

By Dr William Chew



A Tribute to the Late Dr Gwee Ah Leng

17 July 1920 – 31 March 2006

In the early 1960, there were only two medical units – the University Unit or Medical Unit I and the government unit headed by Professors Gordon Ransome and E Monteiro. Overcrowding of patients was a feature and not infrequently, old ward 19 in Medical Unit II could be overloaded with 70 patients after an admission into a ward meant for 30 or 35 patients. In spite of this, chaos was not a feature! The Ministry of Health then decided that a new government medical Unit Medical Unit III, headed by Dr Gwee Ah Leng and Dr Lee Yong Kiat (both from Medical Unit II) was to be set up. Included in the staff were Dr F Jeyaratnam (who started the Geriatric Unit in Tan Tock Seng Hospital), Dr Chee Kim Ho (who went into Consultant practice in Tanglin Medical Centre) and Dr Tham Ngiap Boo (who went into family practice). I joined MU III in 1964, after a paediatric posting.

From its establishment, Dr Gwee was to set the standard of practice with his amiable ways. Never without a smile, in spite of his many responsibilities (for example, the editorship of the *Singapore Medical Journal*, Master of Academy of Medicine), he was never too busy to attend to a consultation requested by his staff. We marvelled at his acumen, perception and analysis of patient-problems that we presented to him during the ad hoc emergencies or at the Grand Ward Rounds that were conducted bi-weekly or weekly. Never one to rebuke his staff, Dr Gwee was always encouraging and gave full reins and trust to his staff to manage the day's routines.

Probably the best feature in MU III was the tearoom in the out-patients' clinic. Dr Gwee always stopped his work at 10.30 am to avail himself for a discussion with his staff – be it the politics of the day (a very hot topic then) or to discuss patient problems or research. Through all these, we developed a camaraderie of spirit that was never before seen. Dr Gwee was very

amenable to suggestions, and when we had too many psychiatric and suicidal patients, he brought in Dr Paul Ngui (psychiatrist, then in Woodbridge Hospital) for combined ward rounds. For convenience, we also transferred our lunch time “death rounds” meetings to be held in the Alumni Association.

Although Dr Gwee was always kindly and amiable, he was never one to over-assess the ability of his staff. He believed that if a doctor was clinically competent, his abilities would be known and he would be readily promoted by the Ministry. Unfortunately, this was not the practice, and his staff may have lost out on promotions with what was a lesser recommendation to the Ministry and the Public Service Commission.

Dr Gwee was my teacher, my mentor and my friend. He taught me patience, care and concern for our patients. He also guided me in clinical research and we wrote papers on tetanus and organophosphate poisoning – the common problems of the day. Together we also saw the first patients with “paraquat poisoning”. He gave me trust and opportunity to organise the activities of the departments, undergraduate and post-graduate teaching, and manage affairs of the Academy of Medicine when he was the Master. I am grateful to Dr Gwee for these opportunities in my education. When Dr Gwee retired in 1971 for government service, I was the only one left of his original team still in Medical Unit III.

I believe that we will not see a department with the same camaraderie of spirit as that of the Medical Unit III under the leadership of Dr Gwee Ah Leng – a man of many seasons, intellect and a kind and caring spirit. Those of us who worked with him will always remember him as a mentor and a friend. Our one regret is that we never thought it needful to hold a reunion. Farewell, Dr Gwee Ah Leng, we will always remember and hold you in our hearts. ■