

JOHN H. BAKER

Edited transcript of a recording of John H. Baker interviewed by Chris Eldon Lee at Peterhouse College, Cambridge, on 15th September 2007. BAS Archives reference AD6/24/1/027. Transcribed by Dawn Sutcliffe on 12th September 2014.

[0:00:00] Lee: This is John Baker. Recorded at Peterhouse College, Cambridge on 15th September 2007 by Chris Eldon Lee. John Baker

Baker: John Baker. I was born in Somerset in 1944.

[0:00:17] Lee: Whereabouts?

Baker: Near Frome.

[0:00:22] Lee: What were you doing before you went south, before you joined FIDS?

Baker: I was at the University College of North Wales reading Biochemistry and Soil Science. Somehow or the other I always felt I wanted to go to the Antarctic, and that was what I wanted to do.

[0:00:41] Lee: Can you elaborate on that? Do you know why? Some inspiration in childhood?

Baker: No, I've often wondered why I wanted to go to the Antarctic. I have no idea why I wanted to go to the Antarctic; I just knew I wanted to go. It was early in my second year that I wrote to the British Antarctic Survey and I got a response from Martin Holdgate who was the senior biologist at the time, saying 'when you have done your degree get back in touch.' Which I did and he said 'come along and see me', which I did, which was in the condemned house off the Mile End road at the time which was appropriate.

[0:01:18] Lee: Why?

Baker: Because the Biology part of the British Antarctic Survey was associated with Queen Mary College at that time, and we were assigned a condemned house (laughs). Entirely appropriate! When I got there, Peter Tilbrook was there, Barry Heywood was there and Martin Holdgate was there. And he said 'yes, that's fine, you can come along and join us, but what are you going to do?' And I said 'I have absolutely no idea'. He said 'Well you'd better read a few books and go and see a few people'. This I

did and I quickly realised there was no way I could do biochemistry on Signy island at that time. The lab facilities just weren't up to it.

[0:02:04] Lee: You're talking about 1966?

Baker: This is talking about 1965. I went south in the *John Biscoe* in 1965 and returned on the last voyage of the *Shackleton* in 1968, which was the same year that Deception [Deception island]¹ blew up of course. We were to visit Deception on the way back but that's another story. Working at Queen Mary College was delightful in those days. I remember saying to Martin 'when shall I turn up and what shall I do?'. He said 'Well, don't get here before 10am, there'll be nobody here (laughs). Which was fine! I happened to live in London at the time which was also fine. Anyway.....

[0:02:51] Lee: You had to decide what to do when you went south?

Baker: Right. We'll talk a little bit about that. I went to see John Jeffers at Merlewood. He was the director of Merlewood Research Station at that time. Bill Heale was also there as a young scientist. And I'd been reading a lot about what I wanted to do and I'd read that the guts of some penguins were essentially sterile. Rather than having a huge microflora² as you would expect, they were sterile for some reason. And I thought that would be an interesting project to investigate. I said to Martin 'this sounds like something that needs looking into'. He said 'Yes, it's an interesting project. Go and talk to John Jeffers about it'. So I went to talk to John Jeffers about it, I remember very well sitting in his office one evening about 5 o'clock and he said 'What are you going to do?' And I explained to him and he said 'that's a terrible idea; you don't want to do that. Look at the microbiology of soils' he said. 'That's a much better idea.' (laughs) This was about a month or six weeks before we were due to embark, so I didn't have very long to rewrite the project. But I did and I don't regret it.

[0:04:08] Lee: You also didn't have very long to assemble the equipment you needed for the new project. Was that a harem scarem process?

Baker: Yes it was. I remember writing to Martin from Cross Fell on the Pennines where there was a small research station at that time, what is now the Cow Green reservoir which didn't exist at that time. I sent him a list of what I wanted from there in the hope that something might get there [Signy].

¹ Deception Island experienced volcanic eruptions during 1967-1969 after which the British base established there was abandoned.

² The bacterial population in the intestine

Some of the things got there. There was enough there so it was all right. In other words I could get some Agar³. There was already a microscope there. There was already an Incubator and an Autoclave and an Oven which were essential as far as I was concerned. So a lot of the stuff was actually there, which was very fortunate because when we got there I found I needed them for totally different reasons to the ones that I expected to use them for, and that brings us on to the operation if that's where you want to go

[0:05:16] Lee: We'll get to that in a minute

Baker: Ok sorry I'm going too fast.

[0:05:18] Lee: That'll be the climax of our (...)

