

EDITORIAL : VAN DIE REDAKSIE

OUR SECRETARY RETIRES

Dr A. H. Tonkin leaves the Medical Association of South Africa at the end of March after 25 years' full-time service as General Secretary, a position he filled with great distinction and loyalty.

Arnold Hugh Tonkin was born in Mowbray, Cape Town, on 13 March 1907. He was educated at the Rondebosch Boys' High School and matriculated in 1924. After leaving school he joined the staff of a life insurance company where he remained for two years, until he decided to take up medicine as a career. He qualified at the University of Cape Town Medical School in 1932, and thereafter became house-surgeon at the Rondebosch Hospital and house physician at the City Hospital.

The missionary spirit moved him to take up a medical appointment at the Wesleyan Mission Station of Shawbury in the Transkei. There he worked for three years before entering the Union Mental Hospital Service in 1936, from where he was appointed to the Witrand Institution in Potchefstroom and to the Pretoria Mental Hospital from 1938 to 1940.

From 1940 to 1944 he held the post of Medical Superintendent of the Sir Henry Elliot Hospital in Umtata and that of Medical Superintendent of the Frere Hospital, East London, from 1944 to 1945.

Dr Tonkin's interest in Medical Association's affairs dates from the commencement of his medical career. He joined the Medical Association of South Africa in 1933 as a member of the Transkei Division, Border Branch and was later a member of the Southern Transvaal and Northern Transvaal Branches.

His organizational abilities were soon apparent and brought him to the fore amongst his colleagues. He became Honorary Secretary of the Transkei Division and later of the Border Branch. He initiated the *Branch Newsletter* in the Border Branch in 1944. He was elected President of the branch in 1942 and a member of the Federal Council in 1945.

On the retirement in 1944 of Dr C. Louis Leipoldt, who had been Medical Secretary and Editor of the *S.A. Medical Journal*, the Head Office and Journal Committee of the Medical Association cast around for a suitable person to fill the position of Secretary of the Association. (Arrangements had been made for a part-time Editor of the *Journal* which was issued bi-monthly at that time.) The choice fell on Dr Tonkin, with the intention that he should act as Organizing Secretary with a view to building up the Asso-

ciation and increasing its effectiveness. He took up his duties in January 1946 and immediately applied himself to his new position with enthusiasm in order to strengthen the Association by increasing its membership—the membership at that time \pm 2 500—and its funds. Every medical practitioner on the register who was not yet a member, was approached to join the Association and eventually a brochure containing a summary of the activities of the Association was compiled which is still sent to all newly qualified medical practitioners to introduce the Association to them.

Dr Tonkin's association with the insurance world prompted him to arrange an agency agreement with insurance companies in 1950, which resulted in the Association gaining a not inconsiderable amount in the form of commission on successful applications for insurance introduced to the companies. This applied to both life and motor insurance. He stimulated interest in the Benevolent Fund by appeals to the branches of the Association and canvassed the wives of doctors for their assistance not only for fund-raising, but also for them to take an interest in the widows of deceased colleagues.

The office administration was re-organized to increase its efficiency and to preserve the records of the Association in a proper manner. In 1950 the Federal Council of the Association adopted a proposal that a S.A. College of Physicians and Surgeons be established and appointed a Steering Committee to carry the matter further. Dr Tonkin acted as Secretary to this Committee and, as this



Dr Tonkin

was a subject in which he had been interested even before it had been broached in the Federal Council, he applied himself with diligence to the task of bringing the matter to a successful conclusion. When the College was established he acted as Treasurer on its first Council and he was a member of the Council from 1956 to 1967. For a time he was also Acting Editor of the *Transactions* of the College.

However, it was not only in the internal affairs of the Association that Dr Tonkin played a prominent part, but also in international medical affairs. When the Commonwealth Medical Conference (which became the Commonwealth Medical Association in 1962), of which the S.A. Medical Association was a founder member was formed in 1949, the meetings were at first attended by various members of the Association who were available. It soon became

apparent, however, that delegates to such meetings should be fully conversant with all the aspects of medical association affairs and that continuity would be achieved by appointing one person as delegate to each meeting, while other members of the Association could attend as observers.

It was obvious that Dr Tonkin was the most suitable person to act as delegate and during the many meetings which he attended, he was a worthy representative of his country. He made many friends among the representatives from other countries and took an active part in the deliberations of those meetings.

In the same way, when the World Medical Association was formed in 1947, the delegates to the earlier meetings were various members of the Association but later Dr Tonkin became the regular delegate. Here again he became an active delegate, so much so that he was elected to the Council of the World Medical Association for two terms of 3 years each and during the last year on the Council he was elected as Chairman—a very high honour indeed and a suitable recognition of the part he had played in that organization.

Through all the years that he served as Secretary of the

Association he had sought to give of his best, and in order to improve his services, he had taken the examination of the Institute of Company Secretaries. In 1961 he was elected an Associate Member of this Institute, and was later elected a Fellow of the Institute. He is also a Fellow of the South African Institute of Administration and Commerce.

Dr Tonkin has been elected Secretary of the Federal Council for each triennium since 1946.

