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SURGEONS AND THE TRENCHES

WILLIAM H. DEARDEN, in Harper's Weekly.

THE doctors are drawing a vivid real picture of the European war. Their reports from the front are forbidden. Cold censors who destroy the simple post card story of the soldier son to his mother are stamping "Approved" on the technical and often narrative letters from the surgeons just behind the fighting lines. They may not name places, but they may tell what war is. War surgery is now the vast majority of the doctors now overwhelmed with it; the exchange of facts, suggestions for treatment, warnings and experiences is a military necessity, for the doctors must be fully equipped to heal the wounded as quickly as possible and send them back to the fighting line.

So the doctors are writing, talking and publishing freely. Every medical journal of Europe is crowded with the war facts and experiences. The great scientific and medical societies which still attempt to meet are given over largely to the medical problems. Their accounts have the added value of being trustworthy and even rigidly accurate, a unique quality in this war.

Out of their stories comes a composite picture of all the newly discovered horrors of war. Not a detail is missing; some doctor has sent in his story from every corner of the fighting territory, from the trenches, the field hospitals, the clearing hospitals, the hospital trains.

This is a dirty war. Gaseous gangrene, lockjaw, blood poisoning, all dirt disease, and the great dreeds of all the armies fighting in France and Belgium. "Sod as scrubmen, soap and brushes" is the appeal of Dr. R. P. Rowlands, a British surgeon, from the north of France.

Col. G. H. Makins of the Royal Army medical corps sighs for the clean dust of the veldt, which the British soldier cursed so in the Boer War.

An English doctor stationed in the trenches at a point near the border of Belgium and France suggests the whole story in an incident of his duty. The British troops had "dug themselves in" and for four weeks every officer and man of this command had been living in the ditches, mud had caked them all, had worked into their clothing and underclothing. Not even the officers had been given a chance to remove their clothing once. Vermin flourished.

The doctor discovered a deserted Belgian factory in workable order back of the firing line, and obtained permission to turn it into a bath house. Steam was readily obtained and big vats were turned into hot water tubs, each ample for several men at once. The soldiers were sent back from the trenches a squad at a time to enjoy the luxury of soap and water.

But trouble came when the first squad climbed into the vats. Their underclothing which they removed was in such a condition from dirt, rot and vermin that it could not possibly be put on again. Bathing operations had to be suspended until a supply of underclothing had been obtained, in order that every man who bathed might dress again.

Since old weather sat in, men in the trenches have been given occasional relief, in all the armies, perhaps averaging a day per week. As evidence however that the dirt still continues is the report that gasoline is being delivered to troops, for killing body vermin in the trenches. One German army joke has been that every company of men attacking Russian trenches must have two men in the front ranks to scatter insect powder.

Even with all this dirt, disease has been comparatively slight. Typhoid and dysentery have had few victims among the French, Germans and English, although typhoid has appeared among the Belgian troops. Typhoid inoculation which drove this disease out of the American army, is used quite generally, though one-third of all the armies has not yet been inoculated. Cholera has been threatening on the eastern front, so the Kaiser Wilhelm Academy in Berlin is shipping cholera vaccine to Poland.

But this dirt, only an inconvenience to the healthy, is a devilish scourge to the wounded. Almost without exception wounds are "septic" which may be translated as "putrifying." Bullets wounds are least so, shell wounds most. Hand grenade wounds, a development of the last few weeks, also are bad.

The bullet that goes clean through the flesh is not of course making the septic wounds of earlier wars. Its high speed seems to kill the organism by heat. Col. Makins has told of actual burns of the skin, caused by a bullet which rolled around under a man's clothing, after it had passed through his leg.