Baker: Ok, Ok.

[0:05:22] Lee: So the work you were doing was to study precisely what?

Baker: Ok, what I was looking at was the growth and decomposition of moss peat which accumulates in the fringe of the Antarctic where the snow melts during the summer and you get a lot of moss growth. There is a very curious peat formation under it, a very fibrous peat which can be over a metre deep. What I was interested in was the rate at which the peat accumulated and the rate at which it disappeared and decomposed. At that time, I hadn't realised it, but measuring moss growth was not something that people in general did, but it didn't seem all that difficult down there as it happens, and it wasn't. So we managed to get an estimate of moss growth. The decomposition was much more difficult in the sense that if you took out a piece of this peat, say 20cm down, and from my experiments I knew it was growing at 1mm or 2mm a year, so you could work out roughly how old it was at 20cm down, and if you left that piece of peat in the relative warmth and light you would get a green shoot coming up from the moss. So in other words it wasn't dead at all. So if you are looking at decomposition of something which is probably not dying or a lot of it is not dying, it's not surprising its really very slow (laughs). But on the other hand it can't accumulate for ever. So some decomposition is going on, and it's an interesting problem which I don't think has really been solved yet. But the microbiology is interesting because of the enormously large population of yeasts in Antarctic peat. Normal soil in the temperate regions in the UK would have perhaps 200 yeasts per gram. Down there (Antarctica) we were getting 2 million yeasts

³ A gelatinous substance obtained from certain red seaweeds and used in biological culture

per gram. And since a yeast cell is 1000 times the size of a bacterial cell the biomass, never mind the numbers, the biomass is enormous for other things like inchatreades[phonetic] and so on to eat. So the microbiology of the soils down there is very interesting and as far as I can tell unique. I have tried to check out a few soils of the Arctic to compare the two, and we don't get the same high yeast populations in the Arctic at all, even under permafrost.

[0:08:11] Lee: So this was really unexpectedly pioneering work?

Baker: Yes

[0:08:16] Lee: Despite the equipment you had, did you feel hampered by the paucity of scientific equipment around you? Were you frustrated?

Baker: I was hampered by the lack of people to talk to about the problem because I didn't know anything about it and I wasn't trained as a microbiologist, I was trained as a biochemist. So I was learning as I went along so to speak. In that sense I did feel hampered. By hampered I don't mean that I felt disadvantaged, I felt tremendously advantaged in being down there and doing it at all. But nevertheless if one thinks in terms of how science should be done, that was not really an ideal way to do science; because in those days, of course, we had absolutely no communication in the winter with any scientists at all.

[0:09:24] Lee: None at all?

Baker: No. We were allowed to send out one paragraph per month home, which went out Morse code of course to the Falkland Islands and they were sent on by air, so your parents or whoever got one paragraph a month. And that was it. One sent out letters in the spring time when the ships were in but you wouldn't get a reply until the following year very often or no reply at all.

[0:09:57] Lee: And radio communication with scientists on Falklands?

Baker: There are very few environmental scientists on the Falklands anyway. I probably know environmental microbiologists on the Falklands. There was occasionally one on another base, and I remember talking to some Americans, who visited, about another microbiologist who was on another base but that was through them and I didn't ever speak to the microbiologist direct. So no there wasn't much communication in that sense. That's improved enormously these days. All to the good.

- [0:10:40] Lee: I get the impression that science was really romping forward at Signy in the 1960's. Would you agree?
- Baker: Yes. We'd just built a brand new laboratory, the Plastic Palace⁴, when I got there; the yellow one, which had been put up the previous year, and equipped. So that was the first time we had 24 hour power; we had laboratories which had basic equipment in them and you could do real experiments.
- [0:11:06] Lee: What was in there which you weren't expecting, in terms of equipment?
- Baker: It was more the other way round. It was what wasn't in there rather than what was in there! (laughs) In the sense that it was basic equipment and I've explained pretty much what was there. When we say 'what was there which was a surprise', was the number of stamped chemicals which people like Mike Northover and ...I've forgotten his name... had taken down there for their own projects and of course they were left and things that I'd taken down were also left. So we were gradually accumulating a decent chemical laboratory. That was a help: no question, it was a help. The microscopes were not superb, but they weren't bad. The Autoclave⁵ was rudimentary and rather small but for most of my work that didn't matter too much. For washing up facilities there wasn't much of course and I was using silicone grease on respirometers and the only way to get that off that I found was using petrol. So from time to time I would be washing up in a washing up bowl full of petrol. I was fearful that somebody might come in smoking but it never actually happened. (laughs)
- [0:12:39] Lee: Was health and safety something taken seriously in the '60's?
- Baker: It was taken seriously in so far as we had had one fatality on the base, and whilst I was there, there were fatalities on other bases. So in that sense health and safety was taken seriously. But it wasn't paid the attention that it is now by any means.
- [0:13:05] Lee: At no time did you think 'this is ridiculous what I am doing; I am taking a risk here that I shouldn't do'?
- Baker: No. I took a risk because I thought I wanted to take it and I thought that it was a reasonable risk to take given the alternatives. For example we would occasionally go to a field hut by ourselves. That field hut may be [incomprehensible] on the other side of the island and you might be there

