

CHAPTER XX

THE GERMAN THRUST FOR VICTORY

By the time a play has reached the final act,¹ as this history of the Australian Medical Service in the Great War has now done, the *dramatis personae* should be familiar and the issues fairly well understood. In these the final chapters relating to military action the outlook will be rather that of "measures" than of "men": the experience of units, even of formations, are merged in an objective examination of the influence of the new warfare on the solution of the fundamental problems of the medical service in the field—the evacuation and treatment of casualties, and the prevention of wastage. It is perhaps inevitable, but is not the less embarrassing, that for this period the records of the service are such as to invite detailed and personal narrative. They are moreover adequate to a much more exact study of medical problems in the field than is possible in this work.²

The salient features of the general and military situation in March of 1918 can be summarised in four items:—

1918; Stage directions

1 The collapse of Russia and Roumania and the temporary defeat of Italy, together with highly effective tactics (both military and medical) in the conservation of force and prevention of wastage, had put the German High Command in a position to make available between 60 and 70 divisions for a thrust on any suitable part of the Western Front.³

2 As an offset to this, and to the adverse results of "attrition," the Allies had now a strategic reserve in the troops of the U.S.A. of whom,

¹ This chapter picks up the narrative of events from *Chapter 1*.

² The war work of the Australian War Records Section of Administrative Headquarters, A.I.F.—which is now known as the Australian War Memorial—will be dealt with in *Vol. III*.

³ On March 21 Germany had 192 Divisions on the Western Front, the Allies 175 (including 2 Portuguese).

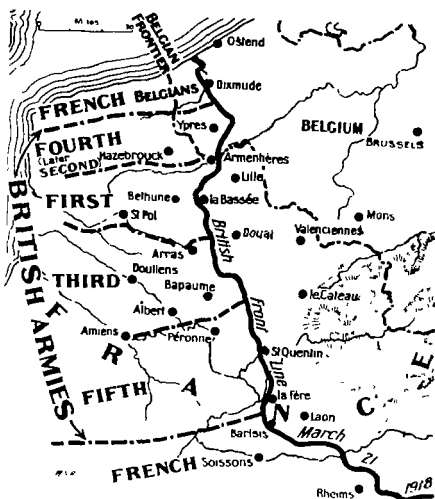
when the German offensive opened, 41 divisions were in France and about 40 in training camps in America. The American Army would not however be ready for any decisive part before the autumn of 1918 at earliest and in the meantime the Allied problem of man-power was urgent.

3. On the sea the method of convoy by warships, recently adopted, had in great measure solved the problem of the submarine blockade of Britain. At the same time the British sea blockade of the Central Powers was fully effective, and included as "contraband of war" practically every article necessary to human existence.

4. The Allied search for a strategic plan had reached a deadlock. In Britain the military strategy of 1917 had led to an acute conflict between the political and military "High Commands," with the result that reinforcements were held back by the Government in the United Kingdom.

German Preparations for an Offensive.

From the moment when the Battles of Caporetto and Passchendaele and the Peace Treaty with Russia had made possible an offensive on the West, the German High Command had set itself to prepare, within the time-limit available, for a supreme thrust for victory on land. To implement the numerical superiority in fighting men, the General Staff had designed a tactical scheme the chief features of which were surprise, to be achieved by elimination of preliminary bombardments, by intelligent feints and "camouflaged" intentions, by the immediate exploitation of successful penetration, and by the more scientific employment of poison gas, in particular the utmost exploitation of "mustard"⁴



Allied Preparations for Defence. By the end of 1917 the French Army had recovered much of its resilience. General Pétain's slogan, "Wait for tanks and the Americans," was, however, accepted by the statesmen as the policy for the Western Front and this compelled both British and French High Commands to face up to the problem of defence. But beyond accepting the importance of co-operation in maintaining the continuity of the Allied front, strategic preparations for mutual support were chiefly concerned with the question of relative responsibility. In

⁴ During 1918 some 50 per cent of German shells contained poison gas.

January, 1918, the Fifth Army's front (which joined the French) was extended thirty miles to Barisis. Denied reinforcements by the Cabinet (to prevent his renewal in the spring of the Flanders offensive) Field-Marshal Haig found his front dangerously attenuated, in particular the sector held by Fifth Army, where early in March the British Intelligence Department confidently forecast a German thrust.

British Tactical Preparations. It was not till the middle of December that the British High Command turned from offence to defence, and not till the middle of January that this was seriously entered upon. Now, as throughout the war, whether for reasons of temperament, character, or training in the command of troops, the British military defence tended to rely to a less degree than the German on material protection, and therefore to a greater degree on the endurance of its troops.⁵ Against one weapon defence was entirely adequate. In the new British "Small Box Respirator," with "N.C." container and a filter for the "Blue cross" arsenical smokes, and the new French Tissot mask, the Allies had found an effective counter to the lung irritants. Protection however against the external wounds produced by "mustard" was very imperfect.⁶

The possibility of a devastating break-through does not appear to have been entertained by G.H.Q., which prepared for a considerable bending, but not a breaking, of the line; and this optimism is reflected in the general medical preparations of the B.E.F. At the instance of the Director-General (General Sloggett), at a conference held on March 2nd, some individual action was taken by the D's.M.S.; but it was not till March 6th that specific instructions were issued from G.H.Q. of which the following were the principles.⁷

(1) *Casualty Clearing Stations.* The king-pin in the British evacuation system being the C.C.S., the medical problems of retreat, as of advance, centred upon it. With only two 3-ton lorries of its own, each of these now vast tent and hatted hospitals depended for movement on lorries made available, on special requisition, by the Army "Director of

⁵ See p. 249. The military tactics of defence were of vital concern to the medical service since they determined the strategic and tactical principles for the conduct of evacuation and disposition of medical units and use of transport in a retreat. Since however the Australian force was not involved in the retirements, it is unnecessary to describe the British defence in detail. Briefly three spheres of resistance were defined (1) A line of outposts (2) A "battle zone" 2-3 miles behind this and 2,000-3,000 yards in depth. This consisted of bands of wire and mutually supporting strong posts or "keeps" permanently garrisoned, together with a partly occupied trench line (3) A "rear zone" of strong posts and wire 2-5 miles behind this again was projected, but in the Fifth Army's sector, where labour was most scarce, this line remained largely a mere paper scheme. By far the greater part of the work was carried out by infantry, who at the time were being reorganised in "9-battalion" divisions and were also training in the tactical principles and methods of defence.

⁶ See Vol. III.

⁷ This account is based on orders issued to the A.C.C.S.'s and on the *British Official Medical History*.

Supply and Transport"; and its movement was a formidable undertaking. This was recognised, and action taken on two lines. (a) The number of C.C.S.'s. within a "danger zone" specified was to be reduced. (b) A G.H.Q. order of September, 1916, providing for the formation of a special mobile section of each C.C.S.⁸ was brought again to the notice of Army Directors; and the D.M.S. "Fourth"⁹ Army was instructed to hold six of his units ready to move at a moment's notice "for reinforcing" those in other Armies. No attempt was made to reduce the scope of these units: this would indeed have involved a reconstruction of the evacuation system on the British front. Most directors made a plan for a succession of sites on which to retire. Of the Fifth Army Director, General Skinner, however, the *British Medical History* records that, reluctant to abandon his "forward" policy he "displayed a tendency to prepare as much for an advance as for a retreat"¹⁰ relying upon rapid removal of his units by train or road transport.

(2) *Motor Ambulance Convoys.* For the evacuation of casualties from the front attacked, armies "not actively engaged" were to be prepared to transfer one or more of these convoys to the areas of those that were attacked. The Director-General had at his own disposal special convoys for clearing by road to St. Omer, Amiens, Etaples, and Abbeville, in case of breakdown in the ambulance train service.

Field Units. The D's M.S. of Armies prepared schemes whereby field ambulance stations should fall back on new positions—generally the advanced dressing station retiring to the former site of the main station. *More suo*, General Skinner of Fifth Army arranged instead to clear his "advanced" stations direct to C.C.S.¹¹

Other matters mentioned in General Sloggett's order of March 6th concerned:—

"*Surgical teams*"—giving details of equipment for these, and appointing distributing centres; "*Special surgical sets*"—to augment C.C.S. equipment, "*Other personnel*"—renewing the obligation on field ambulances to augment the staff of C.C.S.; "*Stretchers*"—providing for reserve of 2,000 in each Corps and for replenishments; "*Blankets*"—reserves to be held with the stretchers, 2 blankets per stretcher; "*Primary suture of wounds*"—instructing all D's.M.S. to ensure that medical officers concerned "thoroughly understand what is required in this respect."

⁸ After noting that these units, "so far as the transport required to move them is concerned," had "become extremely unwieldy" this order continued, "You will please arrange, therefore, for each C.C.S. to have ready now a list of the articles which are necessary for carrying on emergent surgical work and providing nursing facilities at main dressing stations or other suitable places in advance of its present position, whenever the necessity of moving a . . . station forward arises. This equipment should represent minimum requirements and should be limited to 9 lorry loads, to enable a casualty clearing station to open for work immediately without waiting till the bulk of its material arrives."

⁹ Under Gen Plumer this army had been called the "Second" Gen. Plumer and his staff were still in Italy. On their return on March 17 it again became the Second Army.

¹⁰ See *General Vol III*, p. 212

¹¹ In Feb., in this Army at a meeting of Deputy-Directors it was decided that for surgical reasons every effort was necessary to speed up the transit of wounded to C.C.S.'s. In effect the advanced dressing stations would take the place of the main stations.

Ludendorff's Thrusts. The German offensive took the form of a series of independent thrusts on a vast scale at various strategic points of the British and French fronts in the northern half of the Allied line over a period from March 21st till July 15th. Working on the apprehensions of each of the Allied Commanders the German General Staff was able to mislead both. Save in the last two strokes, it thus achieved surprise, and within a few hours overran the main defensive zone. To this fact was due much of its tactical success—and much tribulation to the Allied Medical Services.

