn't really interested in that because that was really straightforward and it could have been done unless it was medical reasons, it could have been done in the patients' surgery, or a surgery of the dental practitioner concerned.

M.H. Did your equipment change much?

Mr.J It did, over the time, of course, taking the dental chair - a dental chair now, a lot of the students are taught patients lying in a prone position where as we weren't taught that.

M.H. Always upright?

Mr.J It was always upright. Oh yes the other thing I think I should mention was a great improvement they had, when I started as a student we used a treadle machine.

M.H. For the drill.

Mr.J For the drill, and that was why it created a lot of pain because the burr was made of steel and the vibration, that was what give the trouble, well afterwards when they brought out diamond burrs or diamond topped burrs that made it very much easier and then of course a later improvement was the turbine and of course it was done at high speed and that was very much better. And then of course again as regards practice they started to have, wearing, when this Aids were occurring, were wearing rubber gloves and face mask, and that sort of thing, well of course working in the hospital I was used to using that, it was just normal to me. Although of course Aids came in after I had left the hospital service, yes. I think that's just about all.

M.H. There is just one thing, you were talking about one thing that has come up quite a bit is the introduction of penicillin and you were just saying that you found that with, can you just go over the story with the gingivitis in the National Health Service I mean not all the details you had earlier, but just the basic story of how you used the penicillin.

Mr.J Oh I used the, the penicillin was used as a packing - previous treatment for this infection, the packing was an arsenical compound, the name I can't remember now, and through me being able to get penicillin I used this penicillin instead of the arsenical compound where I found it was a very great improvement because the bugs that caused the trouble were gram ??? negative and that was the main reason with penicillin and I should mention that penicillin we know was found by Alexander Fleming in Britain and Flory I think was the name of the other person with him, but with the war being on they couldn't produce enough, samples of it were sent away to England and that was why the Americans had the penicillin when we weren't getting it until much later in the war.

M.H. Oh I see.

Mr.J So that's what happened because I remember talking to some of the, dental practitioners and doctors, 'oh penicillin, no never heard of that, never seen it'.

M.H. But they were having it in America?

Mr.J In America, oh yes, they were having it in advance of what, oh they were able to produce, mass produce it really, that's the word, and it was only through me getting it from those couple of American built ships that had penicillin, otherwise I'd have known nothing about it.

M.H. So when you came back to the Island after the war was it available there for you to use or did you have to wait?

Mr.J Now, I, there would be an interval here I had to wait, where you could get it, moderately easy, yes, I think it was about a couple of years late because the services would have first called on it but that's understandable but no I can't be really certain and then of course after the penicillin, oh yes, talking about ulstra ??? gingivitis, I remember reading an article in British Medical Journal about the use of flagil for vaginal infection and I put two and two together because it was mentioned that one or two of the bugs that are in it that they occur in this ulstra ??? gingivitis so I decided to, got some tablets from the pharmacist at Nobles, the patients that were in hospital and I found that was efficient and of course it superseded penicillin but I suppose that two of them could be used in conjunction with each other in a very very serious case of which to my knowledge I have only had one and that occurred during the war, this chap was terrible, I had to finish up giving him morphine injections so that he would sleep, it was terrible, of course, we all know that the pain threshold of people vary, but he was the captain of a ship and we had to do something quick before he ...

M.H. If he was the captain of your ship ...

Mr.J And yet, the interesting part, now it just comes to mind, a little thing, I think this would be interesting for anybody reading what you are going to put together, this article, when I went out East, of course we were led to believe that Vitamin C was required to help to overcome to this treatment, and yet where we got plenty of fresh fruit and vegetables out east, they still got some of these cases and the cases were, appeared to be worse than what we got in Britain. They did, because I saw a number like that and of course I was very fortunate, one reason that where I applied for hospital my latter war service I was on a hospital ship.

M.H. Right so you'd had some ...

Mr.J I had some previous experience yes and that was very helpful.

M.H. Did your anaesthesia, when you needed to anaesthetise a patient for their treatment, here on the Isle of Man after the war, did you always have to go into hospital if you were going to anaesthetise -

Mr.J Oh no, for extractions, when I say straightforward extractions. a person required

shall we say fifteen extractions we used to get the patient's doctor, and some of the doctors they were quite agreeable, or sometimes they would say 'will and you get so and so in place, I am not keen on doing anaesthetics', some of the Doctors didn't like it at all and I did do, fortunately, I am giving something away in this respect, that I got to know a certain doctor and he was a consultant in Leeds and I bumped into him in a hotel on the Island here and I became very friendly with him and he invited myself and my wife to his place and he said because we got, had been talking about anaesthetics and he said right 'I give anaesthetics for dental surgeons besides working as a consultant in the hospital' so I went to his M and E. ??? He taught me intratracheal anaesthesia so I used to do, plonk the old tubes down and then I went and stayed with them, did about four days like and between us we would do 100 anaesthetics.

M.H. Gosh, in four days?

Mr.J Yes, in four days, my word, oh yes it was, quite hard work because as I say it was divided between the two of us so that reduced it considerably and then of course I watched him doing work in Leeds Infirmary I saw one of these, too, I saw a transplant, which I thought was very interesting indeed and then of course I say it wasn't my work but it was just that he wanted to see what was going on and once or twice he said to me you get on with the anaesthetic for me and help me out and that, but I didn't do it, I thought no, it's a bit too complicated with respect.

M.H. So It was quite, none of the sort of rules and regulations that you have now.

Mr.J Yes.

M.H. Freer then, that you could just get on and do your work

Mr.J Well of course now I know one regulation which I perfectly agree with, that no practitioner should give an anaesthetic and operate at the same time - you just can't do it, although I was quite a capable anaesthetist but I still wouldn't attempt an operation, no and the same way I know they do, these young fellows who are retired from, not retired, qualified, they are taught intravenous anaesthesia but I still think that can be dangerous if you are, unless you've got somebody who is absolutely capable to assist you in the surgery, but again, to do two jobs you can't do it at all. because I know that remark, what I have said will probably not be agreeable to some.

M.H. Well I think anyone sensible would realise that that's a ...

Mr.J Yes, I think I have about covered everything now.

M.H. Well I think you have, in fact we have done a tape-full so that's good.

Mr.J Oh have we, that's all right, good.

Hand written list of Practitioners taken from notes attached to tape.

Monday July 5th 1948.

Practitioners

Douglas

Messrs. J. James; J.W. James; P. A. James; N. R. James; S. Waid; E. Green; J Cain;
Power; H. Black; N. Douglas; W. Brown?; J. Blair.

Port Erin:

Messrs. McArd; G. Trustram.

Ramsey:

Messrs. Rowe; Curphey, Lawson.

PSM

1?

Castletown:

Mr. Chambers