CRITICISMS MADE ARE NOT JUSTIFIED

(Continued From Page 1).

cers. In some instances the opinions of these officers were ignored by commanding officers. Until recently there was no adjutant-general's branch of the staff in England to which this subject appertains, but the opinion of the board is that in the absence of such a branch it was the duty of the director of medical services to represent to the authorities that a large number of unfit men were arriving in England.

Col. Bruce Misled.

The board states that in some of the opinions expressed by Col. Bruce he was misled by lack of intimate knowledge of army organization, and the inter-relation of the various branches of the service, and that in some of his criticisms he failed to make allowance for the sudden expansion of the army board. It states that such imperfections as have existed are rapidly being remedied. In no war in history has sickness been so well controlled or the sick and wounded as well cared for.

Separation Inadvisable.

It disagrees with Col. Bruce's criticisms and recommendations, except in one or two minor instances, particularly with reference to the concentration of Canadian sick and wounded in Canadian hospitals. The board reports it is impossible in medical arrangements in France to distinguish between Canadian and British wounded, and for various reasons it would be unwise and impracticable to attempt separation on return of sick and wounded to the United Kingdom.

"It will be convenient," says the report and to summarize the principal points in Col. Bruce's report. First the concentration of Canadian sick and wounded in Canadian hospitals; secondly, suitability of V. A. D. Hospitals for care and treatment of Canadian soldiers; thirdly, the system of medical boards.

Unfair Criticisms.

As to the allegation of unfitness among officers selected for commissions in the Canadian Medicals thru over age, addiction to alcohol and other drugs, etc., this board deprecates such unqualified statements. Had Col. Bruce added what must have been within his knowledge that the proportion of undesirables in the corps is as low as any in the service.

As in some criticisms he failed to make allowance for the sudden expansion of the army and unavoidable want of specialized training in auxiliary services, such imperfections as existed rapidly being remedies, it is plain truth to say in no war in history has sickness been so well controlled or sick and wounded so well cared for. The board, relying on its own observations and evidence laid before it, is abundantly satisfied the Canadian sick and wounded have been thoroly well cared for, not only in central hospitals which Col. Bruce criticizes. These letters are the outcome of mobilization of the medical resources of the United Kingdom and in them Canadian wounded soldiers. are not only well cared for professionally but are comforatble and happy at home. The board desires emphasis to its dissent from criticism of these institutions, which it believes to be unjust and undeserved.

Regarding the system of the medical board it agrees there is much justice in the criticisms levelled at.

"The board cannot conclude this general review of its findings without adding that the report of the inspector-general ignores the good work done by Surgeon-General Jones and staff under the circumstances of novelty and great difficulty. The board has not hesitated to criticise those matters wherein in its opinion the director of medical services has failed but does so with great reluctance, for it is satisfied much has been the result of complicated arrangements, permitted to grow up. With the reorganization proposed the board is unable to concur and has ventured as the result of the combined experience of its members the suggestion of system it is believed is simple and likely to be practical.

The board points out that lack of an organized Canadian staff was a very serious handicap to director of medical services in dealing with the important subject of non-effective troops. The board is agreed large numbers of soldiers continue to come from Canada unfit for service at the front. The cases come under two main headings: Firstly, men who do not comply with recruiting standards regarding age; secondly, men unfit by reason of physical disability. The first class is the more numerous. The board understands the recruiting medical officer is not required in examination to consider the apparent age of recruits. This being so, the charge as regards Canadian medical corps narrows itself down to the second class. The board is satisfied there have been large numbers of men passed who ought not to have been passed by the medical officers, but it was perhaps inevitable under the circumstances of raising a Canadian force that examinations could not be conducted with all the care necessary. This, it believes, may have been due partly to inexperience of examining medical officers and partly to hurry, partly to carelessness and lastly, in some instances, to opinion of examining medical officers being overridden or ignored by commanding officers. These defects continue to exist despite medical examinations by recruiting medical officers, b yhattalion medical officers on joining units and before sailing for England. The remedy lies in more stringent examinations. Medical officers should be responsible, as in the British service, that recruits of apparent age correspond with declared age. There should be inspectors of recruiting familiar with the requirements of the army in the field. No soldier should be permitted to cross seas without having been classified by a medical board as fit for general service. The board has come to the conclusion that this important matter has not received the attention it deserves; that the authorities here have failed to make adequate representations regarding the condition of affairs that must severely handicap the force both as regards organization, training in the United Kingdom and efficiency in field. What share in this responsibility lies with the director of medicals the board is not prepared to say as the adjutant general's branch of staff to which the subject appertains does not appear to have been represented in England until recently. The board believes in the absence of an age branch, it was the duty of director of medicals to represent as often as necessary to all sources open to him the fact that numbers of men were arriving here unfit for general service.