The several thrusts were made as follows:—

"Michael" The most extensive and important was that begun on March 21st against the British Third and Fifth Armies. The tactical objective was the railway junction at Amiens, and the original purpose, to separate the British and French Armies and crush the British, against which the whole strength was thrown. After penetrating to a depth of 35 miles, this attack broke in an ineffective assault against the Bastion of the Vimy Ridge and was held up 11 miles from Amiens. Some details are given later.

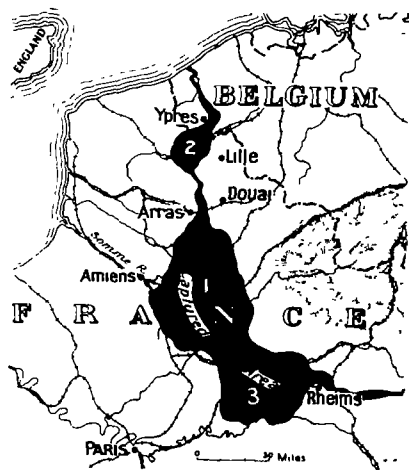
"George" (*"I"* and *"II"*). On April 9th a thrust was made on the depleted British front in Flanders, the brunt falling on the Portuguese in front of the Lys. The tactical objective was Hazebrouck railway junction, whose capture would have involved the main supply service of the British northern armies. The strategic purpose was penetration to the Channel Ports. The initial attack overran the defensive zone but failed against the Bastion of Givenchy Ridge. The advance was eventually held up before Hazebrouck. Renewed attacks to the north scored rapid tactical successes at Mont Kemmel, but the strategic gains were quite incommensurate.

In each of these operations decisive success appeared within grasp, but in each it was withheld with the British force fighting—as Haig said in the "order for the day" of April 11th—"with its back to the wall." In each of these operations also, partly by force of circumstances, but partly, too, through that fitness for the task which is the master of circumstance, the Australian Imperial Force played a rôle so spectacular as to give rise to legends that have obscured in some measure its real importance.

Three other thrusts were made, first on May 27th against the French front line between Soissons and Rheims. In three days this whirlwind advance swept nearly 25 miles, to the Marne, where its impetus died

away.¹² Second, on June 9th Ludendorff thrust at the French salient in front of Compiègne but failed to "pinch it out." Third, on July 15th a double offensive was launched, east and west of Rheims, but was foiled by an elastic defence. On July 18th using some 400 light tanks and French and American Divisions Foch counter-attacked on a large scale against the German flank and, by an impressive victory, set the German commanders finally on the defensive.

At its close the German offensive had cost the British Army alone over 300,000 casualties and immense material losses, and the margin between success and failure had been a narrow one. But already on July 4th a blow had been struck at Hamel on the Australian front which, if minor in extent, proved a very effective rehearsal for the first thrust in the Allied offensive that ended the war. The events of these battles belong to the next and succeeding chapters; the present is concerned with the Australian part in "Michael" and "George."



Areas captured by Germans, 1918. 1, 2, and 3 mark the areas of "Michael," "George," and offensive against French respectively

The Movement in "Michael" March 21st-26th. At the beginning of March, 1918, the British Army held a line from Houthulst Forest 125 miles south to the Oise where it joined the French.¹³ The take-off

¹² The automatic slowing down of an advance through over-running communication and supplies was one of the most important strategic principles impressed in the Great War on the medical service which is peculiarly susceptible to its influence (See, for example, *Chapters vi and ix.*)

¹³ On March 21 from N to S the British "Armies" were commanded—the Second by General Sir Herbert Plumer, now back from Italy (D.M.S. Major-General M. O'Keeffe), First by General Sir Henry Horne (D.M.S. Major-General H. N. Thompson), Third by General Sir Julian Byng (D.M.S. Major-General Sir J. M. Irwin); Fifth by General Sir Hubert Gough (D.M.S. Major-General G. B. M. Skinner). The headquarters of the Fourth Army, Sir Henry Rawlinson, was now in reserve. The Third Army comprised the IV, V, and VI Corps, the Fifth Army the III, VII, XVIII and XIX Corps. The 1st, 2nd and 3rd Cavalry Divisions were in this Army.

for "Michael" was from the strongest sector of the Hindenburg Line, which had remained much as after the British offensive in 1917. The advance hinged on the British position on the Vimy Ridge, in front of Arras where a natural stronghold had been converted into a fortress. On the 44 miles front from Arras to the Oise 57 German Divisions were thrown against 20 British: the guns numbered 1 to every 11 yards. Infiltrating tactics were helped by a fog whereby the British posts and units were isolated and *liaison* impeded.

In spite of Cambrai the General Staffs of G.H.Q. and the Armies concerned were wholly unprepared for the rapidity of the advance. By the end of the first day the three lines of defence had been overrun. The Flesquières Salient, sole gain to British arms from Cambrai, was "pinched out"; and thereafter the way was clear, across the open grasslands traversed in "Alberich," to the line of the Somme, which was quickly forced, and thence to the waste of the old Somme battlefield of 1916. On March 23rd, however, dissatisfied with the outlook for rolling up the British, which had been planned for that stage, Ludendorff decided to continue with his left the effort to separate the British and French. Nevertheless on the Third Army's front as well as on that of the Fifth the immense pressure produced crises, and on March 26th, when the 3rd and 4th Australian Divisions reached the battle zone, the Allied strategy was in the melting pot.

March 26th: A Turning Point of the War. The events of so vast a battle cannot be summarised in a few sentences; nor is it easy to crystallise movement so rapid and diverse in a series of lucid intervals for description. Fortunately from the point of view of historical narrative it is possible to select a moment when events in three major spheres of interest, germane to this history, move to a focal point, thence to diverge and create a wholly novel field of outlook and action.

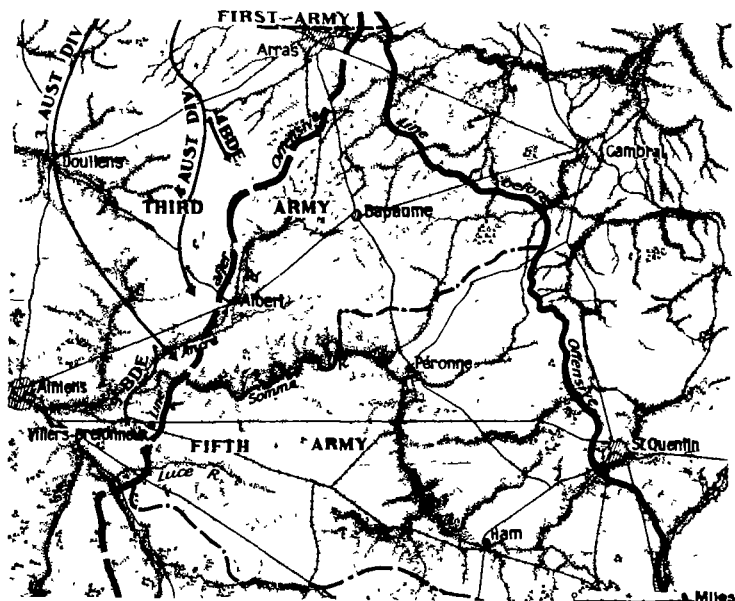
(1) On March 24th Ludendorff changed the direction of his thrust—towards the left flank of the French. General Pétain, the French Commander-in-Chief, who mistakenly feared an attack elsewhere, decided that he could no longer (as for 24 hours he had done) support the right of the British Fifth Army, but must uncover Amiens in order to protect Paris. This led Haig, who was vehemently opposed to such a policy, to issue on March 25th a provisional order for a corresponding movement of his own troops. Either movement, if carried out, would sever the two forces.

(2) On March 23rd Haig decided to use the Australian Corps as the main part of G.H.Q. reserve, and on the 26th the 3rd and 4th Divisions were being moved to the danger points in the Third Army's line.

(3) On the same date, at the famous conference held in Doullens, the decision was reached—with Haig's support and even at his suggestion—to appoint General Foch Generalissimo of the Allied Forces in France.

The position of the British front on this date is shown

in the sketch map. From this point the history of the British part in the offensive becomes intimately bound up with that of the Australian Divisions; and the account of the medical events of the Fifth Army's retreat is most conveniently picked up in this history when the medical units of the Australian divisions are caught into the stream.



Winter of 1917-18. After the fighting of October, 1917, the five infantry divisions of the A.I.F. had taken over from the VIII Corps a front east of the Messines Ridge and in the valley of the Lys. During the winter, each unit in turn went for a fortnight's rest to village billets not far from Boulogne.

At the front, beside the routine of trench-warfare and raidings reminiscent of the spring of 1916, the formations were kept busy with constructive work and training, and the A.I.F. staff in completing the reconstruction of the newly-formed "Australian" Corps. Though the work was heavy

**The
Australian
Corps medical
units**

and the front low-lying and wet, and a suitable target for mustard gas, the conditions were infinitely more favourable than those of the previous winter. By the end of March the troops of all arms and services had fully recovered their resilience. Units and formations were at strength: all arms and every service had reached a standard that made the Australian force in France a weapon of tremendous striking power. *Esprit de corps* had been immensely augmented by the integration of the five Australian divisions and their ancillary services into the "Australian Corps"—the last stage of which was interrupted by the events reviewed in this chapter. On the physical side, the policy of the D.M.S., A.I.F., pursued with inflexible determination, and with a vision that had made him the trusted adviser of General Birdwood and his Chief of Staff,¹⁴ had achieved striking results. Major-General Howse's contribution to the efficiency of the A.I.F. in the most critical moment of its service was this: that each quota in the diminishing tale of recruits from Australia as it arrived was inexorably cleared of all defectives; that the reserve of recovered men was sifted not less exactly; and that in the Command Depots a medical organisation had been built up that could transform a casualty into an effective with maximum efficiency in a minimum of time.