⁴ Two storey cream building built at Signy in 1964.

⁵ Pressure chamber used to sterilise equipment using high pressure saturated steam.

for 2 or 3 days. When you stay by yourself over there, you really are by yourself. At winter time there is nothing. It's just you, and that would be regarded today as an unreasonable risk. In our day we thought well, there is a job to be done over there, or alternatively you wanted to go over there for some reason, a little privacy or whatever. It seemed to be a perfectly sensible thing to do and you always knew that whenever you wanted to you could just come back again. It wasn't that you were cut off.

[0:14:00] Lee: So you weren't hampered by health and safety?

Baker: We were not at all hampered by health and safety.

[0:14:05] Lee: Tell me about the medical facilities that were on the base at the time.

Baker: When I got there, there was no doctor there at all. They'd lasted the previous winter perfectly well without one. You're talking about 10 or 12 young men in their 20's who were generally speaking are medically fit. The problem of course is if they have an accident and break their leg or something like that. There was no medical staff there when I arrived, but the *Kista Dan* visited us in my first summer and happened to have 2 GP's on board, one of whom was coming to Signy Island, that was John Brotherhood, and one of whom was going to the Halley Bay base, that was Ron Lloyd. So when *Kista* came along we had for a whole 24 hours 2 GP's.

[0:15:07] Lee: And was that the moment of the story?

Baker: That's the moment of the story in the sense that as far as I was concerned I was a scientist and all scientists on the base at that time had to do meteorological observations (Met Obs.) every 3 hours in turn. So every week or something like that you'd have a day doing Met Obs. So you would start at 6 o'clock in the morning and you would run through until 3 o'clock the following morning. It happened that when the *Kista Dan* was coming in I was on that particular routine, so I'd been up until 3am. I knew the *Kista Dan* was coming in because of radio contact and so on, so we knew they were coming. So the following morning I was probably the only one in my bunk at about half past seven when people started to come ashore and one could hear what was going on because the bunks were not that far from the living quarters. I could hear them talking about 'well we're going to have to do something about this...an operation' and so on. I was thinking 'Oh God'. Lying there thinking 'Oh Lord, what's all this about?'

[0:16:21] Lee: So you got up?

Baker: I remember very well Barry Goodman came to my bunk and he said 'John, what concentration of Lysol do you use for washing down benches?' Concentration of Lysol? 'Look' I said, 'I've only been asleep 3 hours, give us a break!' (laughs) Anyway, we thought about it and we came up with some percentage. Whether it was the right percentage I have no idea but it was strong. The argument being that if you got it too strong that didn't matter, but if you got it too weak that might matter. I then realised yes ok, I had better get up and do things so I got up and wandered into the accommodation and Ray Adie was there. Have you ever met Ray Adie? He was the chief geologist and he was a grumpy old fellow. Perhaps I'm not supposed to say that because he's dead now. Anyway he said 'Why is this man not up?' It was all explained and he said 'I suppose that's alright then'. So that was my greeting from Ray.

[0:17:32] Lee: Take me through the problem because there was a (...)

Baker: The problem then was that the *Kista Dan* had a Danish crew, it was a Danish ship, and one of the sailors who could speak no English was very ill on board coming down from Stanley [Falkland Islands]. It was diagnosed by the 2 GP's that I'd mentioned earlier as serious appendicitis. And they monitored the fellow of course as you would expect them to and the problem was getting worse. The danger is that the appendix bursts in your intestine if you're not careful, and that causes septicaemia and that can cause death. So the dangers were very clear but of course the dangers of doing anything else are also clear. And one has to balance up which is the best thing to do in the circumstances. And they'd thought about this quite carefully on the ship of course as you would expect them to, and had come to conclusion that if possible they would try and do an appendectomy on Signy when they arrived there which was only a day or two's time. They were not aware of what facilities were there at that time because they hadn't been there the 2 doctors; some other people had and were explaining what was there. Because the base hadn't had a doctor the previous winter, we didn't have the medical supplies that would normally come with a doctor.