Restore Hospital Plan.

In Dr. Bruce's report a return to the policy of Canadian hospitals for Canadian wounded is advocated. There is much to be said on both sides, but the board, after very careful consideration, has come to the conclusion that the policy therein recommended is not only unwise but impracticable, having regard to the amount of accommodation that would be required owing to the increase in the Canadian troops in Europe.

"All thru the report of the inspector-general," the report continues, "the dominating idea in the conception of the Canadian force is something separate and apart from the imperial army's conception. It may be summarized as a water-tight compartment policy. In such matters the medical board is of opinion that so long as the Canadian force remains an integral part of the imperial army, such a view is more possible in the United Kingdom that in France, and so long as the Canadian troops continue to operate under the commander-in-chief of the British force, it must continue to be impossible to discriminate."

No Radical Changes Needed.

The board does not concur in Col. Bruce's view that complete reorganization from top to bottom of the Canadian medical service is necessary. In its opinion, the reforms he suggests would not remedy the defects he deplores, which are not due to the system but to inexperience on the part of the officers, military and medical, and to defaults of administrataion in the face of the enemy. The board is aware these considerations of high policy do not strictly come within its purview, but cannot refrain from advertising to this aspect because it would almost appear as if the report under consideration was based upon a conception that the Canadian forces had a similar relation to the British armies as that held by the allied nations.

Col. Bruce's Mistake.

The policy that the board ventures to attribute to Col. Bruce would have prevented the use of Canadian medical units in the Mediterranean, because Canadian troops did not happen to be employed in that theatre and also of establishing Canadian hospitals in Paris for the French sick and wounded. Indeed, the sending of Canadian medical units to the Mediterranean is criticized from this very point.

Distribution of Casualties.

Reverting to distribution of Canadian casualties the report says, despite the position of Canadian and British soldiers returning to England, being different, practically speaking the system of distribution satisfactory in the case of the British soldier need not be inefficient in the case of Canadians. What is required to meet the special circumstances of the Canadian soldier is and extension of system to Canadian convalescent hospitals and organized co-operation.

Regarding inspection between Canadian and imperial services, the board believes it is quite impracticable to collect Canadian casualties at the base in France, and it would be difficult and inconvenient to direct them solely to Canadian hospitals in England. The board considers it unwise on broad grounds, believing it in the best interests that Canadian and British should meet one another.

As illustrative of Canadian sentiment on the matter would remark that Canadian hospitals in Beachborough, Taplow and Orpington are governed by explicit provisos on the part of the donors that they are not to be confined to treatment of Canadians. That such a policy would be expensive is certain.

Conversation with many Canadian soldiers in different hospitals, officers and others failed to discover any general sentiment among the Canadian troops in favor of their exclusive treatment in Canadian rather than British hospitals. The present system enables a Canadian soldier to select, subject to administrative convenience, the neighborhood which he desires to be sent to; and while a Canadian from time to time asks to be sent to a particular locality, the reason generally is to be near relatives and is not generally associated with treatment or comfort in imperial hospitals. The board does not suggest that existing Canadian hospitals be given up, does not object to reasonable extension of them, but even without extension there is no reason why any Canadian soldier's desire to be treated in a Canadian hospital should not be met. Even if sufficient separate accommodation could be provided the collection of Canadian casualties in one area would either necessitate the retention of a number of empty beds for eventualities of war, or if these were used for the British then they would not be available for Canadian patients. There are twenty thousand Canadians in hospital in the United Kingdom today and provision for special Canadian hospitals for them all would necessitate additional accommodation for nine thousand without allowing for battle casualties. Deducting these provided for by special accommodation and others ready to be returned to Canada, there would remain about four thousand additional beds to be provided, involving capital expenditure of a million dollars. The question of cost cannot be considered apart from that of existing arrangements of whereby Canadians are kept in imperial hospitals at a cost of three shillings a head daily, whereas the average cost of Canadians in Canadian hospitals, as of British in British hospitals, is six to seven shillings, difference is due to cost of personnel, and equipment. It is right to state that similarly British patients are maintained in Canadian hospitals at the same charge of three shillings, but obviously the balance of advantage is in favor of the Canadian Government and if Bruce's policy were adopted many advantages of this reciprocal agreement would be very much diminished.

