

ABBY PATON

Date: 16 December 2011
Place: S A Agulhas on route to SANAE
Interviewer (Q): Lize-Marie van der Watt | History Department, Stellenbosch University
Respondent(A): Dr Abby Paton | Medical Doctor | SANAE 50 2010-2011

- Q:** This is an oral history interview with Dr Abby Paton, and it's today the sixteenth of December, I believe?
- A:** That's right.
- Q:** Now the first thing I want to know, is, the road to Antarctica, if you can call it that, how did it come that you are on this vessel?
- A:** I've been asked this question a number of times, it's never really easy to answer. And I think that whatever answer gets given you, by whoever, it's not going to be the full truth, because it's almost impossible to reach one's own full truth of why one's going into really extreme conditions. Simply, I've always wanted to go to the Antarctic, I've always wanted to see the Aurora. I've always wanted to... get out there and do something. And I heard of, I didn't realise, that sort of ordinary doctors could go down South. I heard about it in the middle of July, through a hospital member, who's married in fact to one of the directors of the HMO. And heard about it and I said want to go to the Antarctic, she phoned her husband. Within two days I've been phoned by Simon Vosloo from DEA&T. And they said send through your application, I sent it through, had an interview about two weeks later.
- Q:** And then when were you appointed? Immediately after the interview?
- A:** No, I had to have the medicals first. Basically, once we'd had the interview, they said 'Well, you just, you just need to pass the medicals then we can confirm that you're on board'. Literally, as well as figuratively. Had my medicals, obviously no problem, and I was officially appointed from the first of November.
- Q:** From the first of November, that means that at least a month of that is spent on the shores of South Africa still, what were your duties there?
- A:** In November, training.
- Q:** Training.
- A:** So the first set of training I had was mental training. That was at Simon's town. Then I had to go through, pharmacy stocks and supplies basically, and do radiographic training. And after that I joined the team and went on the team training.
- Q:** Training. You said that earlier that the Surgeon General also phoned you up. What kind of questions did he or she ask? Who is the Surgeon General, first? Maybe I should get that.
- A:** I can't remember his name. He mentioned his name once.
- Q:** Okay, so he just phoned you up and asked you a couple of questions, like...?
- A:** He didn't even really ask me that many questions; we actually just had a good chat. He said, I could, you know, you could see from the qualifications I have ATMS experience, I have all the rest of it. That, I shouldn't really have a problem with the sort of things I would be dealing with. So, we just had a sort of doctor to doctor chat as colleagues.
- Q:** Did the surgeon general have any experience of Antarctica himself?
- A:** He hasn't been to Antarctica. I think he's had a couple of voyages, but nothing really major, I think he might have been down to Marion.
- Q:** Might have been down to Marion.
- A:** I actually, ja, I'm not too sure about that.
- Q:** And you were also appointed trip doctor for the voyage down?
- A:** Yes.
- Q:** Did they seek for another doctor, or...?
- A:** No, it's standard.
- Q:** Standard.
- A:** It's standard. When you have a doctor on board you may as well use the doctor on board.
- Q:** Okay, so they didn't get an extra doctor.
- A:** No.
- Q:** And the buoy-run. Who's going to do the medical things there?
- A:** There is, I think that there's a nurse on board, Petrus, I can't remember his surname. As far as I

know, he will be doing the buoy-run, but the doctors don't do the buoy run.

Q: All right, okay, Petrus [indiscernible], is Petrus doing the buoy-run?

A: That's it, yes. I assume so.

Q: Not going to do the buoy-run if there's more construction work.

A: More construction? In which case, I don't know.

Q: Okay.

A: Ja, I'm pretty sure I'm not doing the buoy-run. And now, well, I have been told that I'm not going to be doing the buoy-run, I'm going to be going to SANAE, and they're going to be eighty or more people in SANAE.

Q: SANAE, yes.

A: So they're going to need two doctors.

Q: Yes, what you do, what do you expect to happen in SANAE? When you get to the ice?

