

# The Canadian Practitioner and Review.

---

VOL. XXV. TORONTO, OCTOBER, 1900. NO. 10.

---

## Original Communications.

---

### SOME EXPERIENCES IN THE WAR IN SOUTH AFRICA.

---

BY G. STERLING RYERSON, M.D., L.R.C.S. (EDIN.),  
Lieut-Colonel Canadian Army Medical Staff and lately British and Canadian Red Cross  
Commissioner with Lord Roberts' Headquarters.

---

A great war necessarily presents many phases and points of view, and as the time allowed for the reading of papers by associations, such as I have the honor to address, is limited, I shall only deal briefly with one or two phases which I hope may prove of interest.

The war in South Africa is interesting surgically because of the experience which has been gained of the effect of modern arms of precision, and of antiseptic methods on the field of battle and in the hospitals. It is too early yet to draw deductions from the statistics of the war, but it may be noted in passing that while 936 officers and 11,701 non-commissioned officers and men have been wounded—12,637 in all—only 732 have died of wounds received in action, an infinitesimal proportion, which may be fairly ascribed to the aseptic character of the bullet, to the prompt application of a first aid dressing and to the able and eminently efficient treatment which the wounded received at the hands of the medical officers in the hospitals. The Mauser bullet has justly been described as a merciful one. Its action upon human tissues depends, however, upon the range at which it is fired. It has been noticed that when it is fired at short ranges, within two hundred yards, it has an explosive character. The nickel case seems to expand and become de-