

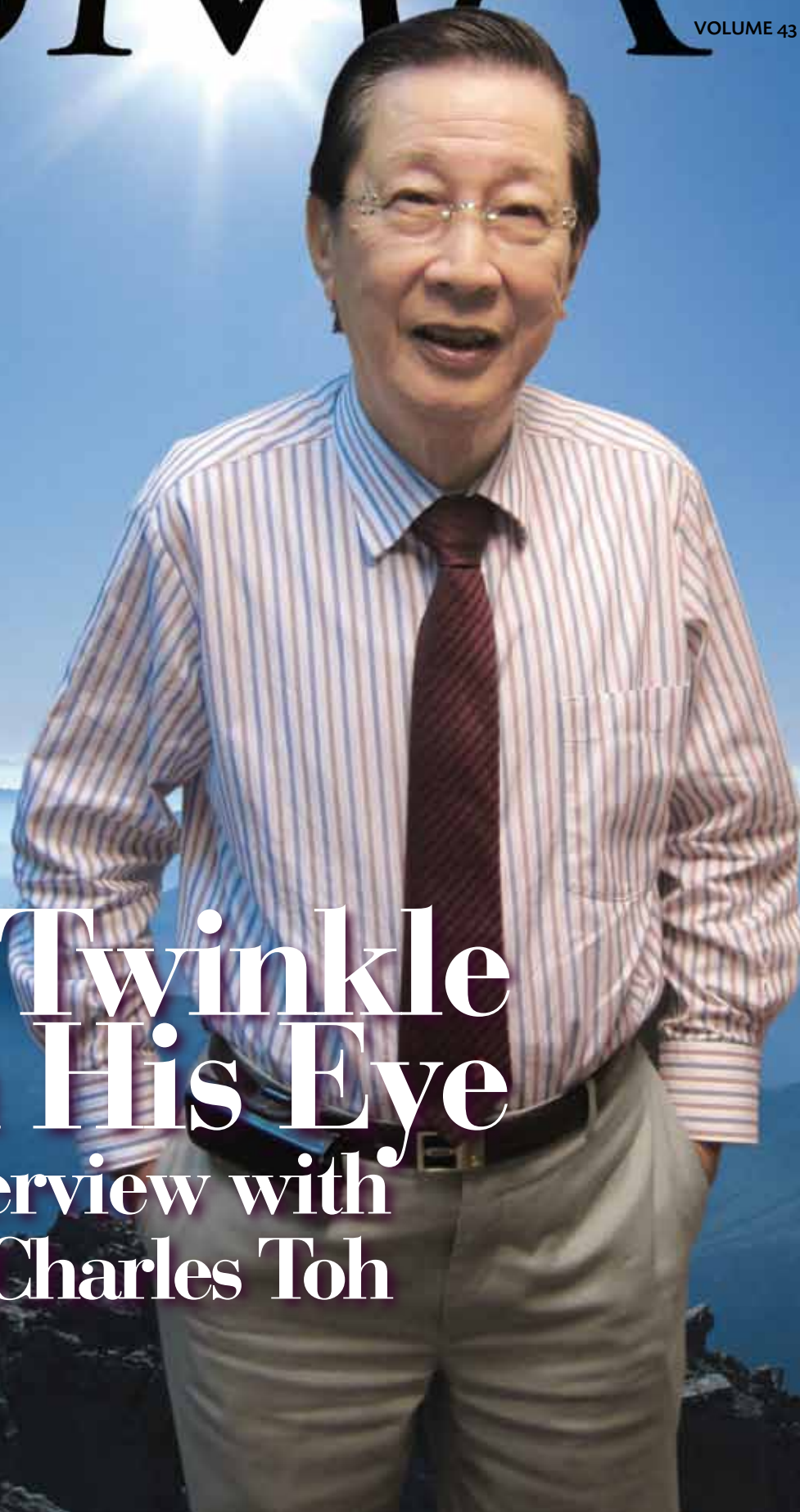
SMA NEWS



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A Twinkle in His Eye

Interview with
Dr Charles Toh



A Twinkle in His Eye

Dr Charles Toh pursued his medical education in Australia and the UK. He was appointed Associate Professor of Medicine in 1970 and served as Vice-Dean of the Faculty of Medicine, University of Singapore, from 1969 to 1972. He has had a long career in the fields of Medicine and public service. Currently, he is a cardiologist in private practice and Deputy Chairman of the Public Service Commission (PSC). He was made an Honorary Member at the SMA Annual Dinner in May this year.

