



History of Canadian Anaesthesia

Lemuel Ewart Prowse (b. 1914)

Although the formative period for Canadian anaesthesia occurred in the 1920s and 1930s, it was not until the 1950s and 1960s that there were sufficient specialists to serve the Canadian public adequately. The Royal College Certification in anaesthesia, introduced in 1947, and the Fellowship, approved in 1951, set acceptable standards for training, but until a large enough body of physicians had been trained according to Royal College standards there were relatively few recognized specialists in anaesthesia in hospitals outside the teaching centres. In Charlottetown, for example, the only certified anaesthetist for a decade and a half was Dr. Lemuel Ewart Prowse, who practised on his own until he was joined by Dr. Doug MacDonald in 1959.

Lem Prowse was born on January 13, 1914, in Charlottetown. He received his early education in the city, first at West Kent School and then at Prince of Wales Normal School and College. His father owned a department store but joining his father's business did not appeal to Lem. Smart enough to realize that an acceptable alternative was to continue his education, Lem Prowse enrolled as a medical student in the University of Toronto in 1933. After graduating he interned at St. Michael's Hospital in Toronto, after which, now it was wartime, he joined the Royal Canadian Navy as a medical officer.

After being demobilized in 1946, Lem Prowse made use of a government grant to take specialist training in anaesthesia. His choice of the McGill Diploma Course was a wise one, for he came under the influence of the "great triumvirate" of Wesley Bourne, Harold Griffith and Digby Leigh in Montreal and also Fernando Hudon in Quebec City. Working under these leaders, he experienced the entire range of anaesthesia as practiced in the 1940s. Continuous spinal anaesthesia via malleable needle and catheter for a wide variety of procedures, including thoracotomy; inhalation anaesthesia with cyclopropane as well as ether, chloroform, nitrous oxide, divinyl ether, ethyl chloride and trichlorethylene; intravenous anaesthesia with thiopentone and, of course, Griffith's curare; rectal anaesthesia with bromethol; and

regional anaesthesia with numerous blocks – all these became familiar to Lem. Some of the procedures he had to master were hair-raising: dental anaesthesia with nitrous oxide was sometimes a "frightening" experience, and anaesthetizing children straight off the street, as it were, for Ts and As was another frequently alarming venture.

In 1947 the well-trained Lem Prowse returned to Charlottetown, where, with his wife Pauling, he raised a family of three sons. Successful shortly thereafter in obtaining the Certification, he was now the first certified specialist to practice in Prince Edward Island. He covered the two hospitals in Charlottetown and sometimes the hospital in Summerside as well. The pattern of his work, which was soon much appreciated, demanded techniques that were based on expediency as well as competence and skill. Dr. Prowse particularly favoured continuous spinal anaesthesia, which he found best for his patients and for himself in solo practice.

As the province's only trained anaesthetist for many years, Lem Prowse served on the CAS Council for no fewer than 21 years – the longest that anyone has ever served on Council. Busy as he was, he was active in many other roles. On the national level he was a member of the Board of Directors of MD Management; back at home he set up the hospital insurance plan, ran the Prince Edward Island Hospital Insurance Commission, was a Director of the Medicare Commission and, after retiring from anaesthetic practice, he became project director of the plan whereby the present Queen Elizabeth Hospital replaced the two original hospitals in Charlottetown. All this time he maintained his service connections, rising to the rank of Surgeon Captain in the naval reserve; he also served as ADC to Governors-General Vanier and Michener.

Full "retirement" came with the opening of the Queen Elizabeth Hospital in 1982. Lem Prowse has fully merited a satisfying retirement, for in his day he contributed much to his province, and his country, as an anaesthetist, and a great deal as a citizen outside anaesthesia. David A.E. Shephard