The health of the troops was incomparably better than in the previous winter. For the system of Divisional and "Corps Rest Stations" of the "Somme Winter" was substituted one of allocating a casualty clearing station to Corps for this purpose—for the Australian Corps No. 1 A.C.C.S. was chosen. Freed from this drudgery the medical service of the Divisions was able to concentrate on training. In January an admirable "Australian Corps Medical School" was formed in which a considerable proportion of the medical officers and N.C.O.'s of the Corps were given up-to-date training.¹⁵ For all arms

¹⁴ Major-Gen C. B. B. White

¹⁵ The "Commandant" was Lieut.-Col. Clive Thompson. The course covered a week, and the syllabus included an introductory lecture by the C.O. followed by lectures on Military Law, Duties of a Medical Officer, Water, Map Reading, Hygiene of Troops, Care of Horses, Baths and Laundries, The Thomas Splint, P.U.O., Mechanical Transport, System of Supply in the Field, Army Books and Returns, Military Operations, General Sanitation, and Wound Shock. Demonstrations were given of "Defensive" and "Offensive" gas, of C.C.S. work, and of aerial photography. At the close of the course an examination was held. The lecturers included, besides senior officers of the A.A.M.C., transport and legal officers of the Corps and Consulting Physicians of Second Army.

Schools of Instruction in cooking and in the best use of rations were held, a feature of which was the endeavour to eliminate, so far as possible, the depressing monotony of "stew."

Sanitation By this time, with its baths and laundries, "sanitation" was *de facto*, as already it was *de jure*, a part of Army life. In this respect indeed, save when in the line, the troops tended to lose the art of self-help in field methods.

During the winter the actual fighting on Second Army front was confined to bombardments, raids, and patrols. At the

**Rumours
of war**

end of the winter, the approaching hour of "Michael" was heralded by a harassing bombardment, of which a medical officer (Captain R. L. Forsyth) then with the 13th Field Ambulance at Bailleul has left a record:—

"*March 4th.* I spent the next 10 days as orderly officer and played Badminton. Tilling was in the billet with me and the old lady was fat, red-faced and a brick. I got coffee in the morning and a comfortable bed. About March 14th the war started. I was in my digs writing when something went swish and the backyard tumbled down and the back wall went up in chunks. I cleaned the plaster out of my collar and went down-stairs. The old lady couldn't turn pale but talked harder than usual and waved her hands. I went into Bailleul square and patched up the remnants of 4 or 5 men. A lot more shells landed and bits of iron became common. I felt pleased when ordered off to the 4th Pioneer Battalion. Arrived there at 10.30 p.m. and found Whiting playing bridge. He gave me his blessing and his dugout and told me that everything was all right and nothing doing. I slept. Evidently the Kaiser's spies had been informed of my move as next morning, while the rest were telling me how quiet things were, a shell lobbed in front of the Mess, another splattered the R.A.P. The war was still on. Shells started to arrive with monotonous regularity—for 5 or 6 days 'woolly bears,' shrapnel, and 5.9's rained on the district. About March 21st we began to hear rumours, and an English artillery major told me that his boy was in Fifth Army and that they were hoping for an attack as they were ready to give the Hun hell. March 22nd was exceptionally warm and bright, I sat in the sun and read. That evening orders came through to embuss at Loivre at 5 next morning."

On the following day the unit moved with the rest of the 4th Division south to the Somme.

Medical Units in Move to South. On March 21st the 1st, 2nd and 5th Divisions were in line at Messines, the 3rd and 4th in support and reserve. On March 24th, moving by brigades, the 4th Division embussed for village billets around Basseux (behind Arras) and on the 25th the 3rd entrained for Doullens, both being held in reserve behind the Third Army. With each brigade went the personnel of its corresponding

field ambulance, horse and motor transport went by road.¹⁶ From Basseux the 4th Brigade (4th Division), without its field ambulance,¹⁷ was on March 26th detached and, with the New Zealand Division, was rushed into a gap in the IV Corps front near Hébuterne. On the night of the 26th-27th the 12th and 13th Brigades, with the 4th, 12th, and 13th Field Ambulances, route-marched immediately behind the barely established front down to Senlis near Albert, and in the afternoon of the 27th moved up by familiar roads past Vadencourt, Warloy, and Hénencourt to fill a breach which, through a misunderstanding of Haig's order of March 25th, was developing on the VII Corps front on the Ancre south of Albert. Hither also was hurried the 3rd Division. Each brigade as it moved up encountered the flotsam and jetsam, soldiers and civilians, fore-flung from the advancing wave of the German Army, and entered upon scenes and events admirably calculated to rouse in high-spirited and self-reliant men a strong determination and sense of responsibility—and in the staff officers exasperation at the inevitably conflicting and countermanding orders and instructions issued by every headquarters, a sentiment that is luridly reflected in the diaries of the A.D's M S

The Allied Front, March 26th-27th. Looking—as now we can—behind the scene of these events, the cause of all this administrative confusion becomes clear. Next to the crisis on the Marne in 1914, the moment when the 3rd and 4th Australian Divisions reached the Somme was perhaps the most critical in the whole war. The effect of the orders of Pétain and Haig, tending to separate the British and French Armies, had to be repaired. The first action of General Foch was a peremptory order to both British and French leaders that there must be “NO withdrawal” of the general line, and it was in pursuance of this policy that on the night of March 26th the 12th and 13th Brigades of the 4th Division were sent to relieve the 9th Division which, in consequence of the misunderstanding above referred to, had retired across the Ancre; and the 3rd Division to form a front on the plateau between the Ancre and the Somme.¹⁸

¹⁶ The ambulance horse transport that marched with the transport of the 4th Brigade took some 34 days, as follows: *March 24*—Ravelsberg to Vieux Berquin, 20 kilometres, 8 hours; *25th*—to Hermaville, 80 km., 18 hours, *26th*—to La Cauchie, 15 km., 6 hours. Here it picked up the unit and marched with it to Baizieux, 45 km., in 12 hours, arriving at Baizieux at 2.30 p.m. on the 27th. On the 28th it went with the unit to Toutencourt. “After a day's rest the horses were none the worse” (4th Fld. Amb. *War Diary*)

¹⁷ The absence of the field ambulance was due to an order of the Brigade or the Divisional Commander

¹⁸ On March 23 Gen Pétain took command of the British Fifth Army and the front as far as the Somme. On the 24th Gen Rawlinson superseded Gen Gough, and a few days later “Fifth” Army became “Fourth.” The D M S, Major-Gen Skinner, continued to function till relieved on April 9 by Major-Gen. M. W. O’Keeffe. At the beginning of April Fourth Army came again under Haig’s command

Indeed, in Haig's acceptance of Foch; in Foch's "NO withdrawal" order; and in Haig's own orders which at this stage threw the Australian and New Zealand formations into the Third and Fifth Army fronts, we may perhaps see (as in the old nursery rhyme) that great moment when "the cat begins to kill the rat, the rat begins to gnaw the rope, the rope begins to hang the butcher . . ." leading, through the ups and downs of the failing German offensive and the Allied advance, to an auspicious *dénouement* on November 11th.

Local Situation on March 27th. The German advance on Third Army front on March 26th took it some 6 to 9 miles beyond that "Old front line of the English" from which on 1st July, 1916, the New Armies had kicked off for the Battle of the Somme: from the high land overlooking Albert the 4th Division saw the enemy issuing from that town. In the afternoon of March 27th the 12th Brigade with the 13th in support (and, a few days later, on its flank) took up a line along the railway touching Dernancourt, its rear resting on the bare hillside reaching up to the Albert-Amiens road in front of Laviéville. On that exposed slope lay the abandoned casualty clearing stations at "Edge-hill." Crossing the Ancre at Heilly the 10th and 11th Brigades of 3rd Division straddled the peninsula from Méricourt l'Abbé to Sailly-le-Sec. Both found tired but far from defeated troops facing the enemy. Within 24 hours both formations had sustained heavy casualties which had been cleverly cleared by their medical units

The Australians had been promised by one of their leaders "the fight of their lives"; the two divisional A.D's.M.S., in darkness and confusion, and faced (as they believed) with the problem of clearing a flood of wounded from their two divisions, sought to ascertain the identity and location of the C.C.S's and M.A.C.'s on which to base their own schemes of clearance. To appreciate their task it is necessary first to outline briefly the course of the very instructive events in the Medical Services of Third and Fifth Armies during the German advance.

*The Medical Service in the Retreat.*¹⁰ The effect of the 10 days, March 21st-30th, on the huge system of treatment-centres and transport units built up during three years of "attrition" was staggering. Caught in a rough-house, the units

¹⁰ The happenings of the first five days are gathered from the *British Official Medical History*, supplemented by some Army and Corps orders, the *War Diary* of the D.M.S., Fifth Army, and some personal narratives.

of Third and Fifth Armies emerged denuded of much of their trappings, and much chastened of their "forward" spirit. But at the same time it is recorded that none of the wounded who reached a main dressing station or C.C.S. and who were fit to move, were abandoned; and none of the personnel of these units were captured.²⁰ This much, at least, was effected by motor transport in contrast to the limitations of horsed transport in the retreat from Mons.²¹

There were three phases in these medical events—

(1) *March 21-22* The defensive line is "infiltrated" and many aid-posts and forward ambulance posts are cut off, and wounded lost through capture

(2) *March 23-25.* The enemy drives the British Divisions across the open country, slowing down somewhat on the 24th-25th. In this stage the zone of the casualty clearing stations, and the first and even the second echelon of their new sites, are overrun.

(3) *March 26-May 4.* This phase, in the Somme area, includes the check on the line of the Ancre and south of the Somme to Hangard Wood, near the Luce; the renewed attempts to break through (March 26-April 9); and the subsequent desultory fighting to secure tactical advantage (April 10-May 4)

During the period March 21-April 30 the British losses totalled 302,869 of whom 28,128 were "killed," 181,338 "wounded" (1 killed to 6.4 wounded), and 93,403 are recorded as "missing and prisoners of war."²²

Regimental Medical Establishments Heavy casualties were incurred among R.M.O.'s and Regimental bearers. It is officially recorded that a serious cause of failure to clear wounded was—the old business—defective *liaison* between brigades and field ambulances.

