

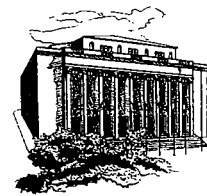
13. *International Presentation*

IN the air on my way to Stockholm I went over my slides and the text of what was essential to describe the rotation-advancement approach. It just was not possible to condense it into less than seven minutes at the least. I had to get two more minutes somehow.

The program distributed at the Congress registration set the cleft lip and palate session at 2-5 P.M. Tuesday, August 2, in the concert hall. T. P. Kilner, with whom I had spent many a day at Alton, was designated as the session chairman. The vice-chairman was R. Trauner of Austria, who had visited Gillies during my time at Rooksdow House. The secretary was H. Schjelderup of Norway, an old student of Gillies. Still no chance was seen for getting extra time, but at least there seemed to be a *friendly* head table.

Fogh-Andersen was listed as the leadoff speaker with "Remarks on Etiology of Harelip and Cleft Palate with Special Reference to Heredity." I dropped a couple of beats when I saw that my paper, "A Primary Camouflage of the Unilateral Harelook," was set for second. Marcks was to follow with "Secondary Cleft Lip Repair" and Potter with "Nasal Tip Deformities Associated with Harelip."

During the morning session I noted the strict timing on each speaker with a white light on the rostrum for the two-minute warning and the red light for the end. Even from the back of the great hall with its high ceiling the acoustics proved to be remarkable, and, as soon as the crowd left for lunch, I voice-tested to make certain one could speak anywhere in the hall and be heard by everyone.



By 2 P.M. the concert hall was full, and Kilner, with gavel pounding on the table, called the cleft lip and palate session to order. I sat in the back of the enormous room near the center aisle. When my name was called, I rose and started slowly down the aisle addressing the austere audience. In unison all heads turned toward the center aisle as I proceeded while saying:

Ladies and gentlemen, one of the principles of plastic surgery taught me by Sir Harold Gillies, the Honorary President of this Congress, is "Never throw away a thing until you are certain you do not need it." With your permission I will make use of the time it takes me to get to the rostrum, as I may need it. Many surgeons have tried to camouflage the harelook, but the multitude of techniques actually being used today is indication enough that surgeons are still not satisfied. Then too one cannot help but be impressed at the number of papers being given at this Congress which are devoted to the secondary correction of the harelip deformity. One thought has been echoing in my mind for some years, "Make the strong side produce the major flap," but it was not until I was surrounded on all sides by grinning Korean harelips that a method crystallized. In my quest for a flap from the strong side I began to focus on this element and realized that here was two-thirds of a cupid's bow complete with tubercle, philtrum column and its dimple. They are merely in a distorted position.

By this time I was backing up the stairs to the speaker's platform.

For those who say "Only God can make a cupid's bow" it might be added that if God gives us a good portion of a bow, for His sake, it should be used as such.

Upon my arrival at the rostrum I turned to Professor Kilner, who in solemn officialdom started the clock, but not without the barest perceptible twinkle over his half-spectacles.

First I paid brief homage to the straight line of Rose, Thompson and Kilner, then to the flaps of Mirault, Blair, Brown and McDowell and of Hagedorn and LeMesurier and finally said:

We are in a new era which was spearheaded by Tennison's Z, soon followed by Cardosa and Marcks' further observations. Now I want to get into the act!

My first slide was a crude drawing of the rotation-advancement incisions sketched in Korea on the orange-crate drawing board.

INCISION X



IN INCOMPLETE CLEFTS
USE SIMONART'S BAND
IF IT IS STRONG ENOUGH



INCISION Y



Then followed slides of the results on a series of Korean children such as this little girl and other earlier ones, later published in the First International Transactions by Williams & Wilkins in 1957.



It was suggested:

If the method produced these results for me in a Korean field camp without the aid of general anesthesia (sometimes), modern facilities, adequate lighting and post-operative nursing care, just think what you can do with it!

The lights were out during the showing of slides and just in case there would be a need for a "lifeboat," I draped a black handkerchief over the rostrum light. As it happened, I was able to complete the slides, reemphasize the cupid's bow, philtrum and dimple, natural position of the scar and simultaneous nasal correction and then pocket the black handkerchief before the red light began blinking. As I descended the stairs to my seat, I remember that Gillies, Aufricht and Denis Browne in the front row nodded approval.

Yet this unorthodox performance by an unknown was considered brash and even impertinent by many present and no doubt was responsible for setting back their acceptance of the method for a number of years.

Recently, in February 1973 during a visit to Miami, silvery Skoog with a puckish gleam recalled this presentation in the Stockholm concert hall 18 years before. In his retelling of the tale to my residents, he generously added that during the walk down the aisle I had held up *placards* of the operation, describing the method as I strolled slowly along, so that by the time I reached the rostrum, my paper was almost finished. This improvisation is rather nice, and an attempt to perpetuate it will be made.

REACTION TO ROTATION

The immediate and the delayed reaction to *rotation* and *advancement* was mixed. In general, the method seemed to arouse interest. The following afternoon was free for a boat trip to Drottningholm Palace, the royal summer residence. As we docked, Milton Adams, determined to get a Soviet visa for a visit behind the Iron Curtain, disembarked with a Russian plastic surgeon

under each arm. As he passed me on the gangplank, he called over his shoulder,

Good results but I couldn't see your plan. Your diagrams were not clear and did not show up well.

In fact, those diagrams are still the bane of the method. They were not intelligible enough at the Congress presentation, and they have been resurrected by others too often since, as they have long been obsolete.

In Drottingholm Palace courtyard, after a performance in an eighteenth century theatre, Martin Entin told me he would be more interested in the method after five years when the results could be better evaluated.

On the bus ride to Uppsala the following morning I had the good fortune to sit beside Professor Karl Schuchardt. His comment was encouraging:

The best cupid's bows I have seen.

He invited me to visit his clinic in Hamburg after the Congress. His invitation was accepted and, along with the renowned Arthur Barsky, I observed his concise execution of a LeMesurier lip procedure. During the operation and the accompanying discussion, Barsky made the offhand comment that after all it was only a matter of whether the surgeon chose to use "a triangular or quadrilateral flap," and I disagreed with him. After the operation, Professor Schuchardt asked my opinion, and I answered by saying that I thought he would like the rotation-advancement approach. He agreed it was possible and promised to try the method. It has been one of my disappointments that in all the years that have followed he has never tried it. Many of his students have, but as far as I know, never the professor.