'DOC' LOOKS FOR A QUIETER LIFE

by Jeffrey Woodgate

DOC Dwyer is no longer head medico of the AFP. He has said farewell and left for Sydney and a well-earned retirement. But members haven't seen the last of him.

Although he officially retired on 14 April he will remain medical consultant to the AFP in Eastern Region. And that is a fair indication of the dedication of Doctor Michael Dwyer.

Since he became Director Medical Services AFP in January 1985, he has met and assisted thousands of police in the course of his many duties.

"The great variety in our work makes it one of the best medical jobs in the country," Dr Dwyer said. "Basically, we are running an occupational medical practice. The whole AFP is the size of one good large medical practice in which we provide total medical care for police officers in the workplace."

Dr Dwyer and his colleague, Dr Louis Pilotto, have each been seeing more than 600 patients per month in their role as providers of clinical, preventive, administrative and forensic medicine.

Each of these areas of medicine is important to the AFP.

Preventive medicine involves the doctors advising members on general health and fitness matters, health risks to police such as those posed by AIDS and hepatitis B carriers, emergency first-aid procedures and stress management techniques. In addition, there are various routine medicals to be performed for promotional and other administrative purposes.

Forensic examinations are undertaken on victims of beatings, sexual assaults and other attacks and the doctors are occasionally called to the scene of a death to formally pronounce life extinct and allow police to proceed quickly with their investigations.

"Our aim is to provide as much support as possible to officers on the job," Dr Dwyer said.

"We eliminate all unnecessary risks in a police officer's work, and protect them as much as possible from those risks which are unavoidable. For instance, no police officer can ever escape the risk of being shot. The survival chances of someone wounded or injured hinge upon the actions of their partner in the critical first ten minutes after impact. We advise members on first-aid procedures. We also advise on softbody armour and other protective gear.

"One quarter of all battlefield casualties are found to be soldiers who've died from non-lethal wounds. In other words, people who could have been saved if given proper care in time."

Mike Dwyer can speak from experience on this.

A Country Practice

He graduated from Sydney University in 1953 with a degree in medicine and a degree in surgery.

He went into general practice at Inverell in the New England area for several years and lived the life of a country doctor. He joined the Royal Australian Air Force Reserve and acted as relieving medical officer at Amberley Air Base, near Ipswich. About this time he learned to fly Tiger Moths.

During his time in Inverell he regularly attended to the needs of the Aboriginal community at the old tinmining town of Tingha.

He was clinical superintendent at the Mater Misericordiae Hospital at North Sydney in 1960-61.

He joined the Army Reserve Medical Corps while in Sydney and continued service with the reserve when he went into general practice at Gosford for the next few years.

Vietnam

In 1968 he volunteered for full-time army duty in Vietnam and for nine months worked at the Australian field hospital at Vung Tau, about 20 minutes by helicopter from the Australian task force base at Nhui Dat.

"I relearned a tremendous amount of medicine and surgery in Vietnam," he said. "I spent two months as surgical registrar— we had a tremendous amount of major trauma surgery to perform— and seven months as outpatients registrar. Over 6000 patients a month passed through the



Dr. Mike Dwyer.

field hospital. Most were Australians though we'd admit some Vietnamese as well.

"Once a week we'd set up an outpatients clinic at the local school at nearby Nam Binh as part of our medical civil aid program."

I asked if their hospital was anything like the American one portrayed in the MASH television series.

"Yes, and no," Mike said. "I'd say we had the world's best accident hospital. We had very good surgeons there and they really did perform medical miracles. Australian hospitals in Vietnam achieved the lowest death rate in recorded military medical history.

"In the First World War (1914-1918) about 25 per cent of all patients admitted to army field hospitals later died. The rate during the Second World War (1939-1945) dropped to 14 per cent of total admissions. In Korea (1950-1953) the rate of deaths per admission dropped to 9 per cent. American hospitals in Vietnam had a death rate of 2 per cent of admitted patients. Only 0.8 per cent of patients died after admission to Australian hospitals in Vietnam (1966-1972).

Mike returned to general practice at Gosford for another ten years, and remained in the reserve. In 1977 he was MO to an army survey squadron in Irian Jaya. In 1980 he accepted an invitation from the then Surgeon-General and joined the regular army. He was appointed senior medical officer at the Land Warfare Centre at Canungra in south-east Queensland in 1980-81.

He arrived in Canberra in 1982 as Colonel Preventive Medicine (Health Directorate), responsible for the preventive medicine program for the whole Australian army.