Field Ambulances. The *British Official Medical History* records that in both Armies after the first day the medical services of Division and Corps worked methodically throughout the retreat, "falling back from post to post without confusion and according to plan." It is clear however that the term "methodical" connotes methods of a novel kind, in

²⁰ A number of Australian nurses were serving in the C.C.S.'s of Fifth Army and had highly "exciting" experiences—including withdrawal under field-gun fire—and did admirable service. Some of the details will be found in the chapter in *Vol. III* dealing with the Nursing Service

²¹ See in this connection p. 288

²² The figures are from *Statistics of the Military Effort of the British Empire*, p. 362 (War Office, March, 1922). It has unfortunately not been found possible to resolve this last group; and, failing this, no attempt can be made to assess, from the proportion of killed to wounded and died of wounds, either the vigour of the British resistance, or the success of the arrangements and endeavours for rescue and clearance to the Base. For 1918 as a whole the British battle-casualties were (*Brit Off Med. History—Statistics*, p. 168) Killed 9.18 per cent, Died of wounds 5.26 per cent, Missing 7.26 per cent, Prisoners of war 12.28 per cent, Wounded less Died of wounds 66.01 per cent. The proportion of killed in action, died of wounds, missing, and prisoners of war to the total wounded (less died of wounds) was 1 to 1.9.

particular in the matter of transportation.²³ The vital duty seems to have lain in clearing stretcher cases from the motor loading posts to the ambulance treatment centre (whether "A.D.S." or "M.D.S.") and thence to the C.C.S.²⁴ After the war the opinion was authoritatively expressed²⁵ that "the uncertain link in the chain of evacuation was always bound to lie in the sector between the Regimental Aid-Post and the A.D.S.," and that "the common experience had been that the transport of the wounded man in this area was always greatly facilitated when motor ambulances could be pushed close up to the firing line."

The Motor Ambulance Convoys (for Stretcher Cases). Difficulty was experienced in keeping these very volatile units together, and in working them as units. In certain Corps the M.A.C. was split up and a section attached to Headquarters. In some Corps a "lorry convoy" was attached to the M.A.C. In both Armies whenever the C.C.S.'s were on the move and out of action, the M.A.C.'s chasing them with the stretcher cases were unable to cope with their task, and in consequence field ambulance transport had sometimes to clear to or even beyond the C.C.S. The *walking wounded* were cleared by buses and returning lorries.

The Casualty Clearing Stations. Only the barest outline is possible of the very instructive experiences of these units.²⁶

In the Third Army the first echelon of moves was made on March 22nd-23rd from the forward zone comprising Ytres, Gréville, Achiet-le-Grand, Boisieux-au-Mont, Agnez-lez-Duisans, about 7-8 miles from the front, to just beyond the old Somme Battlefield—Edgehill, Aveluy, le Bac du Sud. Later a second series of moves took them to a third echelon of positions—Corbie, Warloy, Puchevillers, Orville. On March 26th, when the Australian Divisions were arriving, these positions were

²³ An Australian surgeon serving with the R.A.M.C.—Major H. Boyd Graham, R.A.M.C.T., *see Vol. I, pp. 89, 518*, found that the bearer divisions became, in effect, independent units, moving back in echelon on the A.D.S. as a separate link in the "chain" of evacuation. This officer records that in the 21st Division (VII Corps) a scheme was improvised whereby 3 bearer sub-divisions, together with 3 officers and 100 other ranks from Pioneer Battalions, formed a Divisional reserve of bearers. A bearer sub-division (1 officer and about 40 other ranks) formed a "Brigade bearer party" which was attached to Brigade Headquarters. It received operation orders from Division and submitted location reports to the officer-in-charge of the "Divisional" bearers. "By this means the close *liaison* so desirable between R.M.O.'s and Field Ambulances was comparatively easily maintained."

²⁴ A memorandum was issued on April 2 by the D.G.M.S. B.E.F. on "the experience of the last ten days of March." The most important lesson from the experience was stated as follows:

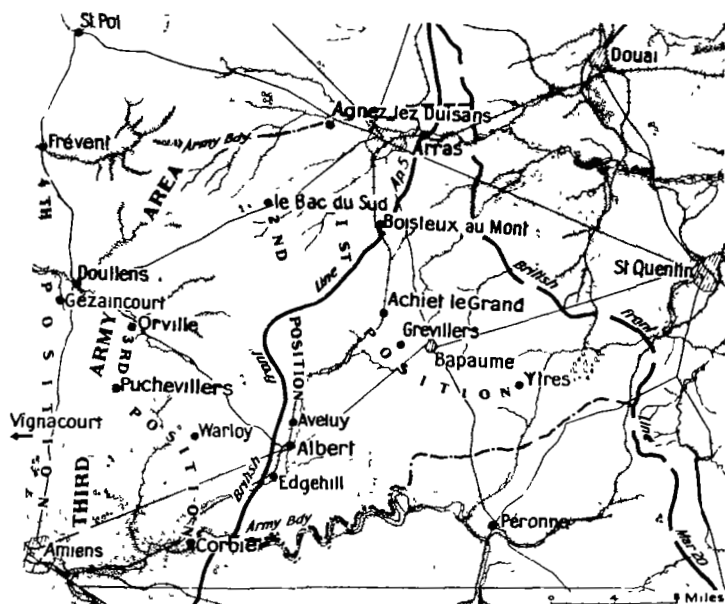
"Should our front line in the course of pressure by the enemy be forced back, the withdrawal of the main dressing stations will necessarily be in accordance with the general situation, but they should be established at suitable points in echelon during the withdrawal, so that there should always be a point to which the motor ambulance transport of the field ambulances can bring their wounded without having to go further back, and to which the M.A.C. can work without having to go further forward."

²⁵ In a discussion on transport of wounded in "open" warfare in the "War Section" of the Royal Society of Medicine presided over by the D.G.M.S., A.M.S., Sir John Goodwin (*Proceedings March 1922, p. 13*).

²⁶ *The British Official Medical History* gives a full and exactly charted account of these. Details of the moves of the three Australian casualty clearing stations in Second Army are given later in this chapter.

being abandoned in favour of a fourth echelon—Amiens, Vignacourt, Gézaincourt, Doullens, Frévent—20 to 30 miles or more by road behind the new front.

Here, for the most part, they remained till the advance to victory permitted a cautious move forward. In some instances the retreat was continued even as far back as St. Riquier and Pont Remy, near Abbeville.



Movement of C.C.S.'s in Third Army during the German Offensive.

The retreat of the Fifth Army being much more rapid and more extensive than that of the Third, the medical difficulties were correspondingly greater. The clearing stations were no further forward than those of other armies and on March 21st occupied a zone Tincourt, Ham, Cugny, and Noyon—names that will be met again in the advance to victory—7 to 10 miles behind the front. A rear echelon was behind the Somme line at Marchepot. The first withdrawal on 22nd-23rd took the first echelon back beyond the Somme line to Rozières, Roye, and Maricourt. On March 23rd the enemy rushed parts of the Somme line and the moves of the C.C.S.'s on March 24th-26th to Hargicourt, Villers-Bretonneux, Gailly, Corbie and Vecquemont were precipitate. Thereafter, in consequence of the military and administrative vicissitudes of this Army, of the French swerve to the south, and of the retreat of Third Army to the left, and the dreaded danger of a wide break between the British and French forces, these units were scattered. Some moved

north-westwards through Corbie to Third Army; some were pushed back through Amiens down the Somme, others south to Namps where a large entraining and treatment centre was formed from the remnants of seven units.²⁷

Eddies from the Retreat. Casualties and Clearing Stations

The momentum from the impetus that carried both the casualties and the clearing stations through their concurrent echelons of moves, swept both far beyond the fighting zone. The danger of a gap opening in consequence of Pétain's order of March 24th and Haig's of March 25th had strong repercussions as far back as No. 3 A.G.H. at Abbeville, and the experience of that unit warrants a special note.

On March 27th the A.D.M.S. Abbeville area informed the Commanding Officer²⁸ that it was to "carry on as a C.C.S."

The officer-in-charge of the Surgical Division (Lieut.-Colonel H. C. Taylor-Young) stated in his report for March:—

"The number of cases admitted and the amount of work done have been greater than during any similar period since the arrival of the Hospital in France. The character of the cases has been more severe, and their condition more desperate, many arriving with only the field dressing applied. The majority were transported entirely by road, and in several cases the convoy was 36 hours and longer on the journey. During the earlier days of the rush the work was conducted on the lines of a Base Hospital, but owing to an order received (on March 27th) complete arrangements . . . were made to conduct the place as a C.C.S."

During March 2,467 casualties were treated in this unit, of whom 536 were operated upon. Deaths numbered 21, and 2,381 cases were discharged or transferred. The report continues:—

"abdominal cases account for a large proportion of the deaths. They had all been transported by road, and had a long and very rough journey. All except one should have been hopeful cases for operation

²⁷ Four "units"—i.e. their staffs—were later sent to the Base to reorganise and re-equip. The D.M.S. of this Army, Major-Gen Skinner, has been severely criticised for his methods, and it is true that the material losses were far greater than in Third Army and this under circumstances that made it a serious matter. Much however may be found to extenuate and explain this. The D.M.S. was involved in the strategic and tactical failures of Fifth Army. He himself attributed the loss of equipment—the value of which he placed at £200,000—to failure of the Transport Department to support him. (The war was costing some ten million pounds a day.) He suggested that in such a crisis the two 3-ton lorries of the C.C.S.'s be combined to form a column under the D.M.S. It may be added that as far back as 1916 officers of the Australian Medical Service, when they arrived on the Somme, had been unfavourably impressed by the attitude in this Army toward its Medical Department.

²⁸ This statement is from the hospital's war diary. Abbeville was the Headquarters of the I.G.C. and of the D.M.S., L. of C.

had they been tackled within a reasonable time. In almost every case instead of having merely dirty wounds to treat, they were very septic before reaching this Hospital."

The matron of the same hospital (Miss Miles-Walker) reported:—

"The routine of the Nursing Staff was as usual until the end of the month, when the influx of patients necessitated the extension of the Hospital to 2,000 beds." [Even the Y.M.C.A. Hut was filled with beds] . . . "11 English reserve Sisters were sent by the Matron-in-Chief, B.E.F., for four days' temporary duty during the heavy rush of work, which lasted for one week. . . . A great feature of this very strenuous week was the constant coming and going of refugee sisters, English as well as Australian, arriving without baggage from different C.C.S.'s to be accommodated."

