

92. Tony Hill

(1) Tell me about your background.

Right, I was born in Birmingham, but left and was brought up in Devon, from about the age of two. My family, at that time, were definitely a bit short of cash, and I went to the local council school. And by, shall we say, guidance from my teachers at the council school, managed to get a free pass to the local grammar school, and I spent time there. And from that point, I always wanted to be an engineer of some sort, and particularly aircraft. My council school teacher, again, was the chap who actually got me a student apprenticeship at Bristol Aircraft. My other interest was motor cars, always had been, and when Bristols turned over to - well, didn't turn over, they introduced the Bristol car as part of their production - I managed to get on the planning side of that. And proceeded from there, eventually, to Rovers at Solihull, again on the planning side. And generally stayed in the motor industry, at various angles, until I retired, or, shall we say, was forced to retire, as usual, at about the age of fifty eight. I was... I went to a course on how to retire gracefully, and the chap who took it said: anybody who was interested in continuing working, would they care to give me a CD. Not a CD, a... And I did this, and he rang me up a few days later, in the office, and said "would you like to take up... be in the civil service?" And I said "well, not really"! He said "well, it is engineering". And I moved over to the Ministry of Defence on the analysis of NATO specifications for equipment, and so forth. And I stayed there until I was sixty five, I suppose, and I became an SPTO, which is a Senior Professional Technology Officer. And that's it.

And in your background, was there any illness, in general, or any knowledge of diabetes, in particular?

Absolutely none. I had asthma, as a child, which was mainly due to the fact that my father was a very heavy smoker, and that sort of brought the asthma on. But as soon as I left home, at the age of sixteen, I seemed to lose it, and that was it.

Tell me about meeting your wife.

Meeting my wife: Well, as apprentices - I was a student apprentice at Bristol - we tended to get an extra week's holiday by going and picking spuds down in Cornwall, and so forth, which was a very nice week. And I think, oh, I must have been about... oh, it was, it was just after my twenty first birthday, we went down there on one of our trips, and, amazingly enough, I met her in a pub down there. And it was one of those things: it just clicked, and we've been together more or less ever since.

How many years is that?

Well, I'm seventy nine now, so subtract twenty one, and you've got it. Well over fifty years.

Was there any knowledge of diabetes on her side of the family?

No. I'd say that her mother had diabetes, but it wasn't really sort of noticeable until long after we were married.

Ministry of Defence

(2) How long were you married before June developed diabetes?

It would be about eleven years.

Can you summarise the years of your marriage, before your wife developed diabetes?

Well, it was pretty ordinary, really. We bought a house, and painted and decorated it. We were pretty active, I suppose. June was always extremely active. She was very much into the athletics, of one sort or another. She was very keen on the amateur theatre. I was extremely busy. I suppose one of my problems - well, wasn't a problem, really, but especially just before it developed, and for several years immediately afterwards - we had Harold Wilson problems, in as much as our big Birmingham factory used to produce a very wide selection of products. Everything from Bendix washing machines to bicycles, to stainless steel sinks, and you name it, there was a whole range - vending machines, anything - as well as cars. And it was decided that the factory should be devoted to producing car bodies, of various sorts, including Jaguars and 36,000 a week Minis, and so forth. And we decided to... well, we had to transfer all the smaller production to smaller factories. Now, we intended to do this within the Birmingham area, but Harold Wilson, at the time, was most insistent that anything like that had got to be transferred to up north, to Liverpool, or various places, because the docks were closing down. And so we built a brand new factory up there. And part of my job - well, most of my job, really, over those few years - was shooting up to Liverpool, and transferring all these various aspects of production, and trying - and I do mean trying - to get the Liverpudlians to accept them as sort of occupations.

And when was your son born?

He was born in 1959. And again, this added on to our... well, we were both extremely busy. June had a bit of postnatal depression, which didn't help a lot, but we got over that, and it all went quite smoothly, really.

And when did she begin to show symptoms of diabetes?

It would be about three years after Robert's birth. She went to - I forget what it was - went to hospital over something, and one of the blood analyses showed up the possibility of this, and it was recommended that she went and had it investigated.

And what happened?

Well, they diagnosed it, and, at that particular stage of it, the idea was that she should stick to a fairly stiff regime in what she ate.

So, this was the early 1960s. Can you remember what kind of regime was recommended?

No, I can't really. It was limited sugar, and such like.

Did it make much impact on your life?

Not really, no. At that particular stage, it didn't register to a very great extent.

