

Anthony J. Raimondi

## Mr. Anthony David Hockley

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Mr. Anthony David Hockley is a sensitive, gentle, considerate person who approaches his professional duties and challenges with the same warmth as he relates to his fellow human being. In contrast to the stereotype of the surgeon(s) against whom George Bernard Shaw waged Quixotic battles in the press, he asserts himself in a retiring fashion, leaving room for his interlocutor to express himself fully ... and giving him time to understand, and appreciate, that Mr. Hockley's softness of expression and courtesy of demeanor clothe a firm and deliberate physician whose medical arts come to reality through surgical skills. This is the stuff true civil leadership is made of, providing trust and protection to patients and obtaining respect and devotion from colleagues and students.

Subsequent to a happy childhood in a small family (one brother), during which science dominated "Tony's" schoolwork, rugby (and cricket) his sporting activities, and the piano the time he devoted to the performing arts, basic science studies were undertaken at the London Hospital in Whitechapel. Life in the East End of London in the early 1960s was full, exciting, and promising for a future doctor who swam into the mood by adding studies in drama to those of medicine. As with most – all? leaders, an initial casual encounter with a great man (Mr. Douglas Northfield), and then a prolonged opportunity to study in his Service, imprinted Tony Hockley with the motivation to practice academic neurosurgery in the style of a physician.

It is interesting for those familiar with the American system of specialty education (training) and certification to learn that in 1970, the time Mr. Hockley gained his



FRCS (Neurosurgery) qualification, there was no higher examination specifically in neurosurgery in the United Kingdom. Mr. Hockley's training consisted in appointments to the services of Mr. McKissock (Atkinson Morley); Messrs. Paterson, Jennett, Russell, Hide and Turner in Glasgow; Mr. Walpole Lewin in Cambridge; and, on the North American continent, with Dr. E. B. Hendrick at the Hospital for Sick Children in Toronto.

Once an official appointment was obtained (in 1978 to the Queen Elizabeth and Children's Hospitals in Birmingham), Mr. Hockley set about expanding upon the examples set by the two "founders" of pediatric neurosurgery

in Britain: Kenneth Till and John Shaw. Working within his clinic and collaborating with his fellow British neurosurgeons particularly interested in pediatric neurosurgery, he oriented himself towards developing pediatric neurosurgery as a subspecialty, always stressing that it must continue to be very much a part of general neurosurgery. The result? In 1988 a British Paediatric Neurosurgery Group (a “satellite” of the Society of British Neurological Surgeons) was founded in Birmingham, beginning with six colleagues and expanding meanwhile to seventeen.

During the years in which he developed his special pediatric neurosurgery skills and collaborated, as the Founding President, with his colleagues to form the Paediatric Neurosurgery Group, he became active in international pediatric neurosurgery organizations and teaching programs. His work in the International Society for Pediatric Neurosurgery was so outstanding that he was first chosen to chair the Bye-laws Committee, then the Scientific Program, and then asked to be President of the 1994 Annual Meeting and to host it in Birmingham. In 1998 he served as President of the Annual Meeting of the ISPN held in Melbourne, an experience which bound him spiritually to the founder of neurosurgery at the London Hospital, Sir Hugh Cairns (an Australian), to two of Sir Hugh’s students, Douglas Northfield and Walpole Lewis, who were Mr. Hockley’s teachers, and a fellow Walpole Lewis trainee, Miss Liz Lewis, the Annual ISPN Congress Chairwoman in Melbourne.

The clinical academic works of Mr. A.D. Hockley, his leadership, and the spontaneous warmth radiated by him and his equally gentle wife, Heather, have greatly enriched pediatric neurosurgery in Europe and enhanced the stature of the ISPN as the medium for developing this subspecialty at world level. It is fitting to recognize a man’s accomplishments; it has been a privilege on this occasion to write of those of a gentleman.

## Abridged Curriculum Vitae

*Name:* Anthony David Hockley  
*Born:* Hampton Court, 4 October 1943  
*Present appointment:* Consultant Neurosurgeon to the Queen Elizabeth and Birmingham Children’s Hospitals (since 1978)  
*Marital status:* Married  
*Children:* 3  
*Education:* Brighton College  
 London Hospital Medical College  
*Qualifications:* LRCP MRCS 1966  
 MB BS (London) 1966  
 FRCS (Edinburgh) 1970  
 ECFMG 1974  
 Certification of Higher Surgical Training 1976  
 FRCS ad Eundem(England) 1999

*Academic appointment previously held:* Senior Clinical Lecturer in Neurosurgery, University of Birmingham  
*Membership of committees – Present:* Specialist Advisory Committee in Royal College of Surgeons Examination Board and Examiner, Inter-Collegiate FRCS  
*Previous:* Founding Chairman (1989) of British Paediatric Neurosurgery Group  
 Chairman, Annual Meeting ISPN (1994)  
*Previous appointments:* Senior House Officer 1970–1971, Institute of Neurological Sciences, Glasgow, Neurosurgery  
 Posts with Mr. A. Patterson and Prof. B. Jennett, Mr. J. Russell, Mr. T. Hide and Mr. J. Turner  
 Chief Resident, 1974, Hospital for Sick Children, Toronto  
*Pediatric Neurosurgery:* Posts with Dr. E.B. Hendrick, Dr. H. Hoffman and Dr. R.P. Humphreys  
*Medical Societies:* Society of British Neurological Surgeons  
 International Society for Paediatric Neurosurgery  
 European Society for Paediatric Neurosurgery  
*Speaking engagements:* New York Eye and Ear Hospital: University of Naples: University of Liverpool, Sutcliffe Kerr Lecture: Royal Society of Medicine, London: Salzburg:  
*Nevis:*  
*Visiting Professorship:* University of Vancouver – 1998  
*Publications:* 71, including:  
 Byrne P, Hockley AD (1995) Management of optic pathways tumours (abstract). *Child’s Nerv Syst* 11:358  
 Chapman SC, Goldin JH, Hendel RG, Hockley AD, Wake MJC, Weale P (1991) The median cleft face syndrome with associated cleft mandible and bifid odontoid. *Br J Oral Maxillofac Surg* 29:279–281  
 Collins P, Hockley AD, Woollam DMH (1978) Surface ultrastructure of tissue occluding ventricular catheters. *J Neurosurg* 48:609–613  
 Flint GA, Hockley AD (1987) Internal fixation for atlanto-axial instability in children. *Child’s Nerv Syst* 3:368–370  
 Hockley AD (1975) Metastatic carcinoma in a spinal meningioma. *J Neurol Psychiatry* 38:695–697  
 Hockley AD, Woollam DMH, Collins P (1976) Vascular patterns in the brain and spinal cord of the rabbit with special reference to the choroid plexuses of the lateral ventricles. *Proceedings of the Anatomical Society of Great Britain and Ireland*  
 Hockley AD, Wake M, Goldin JH (1986) Vertical orbital displacement. *J Neurol Neurosurg Psychiatry* 49:1331  
 Wilkie AOM, Slaney SF, Oldridge M, Poole MD, Ashworth GJ, Hockley AD, Haywarad RD, David DJ, Pelleyn LJ, Rutland P, Malcom S, Winter RM, Reardon W (1995) Apert syndrome results from localised mutations of FGFR2 and is allelic with Crouzon’s syndrome. *Nat Genet* 9:165–172

*Guest lectures held:*  
 Orbit problems – 1982  
 Postgraduate Faculty – 1989  
 Craniofacial surgery – 1991  
 Neural tube defects – 1992  
 Academia in Pediatric Neurosurgery – 1992  
 American Society of Paediatric Neurosurgery, 1993