On March 31st, under instructions from Headquarters L of C., a board was appointed to report on the time required to move the hospital at (1) 48 hours', or (2) 7 days' notice. Lieut.-Colonel Taylor-Young's report for April says:—

"When my previous monthly report was submitted, no cases were coming to this area. The 65 remaining in Hospital were cases not fit to be evacuated; all others, many of them dangerously ill, having been, under urgent orders, evacuated. All Departments were prepared and ready for movement if so instructed. . . . On the 4th of the month, however, at 2.0 p.m. convoys began arriving and kept coming rapidly.²⁹ The following days were the most strenuous experienced by this Unit since coming to France

"Four teams were available and started work at once continuing until midnight, after which hour, Major Matthews and I carried on throughout the night operating on urgent cases. Work continued at this very high pressure until the forenoon of the 8th, by which time, owing to representations made, the convoys were switched off to other Hospitals. . . . The number of anaesthetics administered [during the month] was 447 . . .

"The cases as a whole were severe and arrived in a bad condition, travelling by road. The great majority arrived untouched owing to 'forced evacuation' from the C.C.S.'s, and it was a marvel that some of them reached here alive. Considering these facts it is most gratifying that there were only 34 deaths. "30

The Ambulance Train. In the Great War (as we have seen) the whole "Army" scheme of evacuation hinged on railhead. In an advance the possible progress of railhead determined

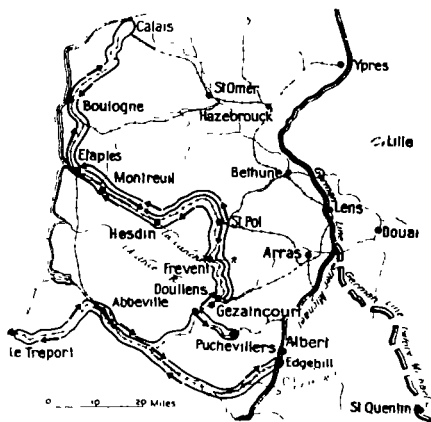
²⁹ This was the day of the Second German Army's attack on the Fourth British Army, known in the A.I.F. as "First Villers-Bretonneux." The effort continued next day at Dernancourt—the last flicker of the "Michael" offensive

³⁰ The report states: "A new class of case appears this month—delayed primary suture cases (D.P.S.), 18 of these came forward during the month and in every case the result was primary union"

the rate of movement of the Army; in a retreat, *vice versa*.³¹ The movements of "No. 23" (Ambulance Train) during the week March 23rd-30th as told by the A.A.M.C. officer-in-charge³² completes the picture of the movement of casualties to the base during the period of the retreat.

"No. 23 Ambulance Train left Abbeville at 2.45 p.m. on *Saturday, March 23rd*. At 8 a.m. *24th* it reached Edgehill (Dernancourt) where a T.A.T.³³ and another A.T. were loading. We started loading No. 23 at midday and at 2.30 left with a full load of 340 lying and 180 sitting cases, leaving No. 48 C.C.S. free to move back. No. 48 C.C.S. had the day before sent their nursing sisters back, and this unit had only arrived at Edgehill (from Ytres) 2 days before . . . Many cases arrived in the trains that would under normal conditions remain at a C.C.S. for treatment. Six died, 2 head cases, 2 chest wounds, 1 abdominal and 1 thigh amputation. We took 25 hours to get to Amiens (*March 25th*), a distance of 15 miles, owing to a block in the traffic . . . arriving at Le Tréport at 4 a.m. on *Tuesday, 26th March*. We thus took 38 hours to do about 60 miles. Many redressings and re-splintings were done and haemorrhages controlled by plugging, etc.

"In a few hours after unloading we left and arrived Abbeville again at 10 a.m. leaving at 2.45 p.m. for Puchevillers, where, on arrival at 7 p.m. within 2 hours we loaded (240 lying and 17 sitting) and off again to arrive at Doullens at 2.15 a.m. (*27th*), where we picked up 170 walking cases. Here we put off 6 cases for urgent treatment—serious haemorrhage and chest that were doing badly on our tedious journey. We were kept here for five hours from traffic troubles, leaving at 7.30 a.m. and passing Montreuil before midday. Arriving at Etaples at 12.15 p.m. we unloaded in an hour and reloaded with 400 hospital cases by 3 p.m. when we left for Calais. The women motor drivers worked splendidly in connection with the transport of wounded. Arrived at



Journey of Hospital Train, March 1918

³¹ The *British Official (Military) History* is emphatic in attributing the slowing down of the German advance largely to the problem of communications, in particular across the "devastated" area.

³² Major W. W. W. Chaplin, A.A.M.C. This officer was detailed for the special duty from No. 3 A.G.H. The report is from the war diary, for March, of No. 3 A.G.H.

³³ Temporary Ambulance Train.

Calais 8 a.m. on 28th, unloaded and left at 9 p.m. for Gézaincourt, arriving 29th at 8 p.m. 6.30 a.m. (30th) we left with half a load 200 cases nearly all light. Arrived at Etaples at 11 a.m. and unloaded . . . The Head Sister, 2 staff nurses, and 38 other ranks (R.A.M.C.) worked splendidly through our busy week."

Lessons as to Evacuation in a Retreat. From the welter of experiences of both armies there seems to emerge this fact, that in a rapid retreat the speed of the twofold movement—(1) that of the *casualty* along the chain of loading posts, treatment stations and transport circuits of the route of "evacuation"; and, concurrently, (2) that of the *whole evacuation system* itself, including *R.A.P.* and *C.C.S.*—depends on the rapidity with which the casualty clearing station (if this be retained as the keystone of treatment) can make the sequence—break camp and move: pitch camp and clear stretcher cases by motor ambulance convoy. And the crux of the matter lies in the fact that success does not, as with the field ambulance, hang on the internal efficiency of the unit alone, but on this *plus* various extrinsic factors: in particular the relations between the D.M.S. and the Department of Supply and Transport, and Railway Operating Division³⁴

Medical arrangements on the Ancre 4th Division. Motoring on the night of March 26th-27th from Basseux to Baizieux the A.D.M.S., 4th Division, Colonel Barber, reported *en route* to the headquarters of the D.M.S. Third Army and subsequently to VII Corps headquarters at Montigny. He found the utmost difficulty in ascertaining the situation

³⁴ The A.D.M.S., 4th Division (Colonel G. W. Barber) wrote in his war diary at the time

"26th March I have often urged the need for mobile C.C.S.s—*vide War Establishments, Part VII*—and the necessity of the same under these conditions is becoming very apparent. The present fixed C.C.S.s should in my opinion have been regarded as expanded stationary hospitals and mobile C.C.S.s held in reserve. If this had been done it would be strictly in accordance with F.S. Regs.—Medical Services. . . All the trouble I have seen arise in the past has been due to non-compliance with these excellent regulations."

The British Official Historian states that in the experience of Third Army "severely wounded collected in advanced dressing stations could not be got away before the enemy captured the position, but all wounded admitted to a main dressing station were saved from capture. A.D.M.S. of divisions and O.C. of field ambulances strongly emphasize the importance of . . . field ambulances retaining their own ambulance transport solely for bringing wounded back from the front area and advanced dressing stations to . . . main dressing stations and no further." (*Brit. Off. Med. History, General, Vol. III, p. 246*)

Comments made by Australian units agree that in evacuation in a retreat it is vital that the proper transport circuits should be strictly adhered to.

"Medical arrangements in Third Army," he said in his *War Diary*, "seem to be totally disorganised—C.C.S.'s have been closed down, some apparently without justification, such as Puchevillers and Amiens, and in consequence all cases have to be evacuated a very long distance to Doullens and its vicinity. M.A.C. evacuations also unsatisfactory—16th M.A.C. appears to be working under orders of Army, 3rd M.A.C. under orders of Corps. There is no co-ordination of their work and consequently over-lapping occurs. . . . I am informed that there is a shortage of stretchers and dressings and no one seems to require any returns."

Though not unnatural in the circumstances, this ebullition, when read in the light of preceding pages, can be given its proper moral discount. It is clear that the confusion at the moment was largely due to the Corps Commander's misinterpretation of Haig's order of March 25th. But the picture of the confusion that reigned at this time behind the field ambulances is accurate enough.

The Field Ambulances (March 27th). The 12th and 13th Field Ambulances marched, and made their approach to the line, with their respective brigades. Moving up through Vaden-court and Warloy to Hénencourt, they found behind the British 35th and 17th Divisions a well organised scheme of Divisional clearance, and "heavy evacuation, going on satisfactorily."³⁵ After negotiations with the British units they took over the cellars of the great *Château*, and pitched tents in its grounds for an A.D.S. By mutual arrangement (pending instructions from the A.D.M.S.) the two Ambulance Commanders (Major F. N. Le Messurier³⁶ and Lieut.-Colonel H. K. Fry) worked out a scheme of clearance—the 13th to act as a "main" dressing station.

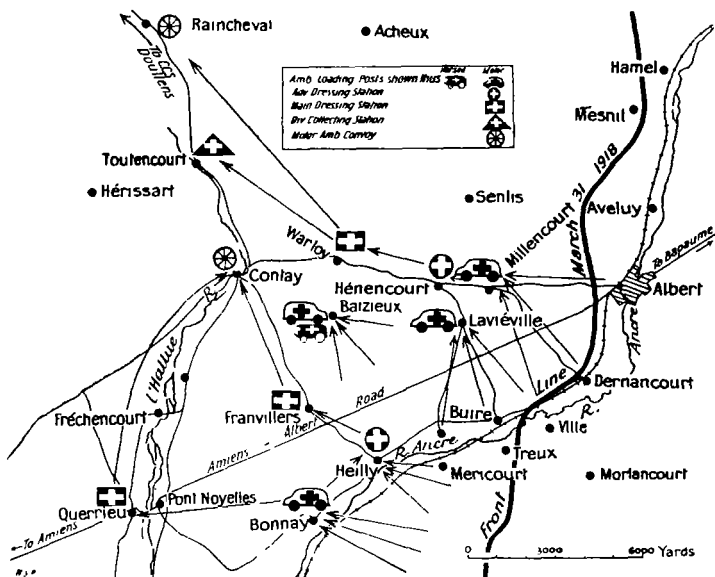
Bearer Captains moved off at 2 p.m. to Millencourt to get in touch with the R.M.O's. A motor loading post was formed at Millencourt at 5 p.m., and was clearing the R.A.P's by 7. A second loading post was taken over at Laviéville from the R.A.M.C., with stretchers and blankets salvaged previously from the C.C.S's at Dernancourt—now, by day, under rifle fire.