Growing up

SMA: How was growing up like?

Dr Charles Toh – CT: I consider myself to have been born fortunate. Except for the first few months of World War II, our family never suffered much physical deprivation at any time. As a little boy, I lived in a terrace house in Ipoh. We had a car and Cantonese amahs to look after us.

My father was quite a family man. He was a sales manager for Guthrie, a British company. He did not have any university education, and only had the equivalent of “O” Levels in those days, but that was considered good enough. He was given a job as a sales manager and subsequently became *compradore* (equivalent to Chief Executive Officer) of a big British bank, Mercantile Bank, which was later absorbed by Hongkong and Shanghai Bank in 1959. He was very straight and honest, and was quite a serious person.

My mother was very lively. She was born in Penang, and was a Nyonya. She was a very good cook, very jovial, and liked by all her friends and customers. She had learnt the jewellery trade from her mother, and was the sole diamond merchant in Ipoh. In the old days, the goldsmith shops only sold gold and not diamonds. I used to help her sort out the diamonds and help calculate their values, and learnt a lot about jewellery from her. We had a lot of dealings with wholesale jewellers, who were mostly Jews, like the Flinters and Greenbergs.

When I was seven, we moved to a bungalow with one acre of land. I recall it had lots of fruit trees and three badminton courts. My father was President of the Ipoh Badminton Association at that time.

I started schooling at the age of six. I went to a Hakka Chinese school which was run by the Meichow Association, on the insistence of my uncle who was a staunch Hakka. At the age of eight, I transferred to Anderson English School, which was a state school. My English was poor. Fortunately I had a very good teacher, who was Dr Nalla Tan’s sister. She gave me extra tuition in English in her spare time. After three months, I was promoted to Primary 2. So I did not really lose any time.

Then came the war. It disrupted our schooling for four years. We spent the first six months hiding in a rubber estate and in a tin mine. When the British surrendered, we came back to Ipoh and I attended a Japanese school for about three years. Although English was not taught as a subject, our local teachers taught other subjects in English. Japanese lessons were taught mostly by Japanese teachers.

The Japanese were a very musical people. At the end of each lesson, we had to sing a Japanese song, and being a reasonably good singer, I was the leader for three years. Till today I still remember those old Japanese songs. Before the war ended, my father decided that we should leave the Japanese school because there were rumours that the Japanese were starting to recruit Asian boys into the army. I spent the next 12 months working in my father’s shop. As the Mercantile Bank closed down during the Japanese Occupation, he was involved in manufacturing and selling cigarettes. My mother continued with her diamond business in spite of the war. As Japanese banana dollars were weak, it was safer to keep gold and diamonds.

After the Japanese surrendered, I went back to Anderson School. Fortunately, during the war years, I kept up with my Mathematics, and to a lesser extent, Chinese. In the end I did not lose any time, and was able to sit for the Senior Cambridge Exam at 18. After that I went to Sydney and enrolled in Sydney Grammar School for nine months, in preparation for my entry into the University of Sydney’s medical school in 1949.

Pursuing a career in Medicine

SMA: What led you to Medicine and more specifically, Cardiology?

CT: My father was in banking and my mother in the diamond business, and although I did help her at times, I was not really interested in trading or banking. Instead, I was quite interested in science, and inspired by my family doctor, the famous Dr Wu Lien-Teh. He was born in Penang and went to Cambridge to study Medicine on the prestigious Queen’s Scholarship. He became a famous doctor who saved the lives of millions of Chinese from pneumonic plague in China.

I developed an interest in Cardiology much later when I was doing my three-year rotating internship at the Royal Newcastle Hospital in Australia. I found Cardiology logical, very much based on knowledge of Anatomy and Physiology. Although Surgery was quite interesting, I did not think I had the physical skills required of a good surgeon.

