## History of Canadian Anaesthesia

## Georges Cousineau (1906-1987)



When Georges Cousineau began his practice as a family physician in 1934, he certainly did not anticipate the forthcoming evolution of his career into that of a pioneer of anaesthesia, a founding member of the Canadian Anaesthetists' Society and a primary mover in the establishment of anaesthesia as a bona fide specialty in Québec in the early 1950s. He was all of these, and, as well, President of the Society in 1952–53 and the Society's Gold Medallist in 1967.

Born in St. Laurent in 1906, Cousineau received his BA (1929) and MD (1934) from the University of Montréal. After a few months of practice, he was invited to provide anaesthesia at Hôpital du Sacré-Coeur, which was dedicated to the care of tuberculous patients. Thoracic surgery and orthopaedic surgery were the more important activities in the operating room, with Norman Bethune as one of the thoracic surgeons and Edouard Samson (also a pioneer) as head of orthopaedic surgery. Bethune had a profound influence on Cousineau; the very difficult practice of thoracic anaesthesia and of thoracic surgery in the 1930s stimulated both to try to reduce the morbidity and mortality of thoracic surgery in tuberculous patients. The poor pulmonary function of most patients, compounded by the wasting due to the disease, created difficult conditions for the patients and their physicians. Bethune suggested the use of the endotracheal tube and introduced Cousineau to Harold Griffith, who showed his colleague how to insert the crude uncuffed tubes of that era. (Their shape was maintained by a coiled spring inside the tube.) They were a vast improvement of the Ombredanne mask used for thoracotomies and some extensive orthopaedic procedures in the prone position. This first formal encounter between Cousineau and Griffith began an association and friendship that lasted for decades.

Bethune, an inventive and curious physician, had obtained some hexobarbital (Evipan) from German friends, and Cousineau, in 1934, was probably the first anaesthetist to induce intravenous anaesthesia in Canada. He used hexobarbital for several years, until thiopentone, which was easier to use and more predictable, became

available. Bethune left for Spain in 1936, but Cousineau continued the search for ways to improve the outcome of thoracic anaesthesia and surgery. He tried high spinal anaesthesia with mixed results, though thoracic epidural block (used in approximately 100 cases) gave more success. The latter decreased bleeding and allowed the use of electrocoagulation, which, of course, was not recommended during anaesthesia with cyclopropane, which was used at Sacré-Coeur from the early 1940s.

Since he had had no formal training in anaesthesia, Cousineau attended the McGill evening seminars chaired by Griffith. After the war he initiated, with Léon Longtin, similar activities for French-speaking colleagues of the Montréal area. He was instrumental in setting up a residency programme in the University of Montréal network with other colleagues from Québec. The recognition of anaesthesia as a specialty by the Québec College of Physicians in 1950 was due to their common efforts.

Already elected Fellow of the International Anesthesia Research Society (IARS) in 1938, Cousineau was, along with Griffith, Roméo Rochette, Wesley Bourne and Digby Leigh, one of the founders of the Society as we know it. He remained active in the IARS, and, with Eugene Allard in Quebec City in 1953, organized one of the few IARS meetings held outside the United States. Cousineau was also elected an Honorary Fellow of the Faculty of Anaesthesia of the Royal College of Surgeons of England, in 1951.

Cousineau left Hôpital du Sacré-Coeur in 1946 when it became a general hospital, continuing his career at l'Hôpital Notre-Dame de l'Espérance (Ville St. Laurent) until he retired in 1976. He died on July 13, 1987, after a long fight against severe lung disease. His wife, Marcelle, is still alive and active. She supported her husband indefatigably during his long career, during which Georges Cousineau made an indelible mark on the specialty and the Society.

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