

**BARRY CHARLES WILLIAM BARKER, M.D.S., PH.D., F.D.S., R.C.S., H.D.D., R.C.P.&S.
(GLASGOW), F.R.A.C.D.S., Member of the Pierre Fauchard Academy**

Barry Barker, Associate Professor of Dental Anatomy, formerly Lecturer in Anatomy to the Royal Australasian College of Dental Surgeons, formerly Senior Lecturer in Operative Dentistry, University of Sydney, Commonwealth Fellow later Commonwealth Lecturer, Royal Dental Hospital of London, and Teaching Fellow in Operative Dentistry, University of Sydney, died on July 17, 1981. He was forty-six years of age.

A distinguished undergraduate career won him his B.D.S. with First Class Honours and the University Medal at The University of Sydney in 1957. He elected from the outset to pursue an academic career, spending a year as Teaching Fellow in Operative Dentistry at his Alma Mater before embarking for the United Kingdom. There he spent three years or so at the Royal Dental Hospital of London, first as Commonwealth Fellow, then to be elevated quickly to a Lectureship. During this time he gained his Fellowship in the Royal College of Surgeons of England and of the Royal College of Physicians and Surgeons, Glasgow. He gained also the esteem of his many friends and colleagues there, not only for himself but for the University of his origin and for the Australian dental profession.

He returned to The University of Sydney in 1961 as Senior Lecturer in Operative Dentistry. His first love at that time was Crown and Bridgework, a field where his skill and artistry quickly won him renown and in which he produced a number of publications during his short sojourn in that position.

He joined the vastly different world of Anatomy in 1962, taking control of the dental undergraduate course. There he set about reorganizing the course, intensifying aspects of direct clinical application, and, realising the growing need of the profession for a neurological background, increased the scope of the neuroanatomy content of the course. During his first two years in Anatomy he imposed a workload on himself far exceeding normal expectation. He assumed the full teaching load for dental undergraduates, giving lectures and tutorials, and supervising the dissecting room. Additional to normal duties he tutored at St. Andrews College and to Fellowship candidates for the Royal Australian College of Surgeons. He was awarded his Master's degree in 1963 for his formidable thesis on Pain. He found time from his teaching duties to take on substantial research projects, and to publish his findings, being a frequent contributor to this journal. His ingenious work in replicating root canal anatomy in transparent tooth replicas gained him acclaim throughout the dental world. His evaluation of various preparations on pulp and periapical tissues in dogs and similar work on extracted teeth gave rise to several publications and led to his Ph.D. at Sydney University. The importance of dissection was always uppermost in

his mind and he developed novel approaches to fields of dental interest and photographic techniques for making pictorial records. He submitted much of this work in his theses for the degree of Doctorate of Dental Science, but died before he could learn of the award.

Barry was in frequent demand as a lecturer by local groups of the Australian Dental Association and rarely refused an invitation. He was known as much for his artistic flair and entertainment value as he was for the general interest of his lectures, and many of us, particularly his students, will remember him for his performances and performances they were at the lectern.

He suffered a serious crisis in his health in 1965 which incapacitated him for many months, a setback precipitated probably by the extreme demands he made upon himself. His health failed him a number of times over the ensuing years, and even though he returned to his work always with enthusiasm a gradual decline occurred in his energy and output. He remained dedicated however to his teaching duties and to his obligations to the profession until the end.

He was a versatile man. In his youth he coxed the eights for Sydney Grammar, he was active in surfing and in tennis. He acquired a pilot's licence and flew a Tiger Moth for many years. He was a flautist with the North Shore Symphony Orchestra and was a virtuoso at convivial musical evenings.

Barry Barker was a scholar. He contributed much both as a teacher and as a researcher. He had so much more left to contribute when he died.

He will be sadly missed by his friends and colleagues in his Department, in the Faculty, and in the Dental Profession. P. DAVIES.

James Hawkins writes this further tribute.

Barry's change in academic orientation from Restorative Dentistry to Anatomy was also marked by his arrival at St. Andrew's College in early 1963. In characteristic fashion he used the summer vacation to complete the study of the human body so that his knowledge on the subject would be complete. He found in College an optimal academic environment that allowed him to write his Ph.D. thesis and publish many articles. Barry enjoyed College life with its informal contact between graduate and undergraduate regardless of Faculty, at the same time relaxing in the more rarefied atmosphere of the Senior Common Room. His talents did not pass unnoticed either, for, at the beginning of Trinity Term in his first year, he was approached by a deputation of second year medical students, asking him for Anatomy tutorials. He was already carrying out a tutorial programme for dentistry students, but he happily made time to expand his schedule to accommodate the medical students.

In 1965, he was made Wilson Fellow of the College, the first dentist to be so honoured. He appreciated the bestowal of such an honour, but was embarrassed to discover that the appointment included a modest stipend. When the time came for him to leave College he made it known that he had invested the funds earned from the Fellowship and donated them to the College. When this money was spent installing a clock in the tower, he tried, unsuccessfully, to make such a generous act anonymous.

Barry's years in College were certainly some of his happiest, and he thoroughly enjoyed the academic and social environment. It is typical of him that, in return, he gave more than he received.

His loss will be felt keenly by his family and also the many people in the profession who could call him a friend. Many more will remember him with gratitude for his superb teaching of preclinical and clinical dental subjects. His loss has created a void in the dissemination of knowledge, not only for us, but for a future generation of undergraduates.

Letters to the Editor

TRANSITIONAL CELL CARCINOMA

Sir,

I was interested to read the article by Dr W. Lam entitled, "Transitional-cell carcinoma of the maxillary sinus" which appeared in June, 1981. In general, malignant tumours of the maxillary antrum carry an extremely poor prognosis and I would like to make some comments concerning their initial management with reference to the above case report.

The patient presented with a palatal swelling, infra-orbital paraesthesia and an opaque maxillary sinus on a plane radiograph. This is a typical presentation of a malignant antral neoplasm and prior to any surgical intervention further investigations should be made. One cannot exclude bony erosion of the walls of the sinus on the basis of an occipito-mental radiograph. Serial tomograms are required to determine bony involvement and

together with computerized tomography, extension of disease beyond the antral cavity can be better evaluated. Furthermore, an incisional biopsy should be performed in order that a histological diagnosis can be made. As many antral neoplasms present as a palatal or alveolar swelling, an intraoral incisional biopsy is a relatively simple procedure that provides the remaining necessary information to formulate a definite treatment plan.

A full range of investigations must be undertaken if patients are to receive the best treatment relevant to their disease.

A. A. C. HEGGIE.

Registrar in Oral Surgery,
Royal Melbourne Hospital,
Parkville, Vic., 3052.
August 24, 1981.

TRANSITIONAL CELL CARCINOMA

Sir,

It has been a long time since the submission of my article about a case of transitional cell carcinoma.

I recalled and saw the patient today, and was delighted to see him fit and well. He has been back at work, and has taken an overseas holiday recently. There was no sign of recurrence, and I hope he will continue to do

well - he is now half way to a five-year assessment period.

W. LAM.

P.O. Box 82,
Glen Osmond, S.A., 5064.
September 12, 1981.