Cost Not Obstacle.

Altho these questions have been considered on a money basis, the board believes that if it could be established that the Canadian soldier suffered from being treated in imperial hospitals the Canadian Government would not consider the cost in any way, but there is ample evidence Canadian soldiers have not suffered from being treated in imperial hospitals. This important subject has been dealt with at some length, because the chief consideration in the reorganization suggested by Bruce is policy of preferential treatment, which the board considers impracticable in application, and believes unwise and opposed to Canadian sentiment.

The board cannot agree there is lack of efficient medical inspection in hospitals, but, while not reflecting on the efficiency of these inspections the board agrees with Bruce and Jones that additional inspection of Canadian hospital patients in British hospitals is desirable from the Canadian standpoint. There is evidence that the desirability of special inspections was not fully recognized by the then D. M. S. until July, this year. The board is of the opinion this policy with which the board is in complete sympathy should have been initiated at an earlier period.

It will be necessary to increase materially the accommodattaon in Canadian convalescent hospitals in the United Kingdom. The board recommends provision for regular hospital ships rather than returning invalids by transport.

Regarding V. A. D. hospitals, investigation of the board does not support allegations of inefficiency. The standard of professional efficiency naturally varies, but there is no ground even in the special reports made by Bruce's direction for grave indictment contained in his report that a good deal of the surgery is bad. If patients have been retained too long it has been caused by insufficient accommodation in Canadian convalescent hopitals, and delays in connection with Canadian casualty assembly centres.

Remarks Resented.

"The comments made in Bruce's report on V.A.D. hospitals have been widely resented. This board is of opinion these strictures are unjustified and regrettable. While the board agrees with Bruce that patients could sometimes be more advantageously treated in and more speedily evacuated from large military hospitals, the advantages of the V.A.D. system should not be overlooked. The board found Canadian patients well fed, comfortable and happy, receiving an amount of care only possible in institutions organized on the line of the home. This has been an enormous asset in the case of soldiers widely separated from kith and kin. The board cannot agree that the employment of Canadian medical personnel should be confined purely to Canadian institutions, or that Canadian ambulance service should not be used by imperial patients. If adjustment is required in these regards it should be dealt with when reciprocal service is under consideration. In all these points the board is opposed to the policy suggested by Bruce and in agreement with that carried out by Jones.

Medical Corps' Services.

The board is in profound disagreement with the view that the Canadian Medical Corps' personnel should not be associated with the British service in scientific enquiries and other work. On the contrary, it is of opinion such participation in both is desirable and necessary in the best interests of the two services. The board, too, is at variance with the contention that the services of the Canadian Medical Corps should in the main be confined to Canadian troops. The field ambulances serve primarily Canadian formations, but in the case of the line of communication units their work must of necessity be largely with other than Canadians. This aspect of the case, it is fair to say, was repudiated by Bruce when pieced before him. The board feels bound to place on record that in come of the opinions expressed by Bruce he is misled by lack of intimate knowledge of army organization and of the inter-relation of the various branches.

Should Stay In Ottawa.

The report goes on to say: It would be better if Canadian consultants were appointed to the imperial army instead of being confined to Canadian hospitals.

Referring to the allegation that there have been many errors in diagnosis and treatments, the board is decidedly of the opinion that there is no cause for alarm. Such errors as have come to notice are incidental exigencies of active service and do not prevail to as great an extent as in the ordinary course of practice in civil hospitals whether in Europe or Canada.

The board is of the opinion that it would be preferable that the head of the medical service should remain in Ottawa as principal medical adviser of the government, as there is considerable accumulation of convalescent Candians in the Imperial hospitals due to insufficiency of accommodation at present in Canadian hospitals. The board is also satisfied there are in the United Kingdom a large number of Canadian invalids who might be sent back to Canada, but whom it has been impossible to repatriate because the available accommodation in Canada has been insufficient.

The necessity for continuance of past harmony between the Red Cross in both the British, Canadian and medical service is unquestioned. The board is of opinion the discovery of admitted irregularities at once place, Taplow, does not vitiate the policy of relations hitherto obtaining. It feels bound to add that glaring departures from accepted service methods of administration passed unnoticed at Surgeon-General Jones' inspection.

