

**Yaesh Sardiwalla:** Dr. Shimizu I would like to start the interview is talking about your life before medicine. Can you tell me about your family, where you have come from and your background in general?

**Henry Shimizu:** Well I was born in Prince Rupert, 1928. Prince Rupert you know is on northern part of BC on the coast and we had, my father and his partner ran a hotel and a restaurant all in one same building that on Main Street, that was Third Avenue in Prince Rupert. In 1942, actually it was 1941 December the 7th when the Japanese attacked, sneak attack, on Pearl Harbor and that started the war between the United States and Japan but at the same time since they also invaded Hong Kong it also started a war with Great Britain as well as Canada and in fact the Canadian government immediately as a matter of fact in the next day, early next day, December the 8th, 1941 declared war on Japan and they beat the Americans by several hours because Americans had to get Congress together before they could declare war, that was December the 8th.

Anyhow, as a result of that all people with, all Canadian people as well as Japanese nationals as well as Japanese people who were naturalized Canadians were, never arrested but they were told that they would have to leave the West Coast and this was carried out by the RCMP. In the United States it was carried out by the Army, they did the same thing in the United States, Japanese-Americans were removed from the West Coast and they were put into internment camps, they did not do this to the people of Japanese ancestry in Hawaii because they couldn't, about one third of the population of Hawaii had Japanese roots so that would have been devastating to the economy as well as they were, many of them were of course are the people who were in the administration of government as well as all kinds of businesses and as a result they didn't, they decided not to do the same thing with them.

In Canada though we were all completely removed from the West Coast and we were first rounded up and sent down to Vancouver to an area called Hastings Park and that was a park that had a fence and everything around it and it also allowed trains to come in because it was an exhibition park, it was where the PNE or Pacific National Exhibition was held every year and so they would have trains coming right into this park and they will be used as an amusement area as well as it was also had closed-ins that were for various types of activities, one of them of course was they had the hockey rink or hockey that was their hockey rink at that time that is well before of course those ones that they have built subsequently in Rogers Place and then the other one that was BC place. This is it, we are talking about 1940s, so anyhow this is, all this removal from the West Coast of people of Japanese that they thought of Japanese ancestry so that meant everybody whether they were born in Canada or naturalized Canadians like my father and family were naturalized but it did not, it was not so easily apparent to the authorities at that time, they decided they would take everyone and everybody was removed from the West Coast. They took away our property, everybody lost their property as well of all their possessions, we were given, we could take about 50 pounds of your own possessions with you into the internment camps which were then built in the interior of BC in an area called Slocan Valley and that's where we lived for the next four years until the war was over and despite even when the war was over until '46 we were still there.

By then my parents had decided they would go to Edmonton. He felt that, my dad felt that Edmonton was closest to the West Coast, closest largest city this would and the capital of Alberta but he also looked at it as a future there would be, there is a university there and so this is why he chose Edmonton rather than Calgary although he knew about Calgary. Anyhow we did go to Edmonton and I started, within about two years after being in Edmonton I was able to start medical school at the University of Alberta, premed to begin with and then on to medicine and I graduated in 1954 and then did residency program in surgery at University of Alberta Hospital and then I thought I would like to get into plastic surgery. The chief of the department Dr. Walter C MacKenzie who was the Chief of Surgery later became Dean of Medicine at the University of Alberta. He arranged for me to go down to the States, have interviews in various areas, New York, Pittsburgh; and Duke, Durham, North Carolina where Duke University was. I was picked up by, it was just like, it was like going to a minor hockey area and getting picked up on a draft you might say. Anyhow I ended up with the, at the University of Pittsburg and joined, I was able to start my training in plastic surgery in the States.