A: What do I expect to happen when I land on the ice? Well I have to stay until the cargo is completely off the ship, because that's the, that's the injury time. How I'm going to get to SANAE, I don't know, and nobody seems to know.

Q: How you're going to get to SANAE?

A: Yes.

Q: You fly.

A: I presume so, not sure about that. They might send me cat train.

Q: Okay.

A: And what happens when I get to SANAE, well I'll meet up with my colleague, Lewellyn Clarke, and he will, you know, go through the various facilities we have, the various things I'm going to be facing, instruments, stores I'm going to be in charge of as well as the, medical side of things.

Q: Okay, so you may also be in charge of food stores?

A: Yes.

Q: Did you have a say in the food that's going down?

A: I did so in theory, yes. By the time that we booked food it was a little bit too late, but in fact I don't think I would have had much else input there anyhow. I saw the stock that had been ordered, and Paul Lever, the team leader, has a list of what is already there. And we could have, had we had any real preferences, had said please can't you provide this and provide that. What does happen is, at the end of next year... ja, next year, I will put in a medical request, and I'll be putting in the food requests in combination with the team.

Q: Okay.

A: But the food stores there are excellent.

Q: Excellent?

A: Ja, there's really not much which – I mean it'll be greedy to add things.

Q: Are you adding things like multivitamins... stuff like that?

A: The hospital does have a supply, not a brilliant supply, so in fact I've spoken to my team members, and suggested to them various things that I'd like them to add. You know, it's an overwinter team, particularly without sunlight, and that type of thing. So I would like them to bring their own Vitamin D. There is some down there for the latecomers, so I'll be pretty sure my latecomers will not be without.

Q: Okay, so you weren't supplied with Vitamins from the department's side, Vitamin D –

A: There wouldn't be enough to keep the entire team going for a full year.

Q: For a full year, okay. It seems like you chatted a lot to your predecessor...

A: No, I've never spoken to him.

Q: Never?

A: I've just...

Q: Well, over email... not at all?

A: No, no unfortunately there is very limited contact, which is a pity. What I have had the opportunity to do now that I've been on ship is – we have the records here. So I've been able to read what my predecessors have said and done.

Q: Okay. But you, to Lewellyn on SANAE base, you didn't really have the opportunity to talk to him.

A: No.

Q: Any other previous doctors you got an input from?

A: No.

Q: No...

