

History of Canadian Anaesthesia

John Albert Blezard (1888–1971)



Born in 1888 in Warkworth, Ontario, John Albert Blezard was one of a small group of physicians whose commitment stimulated the development of Canadian anaesthesia in the formative period between the two world wars. Though by nature conservative in his own practice of the art of anaesthesia, he was open enough to recognize the need for research and to encourage the use of new drugs and techniques by those whom he taught. Well trained according to the standards of his own day – after graduating from Queen's University in 1914, interning in New York before taking up general practice, and then practising anaesthesia in the Royal Canadian Army Medical Corps in World War I – he judged his teaching to be successful when his students became more accomplished than himself. A man of few words but of wide vision, John Blezard provided kind and wise leadership as an academic anaesthetist, first in Edmonton (from 1920–37) and then in London (from 1937–58).

Blezard's career in anaesthesia began in 1916, when he was appointed to the Canadian Army Hospitals in England, where he also served with the British Army Hospitals. From 1917 to 1919 he continued as an anaesthetist with the Canadian Field Ambulance in France. Like many other Canadian anaesthetists of this era, he learned anaesthesia primarily by practising it and also by observing it practised by experienced British anaesthetists in the crucible of war. Blezard was one of those who thrived under these circumstances, honing his skills because of the sheer need to do so as an army anaesthetist. Back in Canada after the war, he continued to keep himself informed about current progress in anaesthesia. Thus, in London he enjoyed being the first there to intubate the trachea under direct vision, and the first to use cyclopropane and, later, muscle relaxants. His two goals were to provide quality anaesthesia to his patients and to teach his students as well as he knew how.

Of great value to Blezard was his membership in the Anaesthetists Travel Club. Joining this select group when it was founded in 1929, he came to share knowledge and ideas about new developments in anaesthesia with leading American anaesthesiologists, particularly J.S. Lundy, A.E.

Guedel and R.M. Waters. So he was able to take back to Edmonton and Western Canada information about new agents such as cyclopropane and sodium thiopentone. His association with these leaders of anaesthesia – and with fellow Canadian members, especially Harry Shields and William Easson Brown of Toronto and Wesley Bourne and Harold Griffith of Montréal – convinced him that the specialty of anaesthesia should develop independently. It must have given him satisfaction to see markers of this development in his own career: the approval of Certification by the Royal College in 1942, the founding of the Canadian Anaesthetists' Society in 1943, the creation of an independent department of anaesthesia at the University of Western Ontario in 1949, and the introduction of the Fellowship in Anaesthesia by the Royal College in 1951.

Blezard, the first head of anaesthesia at Western Ontario, resigned from the chairmanship in 1958. He left behind him a basis for others to build on. Although the foundations of a sound building are seldom seen and too often taken for granted, it must be laid carefully without haste. John Albert Blezard was one of those pioneers whose time spent in building a foundation for others to build on was time well spent.

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