In the meanwhile senior classmate in the University of Alberta Medical School a fellow by name Mac Alton he was about three or four years ahead of me, when I graduated he had already was now just about finished his general surgery program and subsequently Dr. MacKenzie got him positions in England so that's where he went to get his plastic surgery and it turned out that it was actually in Scotland at the University of Edinburgh and then he subsequently came back to Canada, took some further training at the at the University of Montreal but actually it was, it was the Royal Vic Hospital in Montreal in plastic surgery. There was a training program going on there. He took a fellowship there and then from there he actually took another six months' fellowship in hand surgery with a very well known famous hand surgeon by the name of Bill Littler. He was renowned as a hand surgeon in New York City and so he went there for six months and then he came back to Canada and in the meanwhile he started to practice in plastic surgery, I was finishing my plastic surgery at University of Pittsburgh and subsequently in '64 I had my fellowship and in '65 Mac Alton and myself together we started the division of plastic surgery at the University of Alberta.

So that's how we got started and we were able at that time, had, when we started we already had several candidates who wanted to take plastic surgery at the University of Alberta and it turned out, we took, the first resident we took on was a fellow by the name of Tatsuyuki Hayashi who happened to be a surgical resident that had been in Japan, came to the United States, in Buffalo, spent time with research there, subsequently did some further research activity at the University of Saskatoon and that's when he applied for residency in plastic surgery at the University of Alberta. So that started in 1965; in fact because of that, he started, he was the first resident in plastic surgery and it just so happened that he graduated from the university in Japan for his medical school. Subsequently we were taking one plastic surgeon every year and that's when we got our one plastic, training plastic surgeon, we took one and program was for two years, one as a junior, one next as a senior resident. They were all people who had had training, most of

them had had a full general surgical training before they came to the University of Alberta because of mainly we were starting from scratch.

**Yaesh Sardiwalla:** Dr. Shimizu could you describe to me what it was like spending time at the internment camps and your reflections from the Slocan Valley?

**Henry Shimizu:** Well the time that we, see we were, had arrived in the internment camp in the fall of 1942. I have been in, up until March of '42 I was in Prince Rupert and going to school there, so I was in grade 7. When I went to the internment camp I was pushed up into grade 8 because that's the level I would have been, because by the time I arrived in the internment camp I would have been, it would have been in September. Anyhow we were able to, by that time internment camp had built shiplap houses for all the inmates, all the internees. New Denver which is in the Slocan valley, it's on the Slocan Lake and it was one of the larger internment centers, they were 10 altogether, one down near Hope, Kootenays, and then up, from there up into the Slocan Valley where we had eight internment camps. These are built by the inmates, the people that, the internees and that was one of the advantages compared to what happened in the United States because those, theirs were built by the Army, ours were built by the people that eventually lived there, you know, so we had, in New Denver we did have a very well made internment camp and its still there, this is what 75 years since that time and those houses are still, some of them, well I am not saying all of them but there was at least about 20 to 25 of them are still being lived in although they have been renovated drastically over the years.

That internment camp by the way then started in 1942, by 1945 when the war was over we were still there and then following a year later in '46 that's when we made our decision that we would go to Edmonton and we left the camp. When I was in the internment camp I got my what you might call education up to grade 8 and then grade 9 in a high school, just at that point the Catholic Church came into the internment camp and suggested that they would start a high school for the internees because we are going to try and get in and get our high school by correspondence but they said no, no, we are going to build a high school and they built a high school, the name of the order of Catholic school was they were called Notre Dame des Anges since what we had the Notre Dame High School in Edmonton had nothing to do with the Notre Dame in the States, it just happened to be that's the name of the Order and so they, but they did, you know, the one in the States is also a Catholic school, a Catholic university and when we started we had these nuns who were teachers that came in from actually Eastern Canada and Eastern United States. They were very, very good teachers. They also came from very prominent families, for instance the teacher we had taught us French Sister Saint Cecile apparently her father was vice president of CNR at that time. We also had Sister Saint Ravel that came from New Jersey and her father was one of the executives with DuPont Chemical Company, very big at that time because they were producing ammunitions which is a big thing of course and I still remember her parents arriving from New Jersey and they arrived in a huge Cadillac convertible so big they could hardly make any of the turns among the roads up in New Denver and everybody just goggled at this huge, huge car that came up.