[0:19:12] Baker: What happened that morning was that John Brotherhood and the other doctor disembarked to have a look round, without the patient at this point. He'd been left in his bunk on the ship. And they were saying 'that's fine we can use this bench in this room and that'll be alright, and we can scrub it all down and we gather there's some microbiological fellow around who can help us with the sterilisation', and that was where I came in. But, we didn't have much in the way of equipment at all. Because it was all somewhere in great pieces in the hold of the ship being unloaded and we

didn't have the time to unload everything to sort out where the medical stuff was. It wasn't labelled in that sense it was just in one of those chests somewhere. So I said 'well, what do you need?' and I was talking to them about it and they were telling me they need so many sheets sterilised, so many instruments sterilised, clothes sterilised and everything else. So I was thinking 'how am I going to do all this?' Then we said 'what instruments have we got?' and they said 'well, I haven't got any instruments'. So I said 'I've got my school bisection kit which I used for cutting up goldfish and rabbits and things like that. I can sterilise that if it's any good'. So we had a look at that and they said 'it's perfectly good, scalpels and forceps: that's ok we can use that.' So I said 'alright, you tell me exactly what you want and I'll sterilise all that'.

[0:20:47] Lee: Would you say the whole operation depended upon your school dissection kit? What would you have done if you hadn't had it?

Baker: If we hadn't used my dissection kit we might have used razor blades. That would probably have been the alternative.

[0:21:08] Lee: So you had plan B?

Baker: So we did have a plan B. But that just makes it a bit more difficult because although you can use razor blades alright, what you use instead of forceps...you've got eyebrow tweezers and that kind of thing or you might find one of the other zoologists might have some tweezers around. We could have managed, we would have managed.

[0:21:30] Lee: So the school kit was a valuable asset?

Baker: That was its *raison d'être*. It was superb! It did very well. My problem was the time; because it takes an hour at 160 degrees centigrade to sterilise sheets and things and if you put them in an autoclave, the cycle of that is about 14 or 15 minutes by the time you've got it up to temperature and got it down again. There were several loads that had to go in in order to get everything sterilised. So I knew it would be well after lunch before we would ever get to the stage where we were able to do anything. So I was the time limiting factor in a sense. I was trying to get everything sterilised as quickly as I could, and it's a boring thing because you have to just wait, once you've filled the autoclave or the oven or whatever it is, you're waiting for the cycle to complete while you're getting the next lot ready and so on. Anyway Mike Northover, who was the base leader, had organised the benches very quickly and efficiently. We got everything off the shelves and swabbed everything down and that was all looking wonderful, no question about that. We had at that time also fortunately

found the medicinal ether which we could use as an anaesthetic, because of course that's another problem, how do you actually administer the anaesthetic. It was a simple mask over the face and nose with a cotton wool pad in it and you just dripped this medicinal ether on. John Brotherhood had done some anaesthetics before so he was familiar with that and that was not a problem. And we thought right ok now, this was about the middle of the afternoon, everything was ready, we can get the patient ashore and start the work.

[0:23:46] Baker: The patient came ashore – that was salutary for me because I looked at this man, who was in his mid-twenties or something like that, not very old, my kind of age – and he really looked ashen and ill and sick, and that was very encouraging for me because I thought here was a really sick man and if the worst comes to the worst, ok he's sick now but we're going to do our best, if the worst comes to the worst at least we've tried. If he'd looked well when he'd come in you would think 'Oh my Gosh, we're going to cut this guy up and this is not so good'. So I was greatly relieved to find this man having great difficulty walking and staggering in. He was as good as gold in the sense that we just said 'lie on this bench' which was clearly an ordinary bench, it had a sheet on it admittedly, but it was clearly an ordinary bench in an ordinary room and he was going to be operated on and he knew it, but he must have been in so much pain he just did whatever he was told, he just lay down. And Ron fortunately had done appendectomies before. I had never ever been at any kind of operation before but you help out, do what you can. Mike Northover was there, I think Charles Howie might have been there too at some point. The first thing to do was to get the guy unconscious so that we could start the operation. Ron Lloyd was checking the guys pulse and his general wellbeing, whilst John Brotherhood up at the head end was tipping the ether onto the mask. I don't know whether you know much about ether, but ether is extremely volatile and you breathe it in and that makes you unconscious. It's a very good anaesthetic but it is really very volatile so it doesn't just go on the mask when you're dripping it, it goes everywhere; the gas gets everywhere as well. This was a problem because not only was it an anaesthetic for the patient, but the rest of us were breathing in this ether as well to the extent that Mike Northover keeled over completely and had to be taken out!(laughs) He just couldn't take the ether anymore. I take my hat off to John Brotherhood and Ron Lloyd, both of whom managed to cope remarkably well with ether.