Newcastle was the biggest industrial city in New South Wales in the old days. All the steel industries were there. So the Royal Newcastle Hospital had the strongest Orthopaedics department in Australia. Many

Dr Toh with his four grandchildren at the SMA Annual Dinner in May this year



of the surgeons at the Orthopaedics department at Singapore General Hospital (SGH) were trained by Royal Newcastle Orthopaedics, as they used to send people down to Singapore. I chose Royal Newcastle because it was the only hospital in Australia, or for that matter, the British Empire, that had the American rotating traineeship. Now we're trying to do that in Singapore but in a very funny way. You decide what to specialise in very early, and go into rotating traineeship.

SMA: How was your training like?

CT: After my three-year structured rotating internship in Australia, I went to London where I did a course at the Royal Postgraduate Medical School and then spent a year at the Central Middlesex Hospital, where I passed the MRCP exam. Then I moved to the Hammersmith Hospital to be trained in Cardiology under Prof John Goodwin. The cardiac surgeon there was Dr Bill Cleveland. I looked after patients, assisted in invasive Cardiology and did some research in ECGs.

Then I got a job at the Royal Brompton Hospital under Dr Paul Wood where I received further training in clinical and invasive Cardiology, and was involved in the management of medical and cardiac surgical care. The famous pioneer cardiothoracic surgeon in Brompton then was Sir Russell Brock. Dr Paul Wood, author of the monumental textbook, *Diseases of the Heart and Circulation*, was considered to be the top clinical cardiologist at that time. Both he and Sir Russell Brock were very demanding and fierce. They wouldn't tolerate any laziness or ignorance.

SMA: What are your views on the new residency programme?

CT: I haven't really seen the details, but what I know is that it is too specialised too early. Let me tell you what I did – in three years, I rotated among 12 departments. I did four per year, one every three months. In the first year, I did Internal Medicine, General Surgery, Emergency Medicine and Anaesthesia. In the second year, I did O & G, Medicine, Pathology and Urology. And in the third year, I did Psychiatry, Medicine Orthopaedics and Paediatrics. I personally would like all Singaporean medical graduates to undergo rotating internships of at least two years with three postings per year. They should do the major things like General Surgery, General Medicine, Orthopaedics, Anaesthesia and O & G. After that they can move into Internal Medicine, Surgery or ENT. The system should be pyramidal – general training, Internal Medicine and then Cardiology – that's what I did. It took me a long time, six years.

SMA: So your hope is that the system will be broader-based, rather than having everyone referring to specialists all the time. What were the most memorable incidents during your medical education or career?

CT: In the second year of medical school when I got a distinction in Anatomy, I was made a prosector for the Anatomy museum. I remember I had to dissect a hand to illustrate the tendons and sheaths.

During my rotating internship training in Royal Newcastle Hospital, I had quite an exciting experience. One night, I had to do four emergency



D & Cs for threatened abortions. These were women who had illegal abortions and were bleeding. In those days, abortion was illegal in Australia. All through the night, together with an anaesthetist colleague, I did the four D & Cs to save the women from bleeding to death.

And in 1972, we organised the 5th Asia Pacific Congress of Cardiology. President Benjamin Sheares declared the congress open. Prime Minister Lee Kuan Yew and Mrs Lee attended the closing banquet, and the Minister of Health Chua Sian Chin hosted a reception at the Istana. It was the biggest Cardiology congress in Southeast Asia.

SMA: What is one experience that has deeply impacted your life?

CT: Allow me to share with you two experiences.

During the war, when I was 11, my father was arrested by the Japanese Kempeitai (military police) for allegedly pilfering all the jewellery from the safe deposit boxes in Mercantile Bank. He was interrogated, threatened and physically abused. After a few days, with the intervention and help of a few prominent citizens, he was released, as they found that the jewellery had actually been transported from Ipoh to Singapore before the Japanese entered Ipoh. The head of the Kempeitai even paid a social visit to our

home subsequently. When he saw the Buddha statue in our hall, he bowed and paid his respects. Some months later, all the owners of the safe deposit boxes were allowed to retrieve their jewellery in Singapore, with the help of my mother, as long as they could show proof with receipts and diagrams. I learnt then not to pass judgement on any person too hastily.