Anyhow our education was very basic and very thorough. There is no question about it that we did get a basic type of reading, writing, arithmetic type education. We didn't have closed-ins those days we didn't have any field trips, we didn't have any lab because we didn't have the facilities for that but all the very basic aspects of education we learnt and we learnt it well; Mathematics, History, English and French, we were very good in French because all the nuns spoke French all the time, they were, The Order of Notre Dame was in Quebec and they came from Quebec. Anyhow we were really a very good school, in fact this was all, it was all Japanese school, I mean all the internees were, inmates of the internment camp were in the school in New Denver but even at that I still remember two white girls showing up one year, one in my class and one in the class ahead of me and the reason why they came was they were the daughters of one of the administrators with the BC Securities Commission and they found out that they can get a better education at the Notre Dame Catholic School rather than the usual school in Vancouver. There was another school in New Denver which was for the White people but they wanted to get a better education so they came to the Notre Dame High School and in fact once we got started, once the Catholic school started the United Church came in to New Denver and they put up a school for people that were not, they said they were doing it for people who are not Catholics, in fact it really was not necessary but they did because it as you might say since the Catholic school was there they felt that they had to have a Protestant school as well and the Protestant school was for the internees as well, they were United Church and they were right in the town of New Denver, they built, they actually bought a building in the town and they used that as a school.

So my education up to university was actually a very, we were very well educated that way, just because, it just happened but that's all we could do, was you know we are in internment camp with nothing else to do but go to school and in the summertime of course we did play a lot of sports; baseball, hockey which we had never played hockey in the West Coast because it was days when you did not have indoor rinks and it was too warm to have ice rinks outside the house. Anyhow we did spend four years there, there were four years of, it was not, it was in a way was what you called bittersweet, it is bitter because there was a lot of hardships involved but at the same time the area was such a beautiful area of BC that we actually thrived there and many other people that came from New Denver were internees, went on to well-educated areas, I mean there were a lot of them that went and I am not sure how many have got into Medicine but over the years quite a few of them did get into professional type careers and this is just a way it happened.

**Yaesh Sardiwalla:** So after being in the internment camp and moving to Edmonton with your family you decided to go into medical school, what motivated that decision to do Medicine.

**Henry Shimizu:** Well, I was, when I finished, when we moved in 1946 to Edmonton I was in grade 11 and I continued on and so I got grade 11 in Edmonton and then I spent another year at grade 12 and at that time I had, well I knew several Japanese doctors who had actually been going to medical school before 1942 so they advised me that I should go into Medicine if I want and I went into Medicine in Edmonton and they took me on

into premed and in Medicine. The other thing was, I was academically, I was in a position to be able to be a student at the medical school, my marks were high enough to allow me to get into medical school at that time, in fact my brother-in-law who was in Toronto at the time, my sister married a fellow Japanese fellow, Japanese-Canadian in Toronto. He also joined medical school at that time and we got into Medicine in 1948 that was you know just a few years after World War II. War was finished in 1945 so and I was able to get into medicine at the University of Alberta.

**Yaesh Sardiwalla:** And Dr. Shimizu after going to medical school you decided to pursue plastic surgery as your career, what motivated you to pick this specialty.

**Henry Shimizu:** Well in fact it was a decision that was almost, we just made it almost overnight, I mean I was and in fact I was in the operating theater in 1957, I am in the operating room working with doctor, one of MacKenzie's partner in the operating room and a nurse came up behind me and said, 'Dr. Shimizu you have to go down and see Dr. MacKenzie right now,' so I did go. I thought maybe there is some problem that had happened and I didn't know what did I do wrong, anyhow went down to his office and he was; secretary says go right in, he is waiting for you. So I went right into his office and Walter MacKenzie was sitting there and he said, Henry, he said, 'well what the hell are you going to do with the rest of your life.' I said, 'well I don't know.' So, 'well you can't stay in general surgery continuously or do you want to.' I said, well I, actually I was thinking just thought at that time just off the top of my head I said 'I was thinking about plastic surgery.' He said, 'plastic surgery?, I will tell you Henry, I can't get you into any training center in Canada, there is only two, one in Toronto and one in Montréal and to get you in there now at your stage is almost impossible.'