By March 28th a Divisional scheme was in full swing, with A.D.S. at Hénencourt (12th Field Ambulance) clearing the two brigade fronts to M.D.S. (13th Field Ambulance) at

³⁵ The quotations are from field ambulance war diaries.

³⁶ The O.C. 12th Fld. Amb. (Lieut.-Col. A. H. Gibson) was on leave, he returned on the following day and resumed command.

Warloy, which cleared to C.C.S. at Doullens. In the absence of a motor ambulance convoy the 4th Field Ambulance was used to form a "motor relay post" at Toutencourt at which casualties were transferred both to motor ambulances and to lorries.

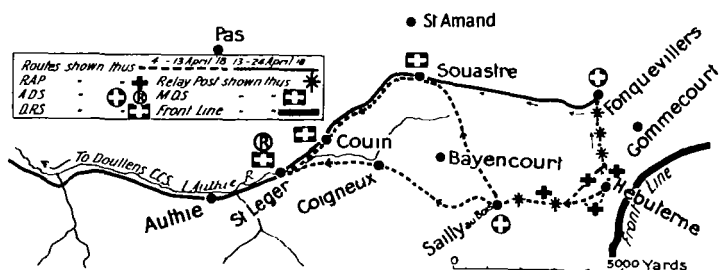


Evacuation Scheme of Australian Divisions with VII Corps in the last days of March

3rd Division. Arriving at Franvillers with D.H.Q. on the night of the 26th, the A.D.M.S. 3rd Division, Colonel Maguire,³⁷ found less to work on than had Colonel Barber. On this front no scheme of Divisional clearance existed; the 9th and 10th Brigades were still *en route*; the D.D.M.S. VII Corps (Colonel Maguire records) "could give no further information" and "desired that A.D's.M.S. carry on independently." Colonel Maguire's operation order (March 27th) arranged for a temporary dressing station at Bonnay—it was

³⁷ The medical diaries of this division are models of clarity and system, reflecting the character of the divisional administration. General Monash had taken with him, in his advanced party to VII Corps H.Q., four staff officers including the D.A.D.M.S., Major W. Vickers.

formed by the 11th Field Ambulance and carried on till the 28th. Then, the 10th Brigade having completely moved up, its field ambulance took over the "forward" clearance, with A.D.S. at Heilly. Meanwhile on March 27th the 11th Field Ambulance formed an M.D.S. at Querrieu in time to meet the "steady stream of wounded" that began to arrive at 7 p.m. The ambulance diary states that officers were at first instructed that "cases are to be evacuated as rapidly as possible without re-dressing, unless urgently indicated"; later (on March 30th), on receipt of a report by the A.D.M.S. 4th Division that "the C.C.S.'s at Doullens were practically sending all cases through without re-dressing," orders were given "to clear up and dress all wounds as far as this is consistent with the rapid evacuation of casualties."



It is not possible to follow the kaleidoscope of events over this vast battle-front. The fighting by the 4th Brigade at Hébuterne may be passed over since no Australian medical unit went with the Brigade.³⁸ The scheme of clearance is shown in the sketch map. South of the Somme gaps in the line of the exhausted infantry of Fifth Army were being precariously caulked by the Cavalry Corps and "Carey's Force." But between March 28th and 30th events occurred in the military sphere which influenced the course of history.

Operations the Tunny Bastion To effect his strategic aims—i.e. to roll up the British Force—on March 28th Ludendorff struck at the

³⁸ It was cleared by the field ambulances of the 62nd Division. On April 4 the bearer division of the 4th Field Ambulance rejoined the Brigade and cleared the R.A.P.'s working with a British field ambulance. The Brigade rejoined the Division on April 25.

bastion of the Vimy Ridge, minor thrusts being made at the same time farther south. The repulse at Vimy—fatal to the success of "Michael"—is not part of the history of the A.I.F. But on the Ancre and the Somme the pressure of the Australian troops was beginning to make itself felt.

Operations on the Ancre 4th Division. On March 28th the 4th Division with the 35th British on the right defeated a strong attack at a cost to the 4th of 338 casualties. The wounded (259) were cleared without a hitch to C.C.S. at Doullens by the Divisional transport.

Between Somme and Ancre 3rd Division. On the same day the 3rd Division sustained a loss of 65 killed and 266 wounded in a rash advance in daylight, somewhat reminiscent of "Krithia." On the 30th it repulsed with much greater "slaughter" a like assault by the enemy. On that part of the front the German advance was finally stopped. The work of the medical service calls for a note.

Evacuation: 3rd Division. Starting as they did on the 27th without any prior scheme in existence the medical units of this Division were hard put to deal with the heavy casualties. In particular the 11th Field Ambulance at the M.D.S. in Querrieu, had to bring out every trick in its bag. From four dressing tables and a "small theatre fitted up for urgent operations," cases passed out rapidly for evacuation. But at this stage they were held up owing to lack of transport.

During the night of March 28th-29th 400 cases, a large proportion serious, were accommodated in barns. The 3rd M.A.C. could only supply 6 cars. The stock of 600 blankets was soon depleted through the fact that M.D.S. and A.D.S. were close together, but M.D.S. and C.C.S. very far apart.

The first trouble (we are told) was resolved by "obtaining" the service of 8 motor lorries "which had come into the town in error" and which cleared 200 cases to Doullens; the second, by "salvaging" 2,000 blankets from the abandoned C.C.S. at Corbie. But by the morning of the 29th ample transport was available from the 3rd M.A.C., and by the 30th all evacuation was working smoothly and "owing to the efficient motor-transport service little surgical treatment was now required"; indeed the cars of the 11th Field Ambulance were being used to evacuate invalid civilians to the French Mission in Amiens.

The service of supply, both Army Service Corps and "Red Cross," functioned with extraordinary efficiency. From the Australian Red Cross depot at Frévent during April,



68. THE SOMME VALLEY NEAR CORBIE

From a painting by Sir Arthur Streeton. The view is from the high land between the Somme and the Ancre looking south-westward over Corbie towards the Villers-Bretonneux plateau. A bombardment is falling near Marcellave. Villers-Bretonneux is seen above Corbie. Abbey on the right.

To face p. 628



69. THE SOUTHERN MOST HUTS OF THE OLD "EDGEHILL" C.C.S.
AFTER "MICHAEL"

They lay just within the Australian front line, which is seen on the hill. The line bent westwards along the railway seen in the foreground. This was the site of the Battle of Dernancourt.

*Aust War Memorial Official Photo No F2499
Taken on 14 June 1918*



70. GENERAL BIRDWOOD VISITING A REST STATION

In attendance are the D.D.M.S. (Colonel Manifold) and
Colonel R. B. Huxtable

Aust War Memorial Official Photo No E382

To face p. 629.

the 10th and 11th Field Ambulances received for distribution:—

Pyjamas, 377 pairs, towels, 144; underpants, 50 pairs; carbolic soap, 120 lb.; cocoa and milk, 6 cases; coffee and milk, 6 cases; fancy biscuits, 9 cases; cigarettes, 25,000, socks, 723 pairs; hospital bags, 300; shirts, 50.

The ration issued by the A.S.C., comprising fresh meat, bacon, cheese, milk, vegetables, preserved meat, bread, jam, and sugar, was fully up to standard.

The 9th Brigade (3rd Division) had been guarding the VII Corps flank on the Somme at Corbie. On the 29th at

5.30 p.m. an urgent order took it post-haste
South of across the Somme to Cachy to act as reserve
the Somme to the XIX Corps of Fifth Army—to be, as things turned out, the advanced guard to an Australian invasion of the plateau south of the Somme that was to make history that will occupy most of the remaining chapters of this narrative. The Brigade was replaced in VII Corps by the 15th (5th Division) which had arrived on the same day from Flanders.

On crossing the Somme the 9th Field Ambulance came under the A.D.M.S. 61st Division, XIX Corps (the only active corps left in Fifth Army). Except for a sharp counter-attack at Lancer Wood on the 30th, the Brigade was not seriously engaged in the fighting on this front till April 4th, when it played an important part in repulsing the southern thrust of the final effort in "Michael."

Last Kick in "Michael" the Thrust for Amiens. As was said above, the fate of "Michael" was sealed when on March 28th the attack of Prince Rupprecht broke against the bastion of the Vimy Ridge, and on March 30th the advance down the Somme was checked when almost in sight of Amiens. But against the advice of the field commanders Ludendorff decided on a further assault on the British-French junction, to be delivered as two converging but independent thrusts north and south of the Somme on alternate days. These produced two important actions—the "First" fight for Villers-Bretonneux (April 4th), and the Battle of Dernancourt (April 5th). In both these battles the Australian formations played a dominant part³⁹ For convenience and continuity the operations on the Ancre are followed first.

The Battle of Dernancourt, April 5th. The attack made by the four divisions of the Second German Army mainly on the 12th and 13th Brigades of the 4th Division A.I.F. facing Dernancourt was unique in its action, fought to a finish in one day, and in a very exact sense within its sphere decisive in its result. Involving as it did an initial retirement

³⁹ At Villers-Bretonneux they shared that rôle with the British cavalry

against enormous odds up the face of an open hillside, and a subsequent counter-attack down the crest of this slope, it resulted in heavy Australian casualties numbering 358 killed and 837 wounded, with 180 prisoners of war, many of whom also were wounded.⁴⁰ These losses must be held worth the while, for thereafter on this sector there was peace profound till the Australian troops began to "raid."

Clearance of Casualties. The collecting and clearing of the wounded from this strenuous battle were full of human interest and endeavour. Excellent accounts in the war diaries invite narrative—which cannot be indulged. Some ingenious technical adaptations however must be noted.