The other experience which has left me a lasting and meaningful impression was an episode in 1968. You may remember that in 1965, MacDonald House in Orchard Road was bombed by Indonesian commandos. They were caught and subsequently hanged in spite of personal appeals by Indonesian President Suharto. Riots started in Jakarta and our embassy there was burnt. Our embassy staff had to be evacuated to the Hilton Hotel to take refuge. Interestingly I got to know the police colonel in charge later, and he protected our staff.

Following this, our ambassador, the late Mr P S Raman, suffered a heart attack. He was hospitalised in St Carolus, a private Catholic hospital, under the care of the most senior cardiologist in Indonesia, the late Dr Soekarman, who was also President Suharto's cardiac physician. Dr Goh Keng Swee asked me to fly to Jakarta to see Mr Raman. It was his third day in hospital and his condition was quite stable, so I decided to keep him in St Carolus Hospital until he was better. Since invasive procedures

like PTCA were not available in those days, there was really no benefit bringing him back to Singapore early, if he was under a good cardiologist in Jakarta. I returned home three days after that, and flew back to Jakarta on an army plane two weeks later to bring Mr Raman home.

Looking back, my decision was made based purely on medical grounds. As it turned out, it was also politically beneficial to us. Dr Soekarman and the Indonesian government would have “lost face” if I had brought Mr Raman back immediately. To the Indonesians, as Asians, “face” is very important. I think, as a result, relations between both foreign affairs ministries and governments gradually improved. Dr Soekarman and I became close friends thereafter. In fact we were responsible for founding the ASEAN Federation of Cardiology some years later.

This experience shows how an episode which appeared insignificant initially and purely medically driven, can have a long term impact on relations between individuals and governments.

SMA: Who were your inspirations in Medicine?

CT: In my early years of training, one of my inspirations was Dr Horace Joules from the Central Middlesex Hospital. He was a censor of the London Royal College of Physicians, a very strong socialist, and a great and kind physician. My next idol was Dr Paul Wood, the leading clinical cardiologist in those days. In Singapore, my inspirers were Prof Gordon Ransome and Dr Gwee Ah Leng. The latter was not only a great doctor but also a Chinese scholar and a humanist.

SMA: Do you have any advice for aspiring cardiologists?

CT: They should undergo comprehensive rotating internships in as many disciplines as possible for two to three years before specialising in Internal Medicine. Thereafter they should have structured training in all aspects of Cardiology before sub-specialising. Some doctors rush into invasive Cardiology because of potentially greater monetary rewards. This is not wise in the long term.

SMA: What are some of the challenges that Medicine in Singapore will face in future?

CT: In Singapore, as with most developed societies, the challenges are an ageing population which carries with it a heavier medical burden, and rising costs as a result of rapidly advancing technologies.

There are also greater expectations and demands in a more affluent and educated society. It is always a difficult and political challenge to balance quality of healthcare with the demands and expectations of the people.

In the private sector, healthcare is an important component of the service industry. We will continue to face challenges from Malaysia, Thailand and even China where costs are lower. Ideally doctors in the private and public institutions should work closer together to strengthen medical education and care over all.

Going into public service

SMA: Could you tell us how you transitioned to the PSC?

CT: Firstly, maybe through personal contacts with some of the senior ministers. Being one of the earliest cardiologists, I looked after quite a few VIPs. Now there are so many cardiologists available, but in my time, there were only one or two. I looked after the Singapore Presidents Yusof Ishak, Devan Nair and Benjamin Sheares. So through all these contacts, they probably had some trust in me. Another person I knew very well was Goh Keng Swee. At that time, he was Minister of Defence and later, Education. Somehow or other, I got to know him and we used to talk about education. He was the one who started the Humanities Programme in Hwa Chong and National junior colleges.

I was originally a Malaysian, but by 1969 I decided to become a Singaporean. I was dealing with a lot of officials here and it would not



A treasured piece of calligraphy given to Dr Toh by Song Nian, a monk from China, who is also a friend and a patient

be proper for me to remain a Malaysian. Furthermore, I felt that I had no future in Malaysia even though I had assets and relatives there.