[0:26:25] Lee: There was also some question about the danger of accumulation?

Baker: Absolutely right.

[0:26:31] Lee: How do you mean? Can you elaborate on that?

Baker: Ether is extremely flammable and explosive. So if you get ether in the right mix with oxygen, in other words air, and you spark it, it will bang. This lab had fridges, incubators and things with thermostats going on and off, and the ether, which is heavier than air accumulates at the floor level, so you don't know it's there unless you are down near the floor level, and it gradually builds up. I was much more worried about the problem of an explosion than I was actually about the patient. Because I could see a much bigger disaster than a Danish patient suffering an appendectomy. So I turned off all the apparatus that I could and opened the doors and windows as much as I could, but there is a limit to that because you have to keep reasonably warm for the patients' sake if nobody else's. Just to try and let the ether drain out of the room, because that's what it does effectively, it's like heavy gas, it just drains out at the lowest point. And very fortunately to my way of thinking we didn't suffer any explosion so that was jolly good.

[0:27:56] Lee: Whilst the operation was being carried out, you were in the room; you were dressed in whites

Baker: More or less whites, the head scarves as you can see in that picture there were triangular bandages which we just tied on, some of which were white, some of which weren't. We had rubber gloves but not latex gloves. These were rubber 'Marigold' gloves. We didn't have surgical gloves as such. Yes, we were all kitted out that way.

[0:28:25] Lee: And your job during the operation itself was what?

Baker: Assistant Surgeon

[0:28:29] Lee: Assistant Surgeon?

Baker: Yes, I was holding the bits and parts [instruments]. Ron would say 'well can you just give me this' or 'take that' or 'hold this' or whatever. That was my job.

[0:28:41] Lee: So you were passing the famous forceps, scalpel, and swab? O.k. So you were pretty close to the action were you?

Baker: I was. Those are my hands there somewhere⁶. Yes!

⁶ During the interview they must have been viewing a photo taken during the operation

[0:28:54] Lee: Were you comfortable with this?

Baker: Remarkably so! Given that I'd never done anything like it in my life before or since and one's looking at a fellow human being, being cut up. I wasn't as bothered as I thought I might have been. It did bother me at the time before it happened, but once it's happening, well you're busy, you're doing things, you're helping, at least you think you're helping, you might not be. And it turned out that Ron did a very good job in the sense that his initial incision was spot on. We found the appendix without any problem, which is sometimes a problem in actually finding the darn thing. But it was relatively easy to find.

[0:29:46] Lee: Cooperative?

Baker: It was a cooperative appendix, relatively easy to cut out. Stitching up afterwards was... not bad. We did have some sutures; that was another thing we managed to find. Because that would have been a problem if we didn't have the surgical sutures to sew him up with afterwards. And it worked out actually very well. Meanwhile of course the people upstairs who were not involved in the operation were doing what Fids normally do when they get together with a ship and a bit of alcohol, was starting a party and it happened to be directly above us and I remember at one point having to send out a message saying 'For God's sake can you keep the noise down a bit because it's really coming down very loud!' (laughs)

[0:30:36] Lee: So appendix out operation successful. Then what?

Baker: Well then we half carried the guy upstairs to a bunk and put him in a bunk for the night after we'd assessed his wellbeing in the sense that once the ether mask had been taken away he came round really quite quickly. That essentially was it in the sense that the following day, blow me, the Danish fellow was up before me and was wondering around in his clothes perfectly well apparently.

[0:31:15] Lee: No pain?

Baker: Far less pain than he'd had the previous day. As far as we know he was very well thereafter. So that was a tremendous success.

[0:31:25] Lee: And you did all this on no sleep?

Baker: Yes

[0:31:30] Lee: Have you ever heard of him since?

Baker: No, absolutely no idea what happened to the fellow.

[0:31:38] Lee: That must be one of the most unusual medical moments in the history of the Antarctic, wasn't it?

