

David Waterworth, President of the Ophthalmological Society of Australia (OSA), 1967 – 1968

David Waterworth was one of the founding members of the College and a well-respected mentor to Tasmanian ophthalmologists. He died at the age of 85 in 1997. He was the father of two daughters.

David began practice in Hobart in 1947 after six years in the AIF in New Britain and elsewhere. While an Honorary at the Royal Hobart Hospital in 1956 he performed the first corneal grafts in Tasmania. For 24 years he was chairman of the Board of Optical Registration and in 1968 was the last chairman of the Ophthalmological Society of Australia (OSA) just prior to the Australian College of Ophthalmologists (ACO) being established in 1969.

During his term as President of the OSA, issues that were dealt with were:

- Dates for Scientific Meetings fixed at least three years in advance so that the Overseas Visitors Committee could commence inviting overseas lecturers;
- The Gregg Lecture was to be planned according to the availability of fund and of lecturers of eminence;
- Agreement to a request from the Orthoptic Association of Australia to hold their Annual Conference in conjunction with the College Scientific Meetings;
- Preparation of a Public Relations statement in readiness for the Government Committee on Medical Benefits and the NHS stating the policy and contribution made by ophthalmologists to ophthalmic health;
- Decision not to acquiesce to the request by the Royal Blind Society for legal blindness to be made a notifiable disease;
- Preparation of a submission to the Senate Select Committee of England into Hospital and Medical costs for the Commonwealth Committee of Expenditures into Health Insurance;
- Preparation of a submission to the Commonwealth Committee of England on Optometry matters;
- Decision to select two representatives for the APAO Prevention of Blindness Committee;
- Consideration of the Dillon Report which recommended the abolition of the Honorary system in public hospitals;
- Establishment of a sub-committee to prepare rules for State Branches of the College to be considered by Council;
- Preparation of a second draft of Rules for the Orthoptic Board of Australia for consideration by Council;
- Adoption at the 1967 AGM of Constitution as amended with the only major differences of opinion being in the choice of name and plebiscite indicated "College" preferred;
- Preparation of Draft By-Laws for the ACO;
- Establishment of a sub-committee to consider a Qualification and Education Committee (QEC);
- Establishment of a Steering Committee to oversee the change-over from the OSA to the ACO.

David Waterworth entitled his Presidential address as "Doctor, Patient and Society", which covered the past 2000 years. He spoke about the primitive and witch-craft era, which was replaced by a more scientific approach with Hippocrates in 400 bc, and the healing power of nature with the value of nursing, baths, exercise and massage. However, this conservative approach did not survive transplantation to Rome where intervention was preferred. Rome had developed advanced systems of public health, hygiene and sanitation but medicine as a science had nothing comparable with Hippocratic medicine to show. The expansion of the Roman Empire placed emphasis on military medicine with the establishment of hospitals at strategic points in the empire. With the fading out of the Roman Empire care of the sick passed into the hands of the Christian Church and this lasted for nearly 1000 years with the monk becoming the poor man's physician. No gains were made by scientific medicine during these Middle-Ages and medical teaching, based on Galen's fallacious system, was pedantic and theoretical. It was the Renaissance that finally re-awoke the inspired discontent necessary to start medical intervention on the upward path again. Rudimentary public health through preventive measures developed to deal with the epidemics that swept through Europe while war wounds provided the stimulus for advances in surgery. It was realized that the morale and health of the fighting man could be a decisive factor in winning campaigns and therefore reforms in hygiene and diet were brought about. Up until the amendment of the Poor Law in England in 1834, governments were little troubled by the fate of the sick poor but the Industrial Revolution had brought about an escalation of communicable disease due to overcrowding, squalor and pestilential hygiene. Florence Nightingale's experiences in the Crimea War gave her the ammunition to use in her campaign to reform English nursing but explosive advances in medicine did not come until the 1930s with the sulphonamides, antibiotics and laboratory technology. During the latter 20th century, doctors were scrutinised by patients who were more aware of expected outcomes, and hospitals had become centres to conduct clinical research; to provide complex diagnostic services and intensive care for the sick and injured; and the best available specialist treatment, often with highly trained teams and complex expensive equipment. David finished his address by summing up some of the moral problems that doctors had to deal with in this enlightened age: in prolonging lives beyond their useful span and capacity to enjoy life, and other issues such as drug addiction, contraception, abortion, euthanasia and organ transplants.

In his spare time David Waterworth was a fine pianist and amateur boat builder. In his student days he had written radio plays and short stories, and in his retirement he wrote philosophical essays.