One person who has influenced me significantly was the late Dr Phay Seng Huat, a general practitioner of a clinic in Balestier. He was Minister Mentor Lee Kuan Yew's classmate in Raffles Institution and a trusted friend. Dr Phay was Chairman of PSC from 1962 to 1975. Initially he got me involved in the Disciplinary Committees of PSC. In the early 70s, he even tried to get me to join politics. I declined as I didn't think I was ready nor did I have the charisma of a good politician. Once a doctor gives up Medicine to join politics, it is very difficult, if not impossible, for him to return to Medicine years later. I recall asking Minister (Dr) Ng Eng Hen one day, what if he decided to return to Surgery later? His answer was that he'd return to SGH as a registrar to relearn Surgery. I thought that would be tough.

SMA: So you decided to serve not in politics but things that could affect the progress of the nation, and you found your niche in PSC.

CT: In the early 80s, when I was in private practice at Mount Elizabeth Medical Centre, I was approached by Mr Lee Hee Seng (of United Overseas Bank). He was Chairman of PSC from 1988 to 1998. He wanted a medical doctor in PSC, as it was and still is customary to have a spread of different professionals onboard. Initially, I declined as I was busy starting a private practice. In 1992, I decided to accept the offer. I'm still in PSC and I enjoy the work very much even though it is time consuming.

SMA: So what are you doing there now?

CT: We have an average of meeting two afternoons a week. The major portion of our work is interviewing all potential scholars. There are quite a few hundred of them as we offer 200 to 300 scholarships a year! We start our interviews and pick the bright guys even before the "A" Levels, otherwise, we cannot finish the interviews, as there are so many applicants.

SMA: So if we're an 18 year old scholarship interviewee in this day and age, applying for a scholarship in Medicine, what sort of questions would you ask us?

CT: First of all, we offer Medicine scholarships locally and overseas only to candidates who are of President's Scholarship calibre. Each PSC member has their own questions. My approach is, first thing, find out how committed the guy is.

Number two is how deep he has looked into this field, like by talking to people, and find out what he knows about healthcare in general, like the problems the government faces, that sort of thing. We would ask general healthcare questions. Like how much health funding is there in Singapore, or how do health services here compare to those in the UK, Malaysia or America? We want to see if they have this breadth of interest. As far as PSC is concerned, we want to know if he can become a good doctor and administrator later on, because we are interested in medical graduates who have the potential to become administrators.

Thirdly, you would want to know a little bit about his scientific knowledge. The other PSC members can't ask about this as they aren't doctors, but I might ask one or two such questions.

SMA: "Tell me about toll-like receptors?"

CT: Those questions we leave to the medical school admissions! (*laughs*)

SMA: On behalf of the country, we thank you. So do you have any anecdotes about your interviewees? For example, why they chose a certain scholarship?

CT: It varies a lot. For instance, there are many medical student potentials whose parents are doctors, so they are strongly influenced by them. Then there are those who have done some work in a geriatric home or gone to Cambodia. And many of them are strong in the sciences.

But if we are looking for non-medical administrators, it's quite hard too. How do we predict whether a guy at the age of 18 will be a good administrator when he's 40 or 45? Of course we make mistakes, but if you look at the people who give up or break their bonds and so on, it's only about 5%.

The other things we do in the PSC is carry out disciplinary action against corruption cases and that sort of things. Some are straightforward, but the degree of severity varies a lot. Some are alcoholics, and some borrow money to go to the casino.

In the old days, when Dr Phay Seng Huat was around, PSC would handle every civil servant. Of course, the government was smaller in those days. Now it's too big and we can no longer do that. So there is now a Public Service Division, which consists of top civil servants, who will do most of the postings and promotions at the lower levels, while the PSC deals with promotions in the upper levels. They will just inform us in case we disagree. So in a way, the work has lightened a little. We spend an average of three afternoons a week at the PSC, but I can only go for two, or it would be too much.

A twinkle in his eye

SMA: Tell us more about your family.

