SECTION III

THE WAR OF MOVEMENT: THE OFFENSIVES OF 1918

INTRODUCTION

IN this present series of chapters we resume the narrative of the experiences of the Australian Army Medical Service on the Western Front. It will be remembered that when it reached the end of 1917, this narrative was broken off to permit of a study of the developments in the Army Medical Service which had by then practically reached their culmination—in particular, the new place of the Service within the war machine. That study will help to elucidate the medical aspect of the new warfare of 1918, now to be described.[1]

In the Battle of Cambrai, with which the earlier narrative ended, we had discerned a "try-out" by both sides of military tactics almost amounting to a new art of warfare. The British High Command had lent an ear for the moment to the new "scientific" school of soldiers; the Germans in their counter-stroke applied methods to be used the next year in a vastly more powerful thrust. The leaders of the British Army Medical Service, not less than the High Command of the B.E.F., soon afterwards recognised that the war had entered upon a new phase. It was known that now, and for some time to come, at least, the Allied part would be that of defence; it was also discerned (though it would seem less clearly) that more or less rapid change and movement must now take the place of siege. The preparations made in the British Medical Service in France to meet these fundamental changes in the nature of its problems, and their actual *dénouement* in the events of March, April and May of 1918, form the subject of the first chapter; it also indicates the part played by the medical service of the Australian

[1] In the Canadian Official Medical Histories of the Great War the technical study of medical developments is based exclusively on the "Last 100 days".

force in the events of the two great German thrusts on the British front, on the Somme and on the Lys respectively. The second chapter describes, so far as they were seen in the Australian Corps, the readjustments imposed by the results of the German offensives and the preparations for a counter-offensive; from the viewpoint of the Australian Corps these developments appear as a natural and simple adjustment to the new conditions and technique of warfare. It was accomplished with a smoothness which in some measure masks its significance, but for which the reader of previous chapters will not be unprepared.

Pari passu with but unrelated to these general and technical developments we see in the A.I.F. the consummation of patriotic aspirations in the formation of a single "Australian Corps," and the replacement of the British by an Australian Headquarters Staff, including the appointment of an officer of the A.A.M.C. (Colonel G. W. Barber) to the position of Deputy Director of Medical Services. Associated with this appointment we find important changes in administrative methods, in part the impression of a forceful and self-reliant personality, but chiefly a reflection of remarkable developments in the Australian force as a self-contained and unique military formation. Through the integration of exceptional fighting qualities in the troops and of administrative and organising abilities of the highest order in its commander and his subordinate commanders and staff, we shall find the Australian Corps, swelled by external accretions at one stage to the size of an Army, taking a prominent part in the Allied counter-offensive and subsequent advance to victory.

The three subsequent chapters describe the successive blows in the British advance up the Somme to the Hindenburg Line. In this series of major battles we find the Australian Medical Service faced with the dual task; first, that of dealing within eight weeks with nearly one-seventh of the total battle-casualties sustained by the Australian force on the Western Front; second, that of sustaining the chief part in the problem of maintaining the fighting formations at a strength adequate for these stupendous tasks—and this in the face of not only casualties but of pandemic influenza Not the least significant feature of its work in the war is revealed in the fact that, of the effectives

that reached the front, no less than 60 per cent. were recovered men.[2] At the same time the new outlook on disease prevention, wherein "organisation" replaces "discipline" as the keynote of action, is reflected in the curve of disease in the force, and certain features of these activities special to this period of "open warfare" will call for a note. An account of the new gas warfare, which was so important a feature of this period, is relegated to the new volume.

Chapters XXIV and XXV take us to the end of the war so far as concerns the work of the medical service for the field army, and describes the interesting and important problem of combining the administration of two varying national forces, the Australian and American, and the preliminary steps in the repatriation of the Australian Imperial Force on the Western Front.

A final chapter deals with the "interior economy" of the medical service of the A.I.F. during the period under review in this volume; it leads up to the study in the final volume of what may be called the permanent social aspects of medical service in the A.I.F. in relation to the war of 1914-18.

[2] This estimate is based on *A.I.F. Statistics of Casualties, etc* issued 30 June, 1919 by Records Section A.I.F. Headquarters, London, and compiled from figures kept and consolidated by the Australian Records Section of 3rd Echelon, B.E.F. The value of this compendium is unfortunately diminished by a number of arithmetical mistakes, but (though unofficial) it remains the only consolidation of the Australian statistical records of the war hitherto attempted