- A:** I could have had, but it would have been difficult in that I was really pushed for time. So, I was far too busy trying to assimilate what's going on now to be able to sort of backtrack. And also, by the time that I got a list of medical supplies, that was literally in the last two days. That I actually saw what medical, what medication was going through. And I still don't know what's in, down there. I mean, obviously I have a reasonably good idea, but there's certain things there I don't know. I'm an orthopod, strictly speaking, and I do not know at all if orthopaedic equipment is down there, as an example.
- Q:** Are you an orthopaedic surgeon?
- A:** I'm not a qualified orthopaedic surgeon, but I've been doing orthopaedic MO work for a long time, and that's my area of interest, my passion if you like.
- Q:** Which is, I suppose, quite sensible in Antarctica, where you can get orthopaedic injuries quite easily.
- A:** Yes. Well, I'm orthopaedic and trauma trained and a little bit of anaesthetics, quite a useful combination to have down there, because mostly it's going to bumps and sprains and cuts and frostbite, and things which need some sort of surgical or orthopaedic input. I assume. And the odd patient, I mean the odd person going a little bit mogy because they are cabin-crazy or whatever it might be.
- Q:** Do you have a supply of anti-depressants going down?
- A:** Yes. I made absolutely sure of that. I have anti-depressants, and I have sedatives, anti-psychotics, I can handle anything like that.
- Q:** Are you also expected to do a bit of pastoral care?
- A:** That's rather difficult to answer. One's in a slightly difficult position there, because we're a team of eleven people who are going to be together all the time. I would like the team members to feel that, not so much pastoral care, but to feel like psychological care. That they can come and talk to me and that there'll be absolute confidentiality. But it's rather difficult complaining 'Abby I don't like the way you mash your potatoes' to come to me saying 'Look, Abby, I've got this deep emotional...' So, I think, I would like to feel the team will feel that they can approach me at any time and just say they, you know, they need a bit of help in this, that and the other. I don't know, I can't really say expect it...
- Q:** So it's not on a list of duties?
- A:** It's not on a list of duties, it's... you know, you are expected to give psychological counselling. And I certainly wasn't asked anything about that. When I had my interview I was asked about attitude to various potentially controversial things.
- Q:** Such as?
- A:** For instance, such as homosexuality, such as dealing with people who've had abortions, how I feel about abortion myself, and things like that.
- Q:** Would it be expected of you to perform an abortion if somebody falls pregnant?
- A:** No.
- Q:** Do the female team members sign in their contracts that they will do their best not to fall pregnant?
- A:** Our contract says that, if we do fall pregnant, our contract is terminated forthwith, immediately, and that we have to pay to get back to South Africa. So we are evacuated at our own cost.
- Q:** Well, for the other party, who got you pregnant, what happens to them?
- A:** Nothing, I presume. In fact, definitely nothing. But, if I'm not aware that having sex makes me pregnant... it's up to me to take care. And there should be various means by which I can take care. So, you know, I don't feel terribly excited that whoever got me pregnant is allowed to continue. I don't see that as being judgmental. It's...that's the way that it works.
- Q:** Okay, do they give the female team members the option of taking oral contraceptives at the government's cost? So you are taking down oral contraceptives, as well as other contraceptives?
- A:** They are down there, yes.
- Q:** Are they down there? You're not taking –
- A:** Well, no, I'm not.
- Q:** No, not that you, as a part of your medical supply, I mean.
- A:** Yes. Here, no. On board ship, no. I'm a little surprised about that – we don't have oral contraceptives aboard ship.
- Q:** Okay, no oral contraceptives on board ship, but other contraceptives?
- A:** No.

Q: Okay, I'm asking these questions because –

A: Obviously it's an issue.

Q: It's an issue, and it changed from when male only crews and teams in the 1980s up to now, where it's a whole different set of, presumed different, set of medicinal problems. Or, well, if you can call it a problem, I wouldn't call it that, but do you understand what I mean?

A: Yes, yes, pregnancy itself is not a problem, but pregnancy down there is a major problem. Yes. They did ask me whether I was prepared – they asked me if I could see to it to do abortions. I basically said that ethically, I am not prepared to do abortions.

Q: You're not prepared to do?

A: Abortions. It's a choice that I have, so it's not as though it is a requirement or anything like that. I mean they heard I wasn't prepared to do them, they did ask me, 'So, you know, how do you feel about people who've had abortions?' They're patients, I treat them, I don't feel anything about them. So they did try and assess my general attitude and whether I would be somebody who'd be, who you could come to with any sort of problem, whether I'd be like I say 'Homosexual?! Disgusting!' or if I'd be 'Ok fine, let's be sensible about this.'

Q: Who did the interview?

A: Henry Valentine, Sam Oosthuizen, Kusi Ngxabani, and in fact I can't remember the other person, I'm afraid. So it was purely DEA&T team. And in the interview they said to me that they're basically not going to ask me medical questions, because I'm medically trained. So it was more personality, you know, how would I get on down there, what would I expect to find down there? Things like that.

Q: The team, was the team at all worried about the fact that you're missing two team members? Was there at any stage a Plan B?

A: I think, yes, of course we were worried, one of the people who we're missing is a diesel mech. And you don't want to be down there over winter with only one diesel mechanic. Not only for the amount of pressure it's going to put on him, but when some of the expedition team leaves, there's still enough daylight for us to do expeditions and that sort of thing. And that means sending off a CAT or two into the wherever, and do you keep your diesel mech at base, or do you send him off with the crew? Because if the expedition team runs into a problem they don't have a diesel mech, they could be in serious problems. At the same time, if they go off happily with the diesel mech and something happens at base, it's an actual disaster. So, yes, we were concerned about that.