In fact he had already tried that with Mac Alton ahead of me, he couldn't get him into a plastic surgery training in Canada because you had to be in either Montreal or Toronto here to sort of going, but he said I can tell you I can probably get you into an American center and he said well okay and he arranged an interview in Pittsburgh, New York, and Durham in North Carolina where Duke University was so I went down to all three by bus. In those days you could buy a bus ticket for \$100 and you can use it for a whole month so I could go from one bus to another on the way through to all these three places, met all the departments and had a discussion and when I got back I didn't hear anything. Eventually about six months or more I got a note from Willie White in Pittsburgh saying we have got a place for you at the University of Pittsburgh Medical Center in plastic surgery, would you be interested? I immediately said yes I will take that. He said okay, I can't get you started this year but how about starting in 1960. So I did, started in 1960, spent two years in Pittsburgh. Now we had a big department, this is one of the largest departments of plastic surgery in the United States, we had six surgeons that I worked with, two in each areas, two in pediatrics, two in hand, and two in head and neck. So that's more or less how the training was carried out and so I had my training at the University of Pittsburgh Medical Center and it was a good training center, there is no question about that.

**Yaesh Sardiwalla:** And speaking about your Canadian mentors Dr. Shimizu, Dr. MacKenzie was one of your early mentors?

**Henry Shimizu:** He was one of my major mentors, one of the people that sort of influenced me into plastic surgery was a fellow by name of Ted Hitchin who was a plastic surgeon at the University of Alberta in that hospital. He was not, he did not have a degree, he did not have a training, he was not trained in plastic surgery, he was trained as a general surgeon but during World War II he was a Naval officer in Halifax and he had a lot to do with burn victims from the elite convoys that were going across, you know, they get sunk and they get burnt in the water and part of the injuries that have occurred to them and they realized they needed somebody who knew something about burns. He happened to be a, I think he was a Commander at that time. They said, 'look Ted, you go down to Bethesda and you pick up as much plastic surgery as you can.'

So he was sent to Bethesda, Maryland and the chief there was a fellow named James Barrett Brown, one of the pioneers of plastic surgery in the States and especially in burns. He was the, probably authority on burn treatment in plastic surgery at that time; we are talking about 1945, '43, '44, that area. So Ted when he came back the chief of surgery happened to be, became Walter McKenzie but he was also at Halifax during the war and it was, he then came and joined the department of general surgery at that time and one of his men was Ted Hitchin, came back from World War II, in fact many of the surgeons that were working at university hospital had had got into their specialties more or less by being general surgeons and then picking up, its like urology, orthopedic surgery, orthopedics for most of those people had had general surgery training and they took specialist training on the side you might say or they took time to spend time with orthopedic surgeons because orthopedics also was very new at that time. Plastic surgery started in the States in 1946, that was after World War II but during World War II a lot of ideas in plastic surgery came about mainly because of burns, what they had to do is a lot of skin grafts and found a little bit about how to treat burns which was almost virtually unknown until that period during World War II.

**Yaesh Sardiwalla:** Dr. Shimizu can you tell be about the development of plastic surgery in Edmonton?

**Henry Shimizu:** Well when I got back to University of Alberta I came back as a teaching fellow to begin with and in '64 I got my fellowship in plastic surgery and in '65 Mac Alton and I started the division of plastic surgery which is a part of the overall general surgical program at University of Alberta Hospital and when we started Mac actually said to me, he said well look we can be associates, we don't have to be partners, you know, we can work together and we will start an office in plastic surgery, it happened to be a building right across the street from the main hospital and he said I have already found a quiet spot there, you and I will work there and then we will also do the division of plastic surgery. He said, you know, he was, when we started I was, you know, basically I was, I didn't have any money, we just, I have spent a year as a teaching fellow at the university hospital, I was not what you call, you didn't get paid very much for that.