(3) Well, you said that you were extremely busy with moving a factory. What impact did diabetes make on your wife's life?

Well, her mother had diabetes for quite a while; certainly almost, I would think, ever since I knew her, from 1950s. And fortunately - or unfortunately - she regarded it very lightly. In fact, quite honestly, it made very little effect; she still ate stacks of chocolate, and lord knows what else. And I think she was beginning... I don't know, at that time she was still very active. And June was obviously worried, not to any very great extent, but rather that she realised that she'd got the same problem as her mother. And I think she was... well, I know she was far more regular in her sort of diet, and so forth, than her mother ever dreamt of.

Can you remember, in the 1960s, what kind of care June received from the medical profession?

To be perfectly honest, no. I think it was mainly through our doctor, who, we were very lucky in as much as we had a very, very nice chap, and a very thorough one.

How long did your wife remain on diet only?

I think it was until we actually moved to Oxford, which we actually moved to Oxford in 1980, and it would probably be the early eighties; 1983, perhaps.

And what prompted that change?

I think the change of tablets was brought about, probably, by the analysis of her diabetic situation in the Oxford area. Possibly it may have been better than the Birmingham.

And after she went onto tablets, what impact did her diabetes make on your life?

I think it actually became a more interesting subject, shall we say. I think I started to appreciate the fact that diabetes was a problem, in as much as my new staff in Oxford - I had one draughtsman, who was diabetic, and I also had an associate who was very diabetic. And I think, possibly, people in Oxford tended to discuss these sort of things. They're very friendly people, actually, and I'd never even considered the fact that any of my staff in Birmingham suffered from anything like that. But in Oxford, this became... I suddenly realised these chaps had got diabetes, and I started to find out the sort of problems they'd

got, and the fact the one particular chappy had to have two or three injections a day. And this registered with me: “good heavens, is this diabetes?”

(4) Did you anticipate that June might one day have to move onto injections?

I think I did, yes. I thought, you know, this could possibly happen.

And what prompted her move onto insulin?

Well, she had an illness. She had a liver. . . kidney - sorry – illness (in fact, liver), which got her into the JR - that’s the Oxford hospital - for about six weeks. And there was no doubt about it, they had to put her onto insulin during this period. And rather to everybody’s surprise, she was sort of scheduled to go off to Birmingham on the possibility of having a replacement, and I think the shock registered with her and she recovered, very slowly. And anyway, this had, of course, introduced the use of insulin, and from then, onwards, it became regular.

Was her kidney trouble anything to do with diabetes?

This, apparently, was a very questionable thing. The doctors were not certain, by any stretch of the imagination, what had caused it. It was diagnosed possibly to be due to the time we spent in Singapore, and lord knows what else. But in the end, they admitted they just did not know what had brought the problem on.

And how did your attitude to her diabetes change after she went onto injections?

I don’t know. I think I became more helpful, or tried to become more helpful; it doesn’t always work. But yes, I tried to be more helpful.

In what ways?

Well, I suppose I’m a rather organised sort of person; I’ve been a planner ever since I was about nineteen or twenty. And I tend to plan these things, much to June’s disgust, to be perfectly honest. And I think, possibly, I sort of tried to keep the whole thing sort of sorted, if possible.

Can you explain what you mean by that?

Well, I think I liked to be aware of her sugar positions, how she felt, you know, and whether, in actual fact, you know, she was going to sort of have problems, or not, as the case may be. And I also tried to, when we went on holiday, or something like that, I think I was always very much aware that we could deal with diabetic problems; that hopefully, on board ship or anything like that, there were refrigerators available for storage, and that sort of thing.

Did it affect your social life much, while you were at home?

No, I don’t think so.

(5) The picture you’ve given is that you were really not much involved in her diabetes up until she took tablets, and probably not much after that. But that the change came when she went onto insulin?

This is true. She was so very ill in hospital, for six weeks, with this problem, and she came out and came home in a very, very poorly state. In fact, we had to have nurses in a couple of times a day to look after her. And I think I became - well, obviously very worried, because, believe it or not, I'm very fond of her - and I think I developed, shall we say, an attention to what was happening, and what ought to happen, and how it should be done. And when she finally recovered - and fortunately she did completely recover - it still continued. I still felt that - I suppose it's my nature - but I wanted to know exactly what was happening, how she was. And if we went anywhere sort of on holiday, and so forth, I liked to make sure that the various facilities, and so forth, were there for, even if it's only refrigeration for storing the insulin equipment.