He has had a long and distinguished career in the Boy Scout Association of South Africa. He was Deputy Chief Scout for South Africa for 10 years and the Chief Scout's Commissioner for African Scouts. At present he is Vice-President of the South African Scout Council.

Dr Tonkin held a commission in the SAMC Reserve of Officers since 1938, but was not allowed to proceed on active service as he was declared to be in a 'reserved occupation'.

When he leaves the Medical Association at the end of March he will proceed on one year's pre-retirement leave. He intends to settle in Grahamstown where he will serve on the staff of the Fort England Mental Hospital.

MEDIESE VERTEENWOORDIGERS

Met die snelle uitbreiding van die farmaseutiese bedryf in Suid-Afrika is daar min mense wie se funksie en bestaansreg so radikaal verander het soos dié van die 'Rep'—die Mediese Verteenwoordiger.

Die geneesheer van die vorige twee of drie dekades het dikwels rede gehad om te mor oor die mediese verteenwoordiger se kennis, en die skeptisisme en twyfel oor die feitlikheid van sy inligting het by sommige van ons ook nie bygedra tot die waardering vir hierdie mense en hul werk nie. Daar is met 'n halwe oor geluister, so min as moontlik uitgevra en die verteenwoordiger was blykbaar dikwels self ook maar dankbaar as hy die rymple wat hy oor sy produk geleer het, kon aframmel, sy advertensiepamflet en monster op die lessenaar kon neersit en afskeid kon neem van sy onwillige luisteraar. Trouens, ons is selfs geleer dat die inligting wat van mediese verteenwoordigers verkry word, baie gevaarlik kon wees, dat die mense heeltemal onopgeleed is en dikwels niks anders is as gewone pilsmouse wat hul verkoopstechniek op dokters beoefen nie.

Soos die farmaseutiese bedryf meer gevestig en uitgebreid geraak het, navorsingsfasiliteite en -omvang verbreed het en beskikbare middels vermenigvuldig het, het die aansien van die mediese verteenwoordiger verander. Vandag word algemeen erken dat die 'rep' noodsaaklik is om te voldoen aan die behoefte om as ingeligte tussenganger te dien tussen die bedryf wat die middels ontdek en vervaardig en die geneeskundige dienste (geneeshere, aptekers, hospitaalbeamptes, ens.) wat die middels moet voorskryf, verskaf en toedien.

Die mediese verteenwoordiger het dus die belangrike funksie verkry om inligting, betroubare inligting, oor nuwe geneesmiddels te versprei. Dikwels is hy die eerste bron waaruit die geneesheer sy kennis verkry in verband met nuwe metodes van behandeling. Lank is hy nie meer die onwelkome grammofoon met sy rammelende rymple nie, maar 'n welkome gas in die meeste spreekkamers—met of sonder sy monsters! Die uithaler-'rep' weet gewoonlik alles, letterlik alles, van sy nuwe preparaat en is in staat om sy

feite op so 'n wyse oor te dra dat dit op die mees kritiese geneesheer indruk maak.

Omdat daar gedurig tred gehou moet word met 'n ontwikkelende bedryf, word die aankondiging van die Farmaseutiese en Chemiese Vervaardigingsvereniging van Suid-Afrika om die opleiding van die mediese verteenwoordiger op 'n stewige grondslag te plaas, allerweë verwelkom.

Volgens die aankondiging word 'n tweejaarlikse diploma-kursus ingestel en kan die suksesvolle kandidate die Nasionale Sertifikaat vir Mediese Verteenwoordigers verkry. Die kursus word aanvanklik as 'n korrespondensiekursus aangebied deur die Witwatersrandse Kollege vir Gevorderde Tegniese Opleiding. Die doel is om die professionele en tegniese vaardigheid van die mediese verteenwoordiger te verbeter en hom volkome vertrouwd te maak met die samestelling, terapeutiese doeltreffendheid, nuwe-effekte, ens. van die magdom middels wat op die mark verskyn.

Met die eerste oogopslag lyk die kursus agtermekeer. In die eerste jaar word aandag gegee aan die basiese vakke en in die tweede jaar gaan die studente voort met patologie en word chemoterapie en farmakologie bygevoeg. Aangesien die mediese verteenwoordiger homself bevredigend moet kan uitdruk, verwelkom ons die aandag wat in albei jare aan die amptelike tale gegee sal word.

Die moderne farmaseutiese bedryf en die mediese professie het 'n simbiotiese verwantskap gevorm waarvan ons nooit weer ontslae kan, of wil raak nie. Daarom is dit so nodig dat daar onderlinge vertroue sal bestaan. Wat die geneesheer betref, moet hy seker wees dat die middel wat hy voorskryf, presies bevat wat dit voorgee om te bevat, dat dit die uitwerking sal hê wat verag word—en dat hierdie inligting en bykomende inligting wat verlang word, deur die mediese verteenwoordiger oorgedra kan word.

Dit is verblydend om te weet dat die nuwe kursus 'n groot bydrae sal lewer om te sorg dat die mediese verteenwoordiger, as tussenganger tussen die farmaseut en die terapeut, 'n man van volkome integriteit sal wees, goed onderleg in sy werk en 'n betroubare informant.