The first wounded from the front reached the *W'aggon Loading Posts* within three or four hours, and throughout the day these posts cleared without incident. The "A.D.S." at Hénencourt Château had been badly shelled. To meet this (the 12th Field Ambulance diary records)

"the purpose of the station was changed. Casualties were treated in a cellar and the château converted into a motor-loading post and motor relay and reserve for bearers. The cars from Millencourt cleared direct to M.D.S. at Warloy provided the case did not need urgent attention, and were replaced from the reserve [held] at the château."

Some delay was caused when, to relieve congestion at the M.D.S., the cars from the A.D.S. were sent on direct to the "transport relay" beforementioned⁴¹ at Toutencourt. At the M.D.S. (Warloy—13th Field Ambulance), before the first cases arrived at 10 a.m. from the front line, no less than 100 casualties had come in through the shelling of the back area, and the dressing station itself had been hit twice. Only three M.A.C. cars were available; lorries from the M.A.C. had been "withdrawn by Army (says Colonel Barber) without notice."

"By 11.30 a.m. the buildings and yard were full, with over 200 cases, and by permission of the Curé the Church near-by was used as a shelter [Our] Ambulance cars were working forward, and an attempt to relieve congestion by sending the cars from A.D.S. straight through to Toutencourt caused congestion at the A.D.S.; 60 walking cases volunteered to walk to Toutencourt [4 miles] and were marched off."

Through the direct intervention of the Corps Commander

⁴⁰ An extremely interesting note in the *Australian Official History* (Vol. V, pp. 395-6) on the treatment of these men gives further instance of that curious phenomenon referred to elsewhere—the humane camaraderie of the medical service. It cannot too strongly be emphasised that Australian records give no support to any attitude of superiority on our part in this matter.

⁴¹ See p. 626

(Lieut.-General Congreve) Colonel Barber obtained cars and lorries. By 11 p.m. the M.D.S. was "clear and cases coming in slowly."

Between 8 a.m. and 11 p.m. of April 5th nearly 1,000 cases passed through the station. "Owing to the uncertainty of C.C.S. organisation," Colonel Barber notes, all cases were "thoroughly dressed" before being sent on. The tent subdivision personnel of this field ambulance, both officers and other ranks, had been trained to work in "teams," and the attempt was made to meet all requirements for the effective treatment of urgent cases.

The New Warfare. Indeed, reading between the lines of the war diaries of these two units, we can discern the germ of various medical developments at the front during this last phase of the war. These can be summarised as scientific adjustments of transport and treatment within Divisions and Corps to meet the problems arising from the prolongation of the time-distance factor—A.D.S. to C.C.S.⁴²

The geophysical background for the chief events in the last scenes of the war in which the Australian force took a hand is found in the valley of the River Somme which also became the focal centre of Allied strategy.⁴³

The Villers-Bretonneux front—and Somme Valley

From 30th March until the end of April the "Michael" offensive (save for the thrust at Dernancourt) resolved itself in a series of attacks on the British at Villers-Bretonneux and on the similar ground held by the French about Moreuil which together were the key to Amiens.

It is impossible to enter upon any general account of the attacks and counter-attacks and administrative adjustments that make up the confused history of the last stages of "Michael." Briefly, to pick up from March 27th when the French retreat and the retirement of the British VII Corps exposed both flanks of Fifth Army to attack, the Cavalry Corps was transferred from Third and crossed the Somme to Fifth Army. Partly by fighting, partly through exhaustion, the

⁴² An illuminating comparison presents itself in the evacuation from Pozieres and work of 1st Field Ambulance M.D.S. at Warloy in 1916—*Chapter iv, p. 69.*

⁴³ The terrain of this vast battlefield looking out from the heights north of the Somme towards Villers-Bretonneux is preserved in one of the finest pictures in the Australian War Memorial, "The Valley of the Somme," by Sir Arthur Streeton. See plate at p. 628

German advance slowed down, and was brought to a decisive halt by the dramatic attacks and counter-attacks at Lancer Wood and Moreuil on March 30th. But it had left the Germans confronting, at a distance of less than two miles, the vital position of Villers-Bretonneux, overlooking Amiens.

First Fight for Villers-Bretonneux. On April 4th the Germans made a determined thrust on a wide front south of the Somme, which, though it failed in its main object, drove back the British Fourth Army on its whole front—at some points for nearly two miles—and the French for two miles beyond the River Avre. On the northern flank Hamel was occupied and Villers-Bretonneux was nearly reached, but it was saved by a brilliant counter-attack by the 9th Brigade and British cavalry. In the initial retirements and the subsequent advances the Brigade sustained 543 casualties, 99 killed, 444 wounded.

The 9th Field Ambulance. The medical unit with the Brigade was under direction of the A.D.M.S. 31st (British) Division, to whom it sent location reports for clearance to C.C.S. As generally, however, in this phase of the fighting, it worked as a part of the Brigade, and with a degree of tactical initiative that made up a wholly novel experience and imposed a great responsibility. In a battle in which retreat and advance followed in quick succession, the unit applied with distinguished success the principles of close medical and military co-operation. Its work and that of the R.M.O's⁴⁴ is given special notice in the *Australian Official History* and does not call for particular comment here.

During the first week in April the remaining divisions of the Australian Corps arrived from the north and came under command of the VII Corps of the Third Army and XIX (and subsequently III) Corps of the Fourth. It was significant of the military crisis that, south of the Somme, brigade after brigade was thrown in on arrival and strung out separately. With these detached brigades went their respective field ambulances.

**The
Australian
Corps takes
over the front**

The 2nd and 5th Divisions Enter the Line. The 15th Brigade (5th Division), which had replaced the 9th in guarding the bridges across the Somme, south of Corbie, sustained casualties in front of Hamel in the German attack on April 4th and cleared them by its 15th Field Ambulance. On the evening of April 5th the 5th Brigade (2nd Division) entered the line alongside the 9th. The 2nd Division's other brigades (6th and 7th) went north of the Somme, and after the Battle of Der-

⁴⁴ Here, as elsewhere in this work, the term "R.M.O." includes the whole medical establishment of the battalion, unless the context makes clear that only the medical officer is intended.

nancourt relieved the 12th and 13th (4th Division), which had held that front since March 27th. On April 6th-7th the 8th and 14th Brigades of the 5th Division came south of the Somme, the 8th being for a few days sent south to Boves. Arriving on April 5th the A D M.S. of this Division established headquarters at Blangy.

Thus at the end of the first week in April the 2nd, 3rd, 4th and 5th Australian Divisions were strung out in a thin line before Amiens. From each division one brigade had been detached for some special emergency and was being used independently. On April 6th Australian formations held the line from Hangard Wood to Albert—the whole front of Fourth Army—as well as a small part of Third's. The 1st Division was then just leaving Flanders for the south. Arriving at Amiens on the 8th it was within two days turned right about to meet the crisis that had developed on the Lys.

Medical Arrangements. Fourth Army. In a situation so unstable as that which existed south of the Somme medical arrangements were still those of a mobile front. So late indeed as April 8th the D.M.S. Fourth Army named Abbeville as the next retiring point to which "the front line of C.C.S.'s would be moved and others later." The D.D.M.S. III Corps (Fourth Army), which on April 5th replaced the XIX at Villers-Bretonneux, noted on taking over that, "under the present conditions Advanced Dressing Stations change their positions so rapidly that it is impossible to give accurate locations from day to day." Casualties were being cleared under Brigade, Divisional and Corps arrangements, which often overlapped.

The Australian Corps: the New Deputy-Director. During these stirring events the Headquarters of the Australian Corps had remained at Flêtre in Second Army, denuded of its Divisions one by one. On April 3rd it came south and on the 6th relieved the VII Corps in Third Army, which had been holding its line with the 3rd and 4th Australian Divisions. Next day it became the left Corps of the Fourth Army and later took over from III Corps the sector of the 5th Australian Division south of the Somme.

The D.D.M.S., Colonel Manifold, came south with the Corps, but on April 8th handed over⁴⁶ to Colonel G. W. Barber,

⁴⁶ Col. Manifold returned to the Indian Medical Service and in June was made D D M S Southern Army, India. In 1922 he was knighted.

A.A.M.C.⁴⁶ The period of Colonel Manifold's direction in 1 Anzac, and for a short time, in the Australian Corps had seen immense changes and advance in military methods and technique. The medical units and administrative departments of the Corps and Divisions had reached a high grade of efficiency and war-wisdom; and in this growth Colonel Manifold had played a sympathetic and discerning part, and had filled his difficult position with great ability and unremitting energy. The new D.D.M.S. had been selected by the D.M.S. A.I.F. (Surgeon-General Howse) for his personal fitness not less than in virtue of his seniority in the service. As A.D.M.S. 4th Division Colonel Barber had shown a special aptitude for organisation, and in temperament and administrative methods was peculiarly fitted to take control of medical affairs in the Australian Corps at this juncture in its history.

"Medical Instruction No. 10." As was his wont Colonel Barber lost no time in putting the medical situation on an exact basis. Two days after his appointment he issued "Medical Instructions" which outlined "the policy to be pursued during the present operations." In general these were intended to meet "the necessity of maintaining the mobility of medical units, and to meet medical problems consequent on the detachment of brigade groups," and to prevent wastage from Army area. "Divisional Rest Stations" were to be replaced by "Divisional Collecting Stations" (for patients likely to be fit for duty within 12 hours) and by a "Corps Rest Station" at the Corps Reinforcement Camp (to retain men who required a longer rest and treatment). The medical arrangements normal in the Australian divisions—one field ambulance clearing the front of each division and another running the M.D.S. behind it—were to be resumed. "First aid only" was to be given at the A.D.S., but "thorough dressing at the M.D.S., owing to the distance of C.C.S.'s." At the M.D.S. an officer was to be detailed "to sort out the patients" for C.C.S., D.C.S., or C.R.S. (if any), and to "hand over stragglers . . . to the military police." Use of the "misleading term 'Collecting Post'" for divisional collecting station, bearer relay post, or motor or horse waggon

⁴⁶ Col Barber was replaced as A.D.M.S. 4th Division by Lieut.-Col A. H. Moseley

post, was prohibited.⁴⁷ A.D.'s M.S. were made responsible for maintaining adequate reserves of equipment.