Anyhow he suggested that we get together and we start our office across from the university hospital and he said well. I said well, what about the furniture and everything. He said don't worry about that and just a matter of fact we got all our furniture from other people who are now giving, they are giving out their own, they are giving away their own furniture because they want to get a new office and so they were established people who were going into this building and so we got leftover chairs, we got stretchers and our examining table was from a general surgeon who gave it to us from upstairs and eventually we had a full office but we only had about 400 square feet so you can figure that 20 x 20 that was our whole office, we had one girl who looked after everything, she is very sharp and Mac and I then started basically from scratch and I didn't have any patience, he had developed a little bit of a practice in plastic surgery by then because he had been in practice for about three years and so we did that. He said, you know Henry I want to give you some advice and he said, 'you got to remember Henry we do not have to make a lot of money if we don't spend too much.' So that was his advice and that's how we lived for the first five years of our period as developing our occupation of plastic surgery and in 1965 we started the division with Tats Hayashi.

Subsequent to that we got all kinds of people coming in and for many years we only took one resident every year so we had two residents, one junior and one senior, and when we were about 1967 or 1968, somewhere around there, we talked about starting a division of a burn unit because we were seeing a lot of burns mainly because of the oil business that was going into and people were getting burnt from various explosions and things like that. I happened to be the one that Mac suggested that I head the burn unit and get it going and we did and in fact within a very short time we got this new material silver nitrate and we are talking about the late '60s and that was the first material that we have actually trying to do something in burns other than just putting saline on the burn wounds and antibiotics but with silver nitrate you did a little bit of bactericidal effect as well as the trouble of course with silver nitrate everything got black on the walls. Our burn unit the walls were all black from silver nitrate.

We had the 50th anniversary of our division at university hospital a couple of years ago and talked to the residents there, they are still using silver nitrate, it seemed to me, I thought think you guys haven't gotten very far, but it actually, what did happen though within a few years in the early '70s we got the Garamycin cream and the way that happened was that we got a patient that came in who was 13 years old and she was a daughter of an executive with Standard Oil at that time and they were up in Fort McMurray and they are just starting an idea of doing an oil business going and she had been burnt in an accident in a playhouse where it caught fire, she was badly burnt, badly burnt, and I remember that father arriving and saying, 'look we can do anything you want, we can get anything you want if you tell me what we need because I want the best treatment for my kid,' and I said, 'well, you know, there is this new stuff that just come out in the States and its called a Garamycin cream.' He says, 'where can I get it?' I said, well its actually being used at Galveston, Texas and there is a division there, a fellow by name of Silverstein who is the head, I think he was the head of department at that time that has been writing about is. He says, 'well can I get some for her.' I said, well you

would have to get it from down there. He says, 'well, yeah, we can get it.' I said, 'how.' He said, 'when would you need it.' I said I need it right away and he said I will have it to you, I will get it to you in a day, so he said I will get it to you in 48 hours or so. I said fine, if you can get it, I don't know how you are going to get it across the border. He says, 'no we have ways.' And so next thing we know we probably got the first shipment of Garamycin cream in Canada directly from Galveston, Texas and not only did he sent, they came up when they gave us a case of Garamycin cream they sent us something like 25 cases, I mean this is big time and so but the patient, you know, she didn't survive more than about a week or so, we tried using the Garamycin cream but when she was about an 80% burn there is just no way that we could save her and when it was over the guy said, well, you know, when I talked to him about unfortunately we weren't able to save her and he said well you did your best. I said but what about cream that you have given us. He said, well, you guys can use it.

So we had probably the first shipment of Garamycin cream in Canada just by and of course nobody knew about it except the company they brought right indirectly, you know, they just bypassed everything, came right in. Anyhow that was a boom for our plastic surgery in burn unit, eventually as time goes on that burn unit became sort of a section of the plastic surgery and one of the residents often took on, the senior resident would take on the job of being the burn unit resident.

**Yaesh Sardiwalla:** Dr. Shimizu what I wanted you to tell me a bit about was the first upper limb replant in North America, the one that you worked with Dr. Lobay to complete.