How did you set about finding out about diabetes?

I don't think I did. I think June had various magazines on the subject, and, quite late on, we joined the OCDEM set-up, and I was quite fascinated. I used to go to these lectures with her, and I was very interested in the various talks, and so forth, which were delivered on the subject.

Now, OCDEM being the Oxford Centre for Diabetes, Endocrinology and Metabolism. And what was this set-up that you described?

Well, they have meetings to discuss various subjects with people with diabetes, and these are held every two or three months. And I must admit, we haven't been recently, but certainly for a year or more, we went quite regularly, and I found it very interesting.

What kinds of subjects were covered?

Well, the effect of various things on diabetes, the various methods of dealing with diabetes, and I think the future developments. They were organised by the Oxford group of the Diabetes UK, and originally they were held at the Churchill diabetes centre, but, for various reasons, this was transferred to a church hall in the depths of north Oxford. And I'm afraid we sort of tended to drop off, after that, and didn't go, but I still recommend them intensely.

(6) How important has it been to you to understand diabetes?

I think it is important, in as much as "clarification" is the operative word; that there's an awful lot of chat goes on about diabetes, and it is really extremely difficult to pin down exactly what it is, and what the general effect is, not only on people, but generally on the public, shall we say. I think one of the main problems is, with any illness, people really know very little about what the subject is. And a) they don't want to know about it, they'd rather not know about it, and b) they tend to find it boring anyway. Now, personally, I'm probably exactly the same, but because June was so poorly before she went onto insulin, for six weeks - well, for longer than that, in actual fact, after she came out - I was very, very much involved in her illness, and the fact that she had gone over, or her diabetes had deteriorated, in as much as she had to use insulin. Now, this did raise an interest with me, sufficient to try and find out just what

this diabetes problem really was. You can get all sorts of funny things, sort of “we can cure it with this, we can cure it with that”, what have you, but I think I really wanted to know just what was causing the problem. And I didn’t dash around for library books. I did actually call it up on the Net, and tried to find it that way. I read the - or scanned through, certainly - the magazines which June had on the subject, and I was really quite keen on attending these meetings - this Oxford diabetes set-up - and I really did learn quite a bit about what was involved. Whether this actually practically helped, but mentally, I think, it certainly did.

In what way?

In what way? In as much as I started to realise that perhaps it wasn’t so sort of... the involvement wasn’t quite so deep as possibly I had thought. But, on the other hand, I realised that there were various methods of dealing with the problem, but there were also certain aspects of it which were, more or less, there was damn all you could do about it.

What sort of aspects?

Well, the things on eyesight, and possibly physical effects, sort of... It never occurred to me that things like feet could be affected by diabetes. And you sort of - especially if you haven’t got the problem yourself - you either don’t know or don’t want to know. And it actually sort of brought home to me the problems - and possibly how to deal with them - involved with the diabetic set-up.

- (7) If, as you say, there’s damn all you can do about complications, then is there any point in reading about them? Isn’t it simply going to be depressing?

No, I don’t think... well, I think it depends on your mental attitude, to be perfectly honest. It would probably depress some people, but I think it gives you an idea of what to expect, and possibly the necessary action, which you may need to take, if the situation develops as outlined at the lectures.

Has June developed any of these complications?

Yes, her eyesight, in particular, has been affected, and I feel I can appreciate what her problems are there. She’s now given up driving, which I now deal with for her, and so forth. And obviously, although she’s still very active, the diabetic effect has... or, should I say, the diabetes has had its effect on her.

Just with respect to eyesight?

Shall we say just very generally.

Now, you admitted that you were not really very interested in diabetes, for many years. What tips would you give to somebody with a family member with diabetes?

I think one is - accept it, and the other is to try and get some idea of what is involved, and the other - and I think possibly the most important - is patience.

Why is patience needed?

Because it's so easy to sort of say "oh, you're a ruddy nuisance", and you shouldn't. You must accept that diabetes is a problem. It may not be immediately apparent to you, but it is there, and it is a problem.

And now that you're both in your late seventies, can you describe what life is like with diabetes?

Well, I'd like to say that people should never worry too much about it, for the simple reason that we seem to have a pretty full life. We belong to various clubs, and play bowls and swim, and do all sorts of things, even at our extended age! And I think... I've no sympathy with these people who sort of sit down and say "oh, I've got diabetes. I can't do this, I can't do that". You can do it, and I think we do it, and we thoroughly enjoy life still.