Q: But, do you think they would have sent you down with just one diesel mech

A: No, they wouldn't. What they usually do, what they have had to do in the past, is send down somebody, fly them down a bit later.

Q: Presuming they can find somebody later.

A: Yes. So the electrical engineer... I don't think we were quite as worried, because, particularly someone like me, I don't quite understand what his duties are down there.

Q: And you have quite a few engineers on the team.

A: Yes, exactly. So I wouldn't have been able to see where not having him would be a disaster, but I could see where not having the Diesel mech might be a disaster. So, perhaps with the electronic... I mean, there's already an electrical engineer, we were less concerned, but that was more ignorance than –

Q: – than knowledge.

A: Just following up on what you're asking: What did concern us, and still concerns us a bit is that we've been through a bit of intensive training together. These two have joined us not having had any of the training. And while we can catch up on the facts of the training, the team building, they've lost out on that a bit. Luckily the two we've got are great, they've integrated themselves beautifully. But there always was... we've been through things we didn't discuss: the rock-climbing, ropes-courses in Pinkervale. They weren't there. And it's a frame of reference which they've lost out on.

Q: I understand – it can have implications for team . When was the first time you met the team?

A: I met the team the first time... the first time would have been the nineteenth of November. It was a lot later than any of us would have liked. Luckily I had actually met three of the team members before at Hermanus because I was working there, so I met them there. That was the three electronic engineers. And, so I had that bit of 'in'. But to meet them that late, for the first time meeting all of them brand-new would have been a little bit disconcerting. So it would have

been better, probably shouldn't say this out loud, but it would have been better having met the team right at the very beginning. The beginning of November, for instance.

Q: Yes, since you've been appointed. In terms of the environment, did you get preparations or team training on facts like temperature, the wind speeds, average wind speeds, what to expect from the environment that is Antarctica?

A: Me specifically, no. The reason why I say this is because I wasn't there for all the team training. The team, except me, went to cold weather with the training, learning how to use the CATs and that sort of thing.

Q: Why didn't you go for cold weather training?

A: Ask DEA&T.

Q: Okay... I mean, how do they expect a doctor just to remain on base?

A: Nobody knows why I didn't go to cold weather training. But what I'm saying is that they could well have been given information there. So, we had a lot of lectures and I'm pretty sure that quite a lot of these facts were covered in lectures, but I don't remember one specific lecture saying, you know 'You will be dealing with temperatures on average between minus twenty and minus five in the summer, and minus forty minus...' you know, I don't remember them being specific. I think that to a certain extent it was taken for granted. And if you're applying to go down to the Antarctic, you should have some idea of what you're going to be dealing with. If I can give you an indication, the very first question I had in my interview was: 'Are you aware that you've applied to work in a place which is cold and white.' I did apply to go to Antarctica, didn't I? Well yes, cold, white... yes, sounds about like what I wanted.

Q: Okay so they asked you that. You said you have always been interested in Antarctica. What do you mean by that? As a child did you read books –

A: Yes.

Q: ...such as?

A: Lots of adventure stories and variety... from when I was very young. Willard Price, to a bit older, Alistair MacLean... a lot of people who have written around there, Duncan Kyle. So, that was mostly the Arctic. But I think I got the interest from my father as well because he's always been interested in the cold extreme and the aurora and that sort of thing. So it's just part of the family background, and always has been that way.

Q: So it was something that was part of your frame of reference, not something completely fleeting.

A: No, no it's always been something I never knew I'd ever manage to attain. I mean, I planned to go up to Siberia some time, sort of wanted to go right right right far North. Now I'm going right right right far South.

Q: Wonderful. Okay, thank you...

A: Right.

Q: ... very much.