**Henry Shimizu:** Yes, that was another one of those situations where it just happened by chance, you know, you can call it serendipity. It was in the Summer of 1974 and we were, in July in fact, I was the only plastic surgeon at University Hospital at that time. Mac Alton had gone on holidays and around the 15<sup>th</sup>, about the second week of July all of a sudden I get a phone call from Gary Lobay, he had just been this Harry Buncke who was the foremost plastic surgeon in microsurgery in Stanford. He was actually doing research at Stanford, he lived in San Mateo, and he said you know we should, Mac and I discussed this business of microsurgery a year before that, we had a resident by name of Peter Whidden who has expressed interest in microsurgery, says we will send you down to see Harry Buncke and I said, 'Mac did you know Harry?' He said, oh yeah. He said he was a resident. He was an intern when I was a resident teaching fellow at the University of Montreal. Anyhow so when he phoned Harry Buncke and he arranged Peter Whidden to go down Peter did go down and he did some training in microsurgery, came back and then he made a decision to go to Calgary after he graduated. So we said the next person Gary Lobay, he was a junior at that time, so he said he would go and take a training in microsurgery. So that's great. So anyhow he said he will come back whereas Peter Whidden disappeared to Calgary.

Anyhow Gary informed me that morning and I said well look lets have lunch, so we had lunch at 12 o'clock, I met him at the restaurant right across the street from the University Hospital, we had lunch and just as he was leaving he said, he put his hand in his pocket

and he pulled out and he said, 'look what I have got.' I said, 'what's that.' I have got six microsurgery sutures that Harry Buncke gave me, he said. I thought, Jesus, those are probably the first microsurgery sutures in Canada, you know, nobody, because Harry Buncke was doing it but a very few people knew anything about microsurgery. So he said well, I said well maybe we can get a use for it, I don't know when.

I went back to the office and I had an office full of patients, at 2 o'clock I started, at 3 o'clock that same morning, that same afternoon I get a phone call from the doctor in Rimbey, down in and he is about 50 or 60 miles, well that will be about 60 or 70 miles from Edmonton. He says, 'I got a real problem.' I said, 'what's that.' He said, 'I got a little girl, her father cut her arm off with a hay mower and I have got her right in my, I am right there in the emergency and there she is sitting right there, what can we do. I said, 'well, you know, put the hand in a double bag plastic and a pail of ice and then put some water in there and put the hand in and bring it up, then I said well I have just phoned for an ambulance - they didn't have any ambulances in Rimbey or Red Deer - he says I will get it from Red Deer. I said, 'well, is the farmer still there.' He says, 'yeah his dad is still there.' I said, could he come up to Edmonton. He says, he will. He took the child, brought her to Edmonton, it took them an hour to get.

In the meanwhile I had to get rid of all my patients. I phoned Gary, he was going downtown to a shop, he was out, as a matter of fact I talked to his wife and I said where is Gary, she said Gary has gone downtown. I said, well, has he left already. No, no, he is just in the car just leaving. I said, well run out there and get him. And he came in, said to me what's the matter. I said well we have a replant. Holy molly he said so he come rushing over there and forgot to bring his camera, came rushing over. In the meanwhile checking to find out what's going to work, how we are going to do this, I found the OR and there is Oh chief Dr. Shimizu, it's too bad but the whole OR at the University Hospital has closed. I said, what do you mean is closed. He said we are changing the ventilation today, you cannot use it. So when Gary came I said to him, Jesus, the OR is closed. He says well we will do it in the emergency. I said well where. You know well there is a little room there on the side and I said well just a second now, just a second. I think we should take this kid and take and walk to the Charles Camsell Hospital which is a hospital for Inuit people and aborigines. So we went, made to change, I found them right away and I said I need anesthetist there. The nurse said Peter Campanero just finished and he is just on his way home and I said where is he, I don't know, may be out in the parking lot. I said, go out there and run after him and get him, we need it right away. She runs out there, Peter comes back and he says what's the problem. I said we need an anesthetist right away. He says, 'yeah I am your man I can do it.' I said, well when do you think you will get it ready. Well I think it would be ready at 6 o'clock and then I talked to the girl and asked her, do you know what we are going to do, we are going to try and do a replant, you know the instruments. Oh yeah she says I know. I said how come you know. She is Australian, had come up from Australia, I was in the operating room with the first case that was ever done in the world is done in Australia by the name of O'Brian. I said, Holy Molly, then get it, get ready for a replant and we had at the same time we have to get him, get the arm put together, we have to have an orthopedic surgeon you know. So I went down the hall, Peter Boucher was there. I said

we need your help and he said well when. I said, right away. He said, oh yeah I am finished here. And so he decided he will come right away to the Charles Camsell Hospital so we met there.