The board is strongly of opinion that the forces and resources of the empire must be pooled to the utmost in this struggle, therefore, the interchange of personnel is desirable and necessary in the interests of both services. That the very instances quoted by Bruce seem to prove the desirability of such interchange and advantage to the Canadian forces of participation of officers in special investigations is too obvious to require justification. The board believes that the policy adopted by Dr. Jones commends itself to the authorities, for which there is abundant precedent in other branches of the service.

The statement that from many points of view the interests of the two services clash is contradicted by the evidence. The D. D. M. D., eastern command, on whose initiative the appointment was made, states Colonel Rennie is one of the best A. D. M. S.'s in the eastern command. The board is satisfied that this arrangement has been, and is a good and satisfactory one in regard to both Canadian and British interests.

A special hospital such as Ramsgate is essential as if the treatment had been delayead until the patient could be sent to Canada the beneficial aresults of early trtatment would not be attained, the board appreciates. Tho many cases have been adamitted and detained there whose immediate transfer to Canada was desirable, the board holds that Buxton Hospital serves a useful purpose.

The board agrees that there is a necessity for reformation in the medical board situation and in the classification of casualties, and it is of the opinion that an easy solution would be the adoption of the British system so far as is applicable.

The statement that certain medical units are not serving, except in a small proportion of cases, the Canadian sick and wounded in France is not true, so far as the thirteen field ambulances referred to are concerned, while, as regards casualty clearing stations and stationary and general hospitals, it is obvious that their employment on the line of communication necessitates their being used for all the troops using that line.

CABINET MINISTERS TO ATTEND FUNERAL

By a Staff Reporter.

Ottawa, Jan. 1.—A number of cabinet ministers left this afternoon for Montreal, to attend the funeral of the Hon. T. Chase Casgrain tomorrow morning.

Sir Thomas White and Hon. J. D. Reid will represent Ontario; Hon. P. E. Blondin and Hon. E. L. Patenaude, Quebec; Hon. Robert Rogers, western Canada, and Hon. J. D. Hazen, the Maritime Provinces. The prime minister will be unable to attend the funeral owing to indisposition.

CHASED HIS WIFE REVOLVER IN HAND

Constable Appeared and Angry Husband Took to His Heels.

FIRED ON POLICEMAN

Is Now in Jail Charged With Shooting to Kill.

Attracted by the sound of quarreling to 135 Cooper avenue about 7 o'clock yesterday morning, C.P.R. Constable Shimm ran to the house, where he found Michael Mugni chasing his wife with a revolver. When he espied the policeman, Mugni sought to escape, and doubled along the C.P.R. tracks, with Constable Shimm in hot pursuit. The policeman gained on Mugni, and caught him opposite the corporation yards on Symington avenue. Mugni shot twice at the policeman while retreating.

While the chase was on a telephone message was sent to Keele street police station to the effect that there was a fight in progress at the above address. Policeman 315 was accordingly despatched to the scene, but on arrival found Mugni gone. In the meantime C.P.R. Constable Shimm had communicated news of the affair to the police station, and when Policeman 315 reported his non-success, he was sent on the trail of the railway constable. Mugni was taken to Keele street police station, and charged with shooting at C.P.R. Constable Shimm with intent to kill.

Domestic Trouble Started it.

According to the police, the shooting was the outcome of domestic trouble between husband and wife, who had only been married about two months. Owing to constant bickering Mrs. Mugni had gone to live with her mother, Mrs. Drysdale, at 135 Cooper avenue. On New Year's Eve Mugni visited his wife at her mother's home, and when she refused to return home he used her roughly. The following morning he reappeared with a 32-calibre revolver, with which he threatened his wife and shot at the policeman. Both the interior of the house and Mrs. Mugni showed signs of rough treatment. Mrs. Mugni's injuries may necessitate her removal to the hospital. The Mugnis lived at 86 Wiltshire avenue.

HUNS BRUTALLY TREAT PRINCESS OF SAXONY

Husband Shuts Her up in Convent, Hastening Death.

Special Cable to The Toronto World.

Rome, Jan. 1.—An amazing story concerning the alleged vile treatment accorded Princess Luise of Saxony at the hands of the Germans is published in the newsparer Nuo Giornale.

The paper says the facts are based upon the information of "an American lady."

It is said that the princess was surprised by events while in a hospital in Belgium. German soldiers seizing her and sending her to the King of Saxony, who shut her up in a convent, declaring that she was mad.

The princess, the story goes, vainly attempted to flee from the convent and finally succeeded in communicating with her guardians. However, her dreadful tratment hastened her death.

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