

## Obituary

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**T. Michael MOLES**  
**MB BS, DTM&H, FFARCS, FRCA, FHKCA, FHKAM**

At any meeting to do with emergency and disaster medicine or trauma one could behold a bearded, mandarin-like figure, resplendent in a khaki safari suit. This was no ordinary mandarin - this was one of the most intelligent, humorous, and charismatic persons in the world. This was Mike Moles. Mike died at home in Hong Kong on the 20<sup>th</sup> March 2001 aged 66.

Son of a medical Knight of the Realm of Irish stock, Mike was schooled in India, Egypt, the Sudan and the United Kingdom. His school career was distinguished by prizes, scholarships, leadership roles and sporting achievements, notably in field hockey and shooting. He went to medical school at St Thomas's Hospital in London, qualifying in 1958. After house officer posts in his teaching hospital he embarked on a career in anaesthesia, training at Southampton and major teaching and specialist hospitals in London. During his training he devoted five years to military service with Royal Army Medical Corps, serving with the renowned Gurkha Parachute Squadron in Borneo and Nepal, the Parachute Field Ambulance and the British Military Hospital in Hong Kong.

Military service was to have a profound effect upon his career. He developed an interest in trauma, mass casualty management, anti terrorism, chemical and biological warfare agents and humanitarian aid which was to last throughout his professional life.

After completing his regular military service he continued to work with the Reserve Forces acquiring an expertise with the Special Services. His skills and experience led subsequently to him being a sought after consultant to field surgical teams, training establishments, anti terrorist medical intervention centres, and mine clearing projects in the Middle East and throughout South East Asia. Mike was a hands-on person, always in the vanguard, leading from the front, as was his wont.

His civilian career also flourished. He was appointed consultant in anaesthesia, trauma and intensive care at Southampton in 1970 and set about creating a major incident response plan that was to become a blue print for many hospitals in the UK and abroad. He was a founder member of the British Association for Immediate Care and indeed it was he who named the association and coined the term

BASICS, which was to remain to the present day, some 30 years on.

He also played a key role in the development of the World Association for Disaster and Emergency Medicine (WADEM) in the early years and continued to work tirelessly for that organisation up to the time of his death, co-ordinating the leading other disaster medicine organisations in the world. He played a major role in organising the 1985 World Congress in Brighton in the UK, and was Chairman of the highly successful World Congress in Hong Kong in 1989. He attended and contributed to every congress of the Club of Mainz and WADEM since they started. He was appointed First Vice President of WADEM in 1997.

He was a founder member of the International Trauma Anaesthesia and Critical Society (ITACCS) in 1988 and again contributed to every annual congress since. He was a member of the Executive Committee of that organisation from the beginning and was Chairman of the International Co-ordination Committee and Liaison with the United Nations.

In 1980 he moved to Hong Kong to take up the post of Reader in Anaesthesia at Hong Kong University. He was the senior academic in the speciality at the time at the University. In his clinical work he specialised in the care of patients with trauma and those undergoing major maxillo-facial surgery. His knowledge and ingenuity with the difficult airway acquired in this field stood him in good stead for his international work in trauma and mass casualty management.

Unsurprisingly, he soon became a recognised leader in Hong Kong anaesthetic circles and was a leading light in the Society of Anaesthetists of Hong Kong. Because of the vast number of his international friends and contacts, and his astute networking talents, he succeeded in bringing the most distinguished lecturers to the island. His leadership and administrative skills and impressive powers of persuasion and diplomacy led to the foundation of the Hong Kong College of Anaesthetists and he became the first President of that most successful organisation. He held executive positions in over 20 learned societies and four Honorary Memberships of societies in China, Japan and the UK.

He retired from clinical anaesthetic practice in 1995 but was appointed Honorary Reader to the University of Hong Kong in recognition of his very distinguished service. He continued to undertake

aeromedical repatriation trips until the time of his death.

He wrote prolifically with over 30 books and publications in peer reviewed journals and edited six books of congress abstracts. His forte, however, was the spoken word and he delivered addresses to learned societies and organisations all over the world on more than 100 occasions. Mike Moles could always pack the hall at any congress. He had a unique style of delivery, body language, humour, pathos and a rich baritone voice which held the audience spellbound. I never heard him give a talk that was other than masterly. His gift for lateral thinking made him an innovator and many have returned home after listening to him with their batteries recharged and enthusiasm rekindled.

Mike Moles was marvellous company – a brilliant raconteur and mimic without equal. In the Foreign Correspondents Club in Hong Kong he would regale eminent, experienced journalists with stories which fascinated them. He had a finger on the pulse of the medical, military, financial and general political scenes throughout the world and was a mine of information. His stories were painted with a rich hue of background details so that the listeners had a truly vivid picture in their minds.

His private life was very happy. His long time partner, Pat Elliott Shircore saw to that. She is an excellent designer and Mike joined into help with many of her projects. Together their joint ingenuity had a catalytic effect that resulted in some quite stunning, unique creations. As with all geniuses Mike

was a wonderfully exciting and mercurial character to live with. No one knew Mike better than Pat. She was sensitive to his mood and supportive and stimulating as was needed. They lived in a small village at the easterly tip of Hong Kong where the Pacific Ocean and the South China Sea roll ashore. Mike's passion was sailing and he was a veteran of many ocean races including the South China Sea event, which is one of the most demanding races in the world. He would take house guests to the promontory outside their house and wax eloquently and excitedly about the sea and his exploits upon it. One could not help become infected by his boyish enthusiasm.

He is survived by four children by his first wife Shirley. They are Mandy, Rory, Jono and Lucy. Mike loved them dearly and was inordinately proud of them for they have all done extremely well. He was delighted with his grandchild, Freya.

Mike's death was, by all accounts, dramatic, as was his life. He developed pain in his neck and chest at home. Over a few minutes the pain descended to his abdomen and legs. He knew what was coming and explained to Pat exactly what a ruptured dissecting aneurysm was and what it meant. A gentleman to the end he apologised as he died in her arms. His ashes are scattered in the South China Sea. We all miss him.

**P. Baskett**

**J. Fisher**

## Book Review

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### **Intensive care in New Zealand. A history of the New Zealand region of ANZICS**

Trubuhovich RV, Judson JA. 150 pp.,  
Auckland, Trubuhovich & Judson, 2001. \$7.00

Australasian Critical Care Medicine has reached a stage where a review of its history is important. Trubuhovich and Judson complete the New Zealand record that complements the ANZICS commissioned history commemorating the first 25 years of the Society which was written by Garry Phillips and Ron Trubuhovich.

To see where we have come from is important to consider where we will go. The authors have spent an enormous effort in retrieving all the pieces of

information concerning the New Zealand history of Critical Care Medicine. While there is a table of contents that allows the reader to proceed to the section of interest, unfortunately, there is no index. Nevertheless, this is a minor criticism of an extremely comprehensive and thoughtful documentation of the New Zealand chapter of ANZICS that is presented in this book.

**L. I. G. Worthley**

Department of Critical Care Medicine, Flinders  
Medical Centre, South Australia 5042