So we started at 6 o'clock at night, the accident had happened somewhere around 2 o'clock, we had already lost four hours and we had to have it, and I said to Gary, do you think we can get it on there in time to make it still viable. He says, give me 9 hours altogether, and we have already lost four so we have got another 5 hours. So at 12 o'clock at midnight Gary had the circulation going, at just the first, as soon as we let the clamps go the arm just went pink, they were just dead white, just went pink instantly, I mean she is a 3-year-old girl, a little girl everything was just, we had her on heparin at that time, other than that nothing else. Peter had done a tremendous job of anesthesia and she was physically in good shape at the end and I had a help, I had a resident there, Gary, myself and the resident. The resident and I worked on the severed limb, we have to mark all the nerves and blood vessels and tendons and everything else. Gary got the arm ready. The orthopedic surgeon came right away, took off quite about close to an inch of the humerus and he puts in K-wires, stuck it together, and he did it right away and just within 15-20 minutes he had it sewn it. So we had the bone pretty well solid, carried and started on the vessels and he had the artery done within an hour or two and then we took a long time getting the vein done.

We only had one microscope, unfortunately all they had a microscope that the ENT people use. We didn't have a laparoscope but we had that at the University Hospital because they were doing it for neurosurgery as well, and so we, the advantage was though, I was myopic you see, I just take my glasses off, in those days I could just take my glasses off and I could see really close with you know very fine things, I could see the needle, I could see because of my myopia I could see close up and Gary got the first artery done within a matter of within a few hours. The veins, we had all the veins marked out, he got the veins going and then we stopped at that point, got the circulation going in arm and once that was done circulation started around 12 o'clock midnight so it was about another 6 hours after we had done from the time of the injury. So that meant the total time was somewhere between 9 or 10 hours but with the way it flushed in a pink it looked pretty good and in fact postoperatively the patient really, we had her on antibiotics and aspirin and various other things but other than that, there was nothing other than antibiotics that we used and she just did not turn a hair, you know, that was the whole point. It all healed up well. I have a picture of her hand that opens it up like that on the, it was the left arm, you know that's, you know you think that its, you think the infection that is important. No, no that's what happens when the hand really starts to die it punches down. The point is we were able to get the hand open was more important than getting it closed and so he has got a picture of her when she was about 10 years old, 11 years old and she is opening her hand. I don't know whatever happened to her other than the fact that she of course went on and was married and housewife, a farmer's wife.

Yaesh Sardiwalla: The next thing that I just wanted to talk to you about was, the biggest successes that you have had in your career.

Henry Shimizu: Well, I, you know, the fact that despite the fact that I was born in Canada I was treated like an enemy alien, you know, how could I be an enemy alien if I am Canadian born, well it didn't work in the brains of the people that did this and so I became advocate of trying to get some what we call redress and redress always involved money that was when like the lawyers got involved and of course the first thing they say is you got to have some money change hands. We lost them all, my father lost his restaurant and hotel, and the community lost a huge building that they owned in Prince Rupert. People lost their livelihood but on top of that they lost their possessions, houses, we had, my father had several houses that he had built and they were gone, many other people that were Japanese ancestry were, because they were fishermen, they were good salmon fisherman and so they all lost their boats, they were taken away. So we lost two things then, lost not only our independence and our livelihood we lost all our personal belongings, we lost our property and most often they lost their business whatever the business happened to be.