Baker: I can't answer that I'm afraid. I don't know what else has been done on other bases. I really don't know but as far as we were concerned it was. The only other medical hazard we had while I was there was actually John Brotherhood's toothache. When he came to me one morning and he said 'John, I have terrible toothache. Can you pull it out?' Which again, it is not what you're really expecting. But, that was the way it was so I pulled it out.

[0:32:21] Lee: With?

Baker: Well we did have some dental pliers but I hadn't realised it at the time and most people don't but dental pliers are designed to fit specific teeth. So although we had a pair of dental pliers it wasn't actually designed for the specific tooth, was the problem, which was an upper molar. And of course there's another problem which is that you need to make sure that you've got the right tooth. Toothache tends to be rather nonspecific as it goes along the jaw. And you think, no you've got a toothache, but when you're tasked with pulling somebody's tooth out, and you think 'how am I going to know if it's the right tooth?' which was one problem. Another problem was infection of course, and I did actually give John Brotherhood an intramuscular antibiotic. Again I hadn't done much in the way of human injections, although I had actually taken some blood before. Anyway, I injected him in his back side with some penicillin or something to try and prevent any possible further infection. In terms of anaesthetic he had a fair amount of scotch and that was all. So he was fully conscious although having had a reasonable amount of scotch was in less pain that he might have otherwise have been but he was fully conscious throughout. I take my hat off to him; I think he did extraordinary well. And I pulled his tooth out and he said it was a lot better afterwards but that was maybe because he didn't want another one pulled out!

[0:34:13] Lee: There's an anecdote somewhere that the Danish sailor took a Brenda Lee⁷ album with him when he left.

Baker: Yes, that was the same Danish sailor I'm afraid.

⁷ Brenda Lee was a top-charting vocalist of the 1960's

[0:34:23] Lee: What's the story there?

Baker: It was the guy who we'd done the appendectomy on. The record disappeared when he did and that was the one that he liked listening to so we assumed it went with him. Which is not much of a way of saying thank you but there we are. That's one of the reasons why I'm not bothered about what's happened to him since!

[0:34:46] Lee: (laughs) Oh I see. You thought he was less than grateful?

Baker: Well, you don't have many records on an Antarctic base so you know when something's gone. And since we were going to be there for another year before we got anymore records, to take one of the records seemed to me to be rather mean. Wouldn't you agree with that?

[0:35:08] Lee: Yes, I would. Have you had a rather unusual interest in medical matters since? Television dramas and (...)

Baker: No

[0:35:16] Lee: It didn't change your life?

Baker: No.

[0:35:25] Lee: What have you done since you left BAS?

Baker: Since I left the Antarctic I was very pleased that the British Antarctic Survey was prepared to fund me for a further 3 years to get my PhD at UCL⁸ which I did. I then joined the Freshwater Biological Association in their Dorset laboratory, their headquarters are on Windermere but they had a substation in Dorset where I was again the only microbiologist. I seem to inhabit these roles. It was not a problem for me to find I was the only microbiologist again. I spent 17 years I think looking at the microbiology of chalk streams in southern England largely.

[0:36:17] Lee: One more question then to do with the operation. Are you aware of any procedural changes in field BAS policies as a result of the close call?

Baker: I believe you're supposed to have an appendectomy before you go now, certainly if you overwinter. I can't be sure about that but as far as I understand it; you're supposed to have your appendix (...)

⁸ University College London

[0:36:42] Lee: For example was there then a policy for every base to have full medical kit no matter what after that. In other words was there a lesson learned from the moment that you're aware of?

Baker: Well, it was always known that there's a risk if you don't have a doctor that was always known. It was certainly reinforced at that point. Whether that incident actually resulted in material changes by itself, I don't know and I wasn't in a position to know because I was down in the Antarctic for the following 2 years or something and you don't hear much about that kind of thing which is a great relief.

[0:37:28] Lee: John Thank you very much

Baker: Pleasure.

[0:37:30] <ENDS>

Possible Extracts:

- Assembling the equipment for the project at Signy. [0:04:08]
- The project in Antarctica: the growth and decomposition of moss peat [0:05:22]
- Communications from Signy [0:09:24]
- Health & Safety in the 1960's [0:12:39]
- The Story of the appendectomy operation performed at Signy [0:15:07]
- The problem with gas fumes when using ether as an anaesthetic [0:22:57]
- The dangers of using ether as it's a flammable liquid [0:26:31]
- John Baker as Assistant Surgeon! [0:28:25]
- The Story of extracting John Brotherhood's tooth [0:31:38]
- Procedural changes in BAS policies as a result of the appendectomy at Signy [0:36:17]