But the trouble is that these wounds are in small proportion, less than one-quarter of all wounds. The popular impression that wounds in modern warfare are not horrible applies to only a few. The contrary is the rule. Even bullet wounds make many horrible tears, bursting and smashes. Dr. Erwin Payr, the eminent professor of surgery in Liepzig, now surgeon-in-chief of a German hospital in France, reports that very frequently as many as 40 bone bits are counted in the X-ray pictures. Since the fighting has been closer in trenches, often only 100 yards apart, the modern bullets have been making horrible muscle-tearing wounds, a condition not anticipated. Worse yet, the majority of wounds in this war are from the more inhumane shrapnel and shell. Ninety per cent of all the wounds treated at the great French base hospital of Champagne in the first three months of the war were from shrapnel and shell, and more than half still are. Shells are steel casings filled with explosives which scatter bits of steel in every direction. Shrapnel are metal jackets containing explosives and a quantity of bullets about the size of marbles. Great, ugly, dirty wounds are their product.

Worst of all, this war has developed two other wholly unexpected horrors in these shell and shrapnel wounds, lockjaw and gaseous gangrene. French, German, British and Belgian doctors alike have been appalled by the lockjaw. The cause generally ascribed is the fact that the fighting has been over ground long tilled and so apt to be impregnated with tetanus bacilli. The tetanus of lockjaw.

What happens to the wounded man may be illustrated by a typical case. Napoleon Grenier, private in the regiment of French infantry, is hit by a shell fragment in the trenches near Rheims. His thigh is badly torn, but he is lucky. If he had been hit in the open out between the firing lines, he might never have been rescued.

He tries to get out the first aid packet from his inside pocket, but his comrades get it out for him. One opens the packet, and another swabs the wound with iodine from a little glass tube and the first then roughly dresses it with absorbent cotton and bandages.

Until night he lies in the trench, for then communication opens with the rear. After dark he is carried by comrades to an ambulance or more likely to a food cart, and in that he is transported to the field hospital, perhaps two miles away. Again he is lucky, for the army has been in the trenches several weeks, and the field hospital with all its connections is running smoothly.

That night in the field hospital the doctors give him first an injection of tetanus anti-toxin and then dress the wound. They decide he can be sent home for treatment. If he had been terribly wounded, he might have had to remain the field hospital, or at least not far in the rear from there.

About dawn he is carried by a motor to the clearing hospital. The clearing hospital is largely a development of this war, established to meet actual conditions, and as the name implies is a diverting station. Quite likely it is located in a railroad station five miles to the rear. There the doctors decide he can stand a railroad trip, and he is ordered to Bordeaux.

Now comes the worst of his whole experience, the railroad trip to Bordeaux. Magnificent hospital trains had been provided before the war and many have been equipped since, but it is the freight train which still bears most of the wounded from the front, the same which brought up men, horses, and food. For a day and a night he suffers terribly. It is not uncommon for wounded to die on these trips, but the placing of an attendant in each car has been an enormous relief these last three months.

At Bordeaux Napoleon's worst troubles are over. In a motor ambulance he is carried to a suburban village, where the casino has been converted into a hospital of 500 beds. The doctors are the old practitioners of the village for the young ones are in charge of serious operations. Here Napoleon remains until he is ready to return to the front.

TWO GREAT DRIVES AGAINST GERMAN ARMY IN FRANCE

One Being Conducted by the British and the Other by the French—Nearly 1,000,000 men Engaged

Paris, March 20.—Two great drives against the German army in France are under way, one being conducted by the British, the other by the French.

In La Basse district, where hundreds of thousands of British troops are massed, the British are battering away at the German lines in an effort to pierce them and press on to Lille.

In the Champagne district, between Rheims and the Argonne forest, the French have concentrated their efforts to pierce or drive in the German lines. Rentless fury marks the assaults in both districts, and it is estimated that in all nearly 1,000,000 men are engaged on these two sections of the battle front.

Things have gone badly for the Germans since the Allies began pressing home the jaws of this mighty vise. The invaders have been driven from Neuve Chapelle, Lepinette, Aubers and Malpegar by the attacks of the British, and in the Champagne the Germans have been driven back mile after mile near Les Mesnil, Perthes, Beausjour and Souain.

The real object of Emperor William's visit to the French front is believed to inspire his troops by his presence.

It was reported that the Kaiser had gone to a point near Lille, to take part in an important council of war, but a more likely belief is that the German Emperor, rendered fearful by the recent successes of the Allies, has gone to the front to inspire his men to fresh aggressiveness and courage.

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