So one of the things that we wanted to do with the government was to address this with the injustice of doing, going on in this, and they didn't listen to us they didn't listen to the, they didn't listen to the RCMP, they didn't listen to the Armed Forces, they went ahead anyhow and did what they wanted to do and this became a big bone of contention with the government. It went on until 1988 when Brian Mulroney eventually said, right, we will apologize for the injustice done to Japanese-Canadians and we will also compensate you individually, community wise and we will also do another thing, we will put money into a race relation foundation which they did, the three areas but the area that was, another victim was the loss of the Japanese communities, their properties and the actual business of a community that was there in Prince Rupert, in Vancouver, in Steveston, all along the Nass River and Skeena River and I was involved in that and eventually I became the Chairman of the Redress Foundation and we actually did something like 150, 152 projects and programs as well. We did a lot of films, books, things like that. I had also had my experience of being a plastic surgeon. of being a prominent member of the society of plastic surgeons in Canada and I had spent time as the secretary of the society and then became president of the society. All these things sort of came together and when I was proposed that I be given the Order of Canada they agreed to that and said yes. So I received my Order of Canada 2004. At the same time I also got an award from the University of Alberta as a distinguished alumni from the university and then also about in 2012 I was given an honorary degree here at the University of Victoria. So, you know, these awards came as a result of two or three things, my work in medicine but also my work as a volunteer in the process of what they call a redress of injustice suffered by Japanese-Canadians during the period 1942 to '46 and then these things came together as well as my work in the medical school and all these things sort of culminated in a number of awards that way.

**Yaesh Sardiwalla:** Could you discuss some of your hobbies, particularly your painting?

**Henry Shimizu:** Yeah, well painting was a hobby in a way and it actually started in Pittsburgh, when I was in Pittsburgh the Chief of the Department, Willie White said, one

day said, telling us, we were junior residents at that time, a plastic surgeon, he said you know you guys need to know a little bit about art because you know you should be able to draw something for patients and things like that and so he thought that we should do, get a little bit of interest in art and we should be a little bit artistic after all you guys are going to be in to cosmetic surgery and to have some ideas of the human body so he said I have made arrangements for you guys, residents go to the Carnegie Institute that had the art area so we all were given a chance to go and take these courses so that's where I got started in, as a part of my plastic surgery program.

I was also exposed to art or first thing sketching and then going on to learning about art itself, painting and things of that and when I came back I continued at the University of Alberta and eventually what I did was, in the 1990s, I thought, you know, no one happened to see in Los Angeles the center of the what they call the Japanese-American Museum of Art, they had a museum there and I saw some painting that were done by Japanese American internees most of them were somewhat dreary, they were not, they were very somber and very sad paintings I thought, wasn't my experience I must say, my experience in the internment camp yes it was a sad time but at the same time we really you know got a lot out and so as a result I made this book, the painting, these paintings were, paintings of, these were all, I made 27 paintings on the internment and the area that we went, this is New Denver and then actually when you look at it, if you look at the cover New Denver was an internment camp but to look at it didn't look like an internment camp and if you look carefully you can see the houses but it actually looked almost like a resort.

Anyhow I ended up doing these paintings of the internment camp and that was a little hobby that became a book eventually and I made it into what was called and a discussion about the fact that I was in an internment camp for four years and what happened when I was there and basically that's exactly what it says, it was a period of my life when I was a teenager actually and it was from the age of 13 to 17 when I was there, it's a period that certainly set me up for what was to happen later on.

**Yaesh Sardiwalla:** Dr. Shimizu my final question about your career and how you would like to be remembered as a plastic surgeon?

**Henry Shimizu:** Well I like to be remembered as a plastic surgeon that liked to try and return any injury the closest possible to what was the original contours, the original area that I was treating that was either traumatized by burn or traumatized by injury or having been a deformity as a result or congenital anomalies and those were three areas that I did work on quite a bit. I did a lot of, as a matter of fact a number of what you call Crouzon's disease were facial deformities, we actually started an area of that and one of the plastic surgeons that we trained has become an expert in that area and does congenital deformities and things like Crouzon's and as well of course it all comes from the area of doing cleft lips and palates because you are taking that in order to get them as normal looking as possible. Canadian plastic surgeons were one of the first to come up with a good method of cleft lip repair in Toronto and his and there was another fellow there by

the name of Lemessier method of doing a lip repair is still one of the great improvements that they did in that area of congenital deformities.