CT: As I've mentioned earlier, I couldn't have been born more fortunate. I also had two sisters and one brother. None of them had tertiary education. My elder sister married a successful dentist and my brother was a successful businessman. My second sister died in childbirth when she was quite young.

My wife graduated from the National University of Singapore and worked as a medical officer in a polyclinic until her retirement. Sadly, she passed away a year and a half ago. She was a hepatitis B carrier and developed hepatoma. Her brother, also a hepatitis B carrier, died from hepatoma at the age of 40.

I have three boys: Han Shih, Han Chong and Han Li, and two daughters-in-law, Stacy and Joy, both lawyers. Han Shih graduated from Caltech in Physics, did his DPhil in Oxford and MA in History in the London School of Oriental and African Studies, and now works as a newspaper correspondent

in Hong Kong. Han Chong studied in London and Cambridge. He had his postgraduate training in Massachusetts General Hospital and Texas Medical Center in Oncology. He has two sons, Markus and Lukas, both very bright. Han Li studied in Cambridge on a government scholarship, subsequently obtained his LLM from Chicago, and is now in the legal service. He has a lovely daughter Emma and a brilliant son Gabriel.

SMA: What do you do in your leisure time?

CT: I really don't have that much leisure time in spite of my age. As you know I am still involved in two organisations: PSC and the National Cancer Research Fund. Previously, I was Chairman of the National Medical Research Council for six years. That was a very interesting and challenging but time consuming job.

In my spare time, I read history extensively. I am very much addicted to music, classical and modern, eastern and western, and also Southeast Asian. I also sing a lot, and watch DVDs of Western and Chinese opera and Chinese songs. I play golf regularly and look after my dog and garden.

SMA: What about history fascinates you?

CT: I am fascinated by Southeast Asian history. My sons always buy me books on this. I just got a book from one of my sons, Han Li, on Zheng He. It is very interesting. The Chinese had more influence on Indonesia than Arabs or Indians. People don't realise that. Zheng He went to Semarang in Central Java, so if you go there today, there's a temple dedicated to him. But none of the people living in the temple speak Chinese. When Zheng He went there, Islam was not that deeply rooted. He found that in certain parts of Java, there were already Chinese Muslims living there. During the Yuan Dynasty, Genghis Khan tried to conquer Southeast Asia. So there were Mongols who spread out over the islands of Indonesia and intermarried the local people. The local people were not Muslims, so there was no hindrance. So if you talk to some people in some parts of Indonesia, they'll tell you that their grandparents were Mongols.

I also read a lot on Chinese history. I can recommend you a book, *China Condensed: 5000 Years of History and Culture*, by Dr Ong Siew Chey. It's only about 200

pages and is very, very good.

SMA: Are you effectively bilingual?

CT: I'm not bilingual in the sense that I don't write Chinese. Because I was away for 13 years, and during that period, I had no opportunity or incentive to use it. But I can speak Mandarin, Hakka, Teochew, Hokkien and Cantonese.

SMA: Do you have plans to retire?

CT: Not yet. My PSC term actually ends in two years' time. In fact, they were thinking of retiring me the last time, but they decided not to in the end.

As for my clinic, you'll be forced to retire when your patients think you're too old. My patient volume has gone down. I used to have five or six patients in the wards and now I have two or three. That doesn't matter. The patients think that they should go to somebody else, but this is not unreasonable. But fortunately, I'm not a surgeon, because if you're a surgeon, you've got to retire earlier.

SMA: What things keep you awake at night?

CT: Nothing keeps me awake at night unless I have very ill patients in the ICU!

SMA: How would you like to be remembered?

CT: I would like to be remembered as a caring doctor and a committed Singaporean. **SMA**



Dr Toh receiving an award from then Singapore President S R Nathan, during a dinner organised by National Cancer Centre Singapore (NCCS) in September 2004. Dr Toh was honoured as one of the "Four Pillars" who set the roadmap for NCCS, together with Dr Kwa Soon Bee, former Director of Medical Services, Mr Goh Cheng Liang, philanthropist, and Dr Yeo Ning Hong, then Chairman of Tote Board