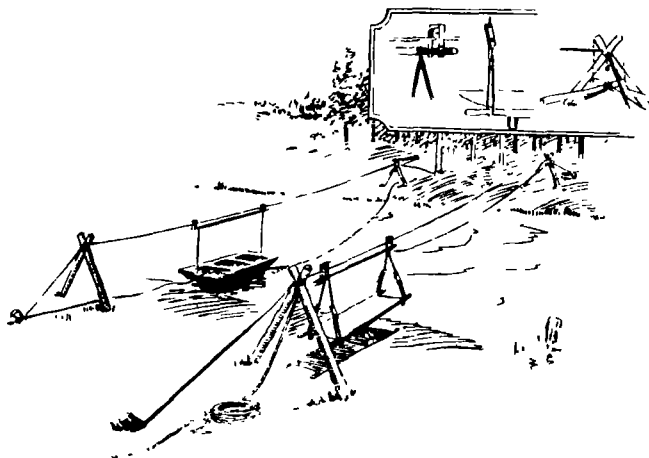
Though no major operations took place on this front between April 7th and 24th the struggle for position was incessant, and at no time was the Fourth Army Commander (General Rawlinson) free from grave anxiety regarding the safety of the Amiens junction. The tremendous blows struck by Ludendorff in the north on April 9th and 10th had drawn thither a large part first of the British, then of the French, reserves. On March 25th, General Pershing agreed to permit the American divisions training in France to be used in emergency with the British or French⁴⁸—a decision which afterwards furnished the Australian Medical Service with most interesting experience of the difficult problem of co-ordinating the differing administrative systems of separate national forces.

Struggle for Position: Hangard Wood. Between April 7th and 19th two detached Australian brigades were drawn into the fighting round Hangard Wood—where the Germans hoped to outflank Villers-Bretonneux. During this time the line on the Somme was gradually stabilised and organised as a defensive front. The Fourth Army now held its front with two corps, the III in front of Cachy and Villers-Bretonneux, and the Australian, astride of Somme and Ancre. A system of evacuation had been built up based on casualty clearing stations established on a line Vignacourt, Pont Remy, Picquigny, Longpré, and Namps, 20-30 miles behind the front. Main dressing stations were fixed, but advanced stations changed their site to accord with divisional arrangements. On April 17th No. 3 M.A.C. was placed under the immediate direction of the Australian Corps.

⁴⁷ In the maps and sketches which illustrate the further operations of the Australian Corps—i.e. from sketch map on p. 626 onwards—the conventional sign for the "divisional collecting station" applies to the stations thus defined by Colonel Barber. (In spite of his order, the term "collecting post" or "divisional collecting post" retained an unofficial vogue and was applied to any rendezvous for walking wounded in advance of the "A.D.S.") In the *British Official Medical History* this sign is defined to signify a "walking wounded dressing station," a "divisional collecting post," or simply a "collecting post"—apparently indiscriminately. In this volume the conventional signs for the walking wounded stations have been brought in line with those for stretcher cases, and with the usage in the Australian Corps in 1918.

⁴⁸ Pershing *My Experiences in the World War*, pp. 319, 323

So uncertain was the military situation that, under instruction from the General Staff, the D.D.M.S., Australian Corps, made exact plans for clearing casualties northwards across the Somme in the event of the enemy's pushing to Amiens. His prepara-



"Flying Fox" Transporter.

(Reproduced from a drawing in the war diary of the 9th Aust Field Ambulance.)

tions included a fleet of rowing-boats held in a backwater of the Somme, and a "flying fox" to carry stretcher cases across the river.⁴⁰ By the end of April the German artillery was again in great strength, and shell-fire from H.E., shrapnel, and gas shell on the exposed routes of clearance along the Somme valley led to a series of experiments by medical units in the use of underground or sunken posts and stations that will call for particular note in later pages.

The Battle of Villers-Bretonneux: April 25th. By the middle of April it was becoming clear to the German High Command that the thrust in the north must be helped by diversions elsewhere. Partly as such, but in the hope also of forcing some strategic result from so great a tactical gain, preparations were made for a revival on a lesser scale of the offensive against the British-French front, the objective being the heights and town of Villers-Bretonneux, commanding Amiens.

⁴⁰ The medical scheme envisaged two zones of retreat. In the first the advanced dressing stations would fall back to the sites of the "main," and these to the existing "divisional collecting stations," the siting of which was to be adjusted with this contingency in view. The second 'zone' would place the M.D.S.'s almost in line with the present C.C.S. positions.

The Gas Offensive, April 17th-18th. Expected by the British Command since the middle of the month, offensive action began in a wholly unexpected form. On April 17th and 18th the town and adjoining wood were shelled with "mustard" gas on a scale not hitherto approached, and not exceeded at any time in the history of the Australian Corps. Little has been said in these pages of the gas weapon, in view of the fact that every aspect of this new form of warfare will be dealt with in a special chapter.⁵⁰ But it must be noted here that German technique and policy in this branch of warfare had by now reached a high degree of precision. It is true that a no less exact technique and training had been evolved in defence by both sides; nevertheless in the B.E.F. the number of casualties from this weapon had now reached such large proportions, and the complexity of the medical problems involved had been so greatly increased by the introduction of "dichlorethyl-sulphide" ("mustard" or "yperite") and the arsenes, that an elaborate system for dealing with gassed casualties had been organised. This included "gas centres" for the diagnosis of "N.Y.D. Gas," and special provision for immediate treatment and for the "decontamination" of casualties from "mustard."

But such a bombardment as was sustained at Villers-Bretonneux caught the Australian formations to some extent unawares, and, as the Official Historian puts it, "officers and men received a staggering object lesson in the need for precautions." Between April 17th and 24th some 1,700 gas casualties passed through the Australian field ambulances, involving immense labour and great dislocation of normal clearance. Gas shells were also largely used by the Germans in the subsequent operations.

The Attack, April 24th-25th The actual assault came on the morning of April 24th—immediately preceding the stroke at Mont Kemmel in the north. Using tanks, for the first time with any effect, by 8 a.m. the Germans had captured Villers-Bretonneux—an advance of 2,000 yards, which put them in full view of Amiens. The task of recapture was allotted mainly to two reserve brigades (13th and 15th) of the two neighbouring Australian Divisions 4th and 5th,⁵¹ acting under the III (British) Corps. It was achieved by the very unusual tactical expedient of envelopment under cover of darkness, the move-

⁵⁰ *In Vol III*

⁵¹ After its relief by the 2nd Division at Dernancourt, the 4th Division had been in support. The 13th Brigade acted as Army Reserve.

ment being carried out by the two brigades independently. After a sweep which practically enclosed the town, and the wood of Aquenne—and most of their contents—the two brigades by dawn were strongly established beyond these places, and though heavy fighting continued until May 3rd in unsuccessful attempts by French and British to recapture Monument Wood and Hangard Wood, the action closed the German offensive on this front. This was indeed the last important attack on the British Army on the Western Front. The Australian casualties sustained were 2,473.

Medical Events of the Battle. The medical arrangements for the battle were under the D.D.M.S. III Corps and present no very special features. The 13th and 15th Field Ambulances came under the direction of the A.D.M.S., 8th Division, who saw to the work of clearance from the main dressing stations. The formation of advanced dressing stations and the collecting and clearance of casualties from each brigade fell on the two field ambulance commanders (Lieut.-Colonels H. K. Fry and K. Smith). The bearer divisions could do little at night; but with daylight (and victory) the clearing of advanced ambulance posts by the wheeled transport presented no special problem. The great difficulty lay in the rescue and first aid in the exposed forward area, of which task the onus fell on the R.M.O.'s; and in few actions was it more difficult. A graphic account of his experiences by the R.M.O. 52nd Battalion (Captain R. L. Forsyth) is quoted at length in the *Australian Official History*,⁵² to which the reader is referred.

One medical officer (Captain P. B. Sewell), R.M.O. of the 50th Battalion, was killed, and another (Captain Forsyth) wounded. The death of Captain Sewell created one of those occasions—frequent enough to remain most often “unhonoured and unsung”—when the “rank and file” was called on to prove the mettle of its training and traditions. The following from the recommendation for an immediate reward (the D.C.M.) would apply *mutatis mutandis* to many such occasions.

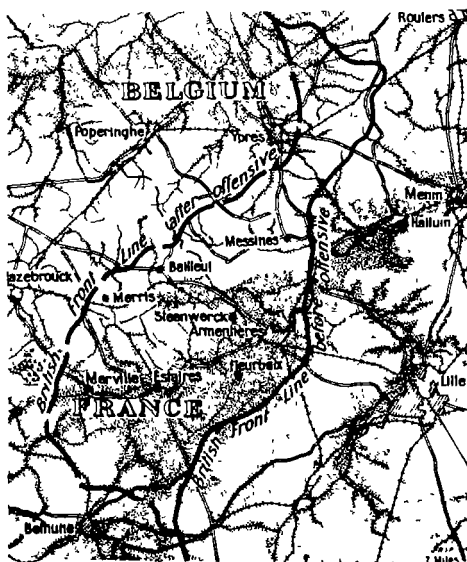
“On April 24th, 1918, north-east of Cachy near Villers-Bretonneux, Lance-Corporal A. G. Forrester, M.M., was in charge of three squads of stretcher-bearers with the 50th Battalion when the battalion moved forward to attack the enemy's position. The advance was made under extremely heavy shell and machine-gun fire, and, before a regimental aid-post could be established, the R.M.O. (Capt. P. B. Sewell) was reported ‘missing.’ At this critical juncture Lance-Corporal Forrester, with the greatest coolness and resource, took complete charge of the

⁵² Vol. V, pp. 581-2, 585-6.

situation in the absence of the R.M.O. He quickly organised the A.A.M.C. Details, established a Casualty Collecting Post, directed the work of the Battalion Regimental Stretcher-Bearers, and succeeded in getting in touch with the Battalion Headquarters and the Field Ambulance Posts in rear. He personally conducted these operations exposed to continuous heavy fire in an area which was devoid of shelter, showing complete disregard of danger. It was entirely due to his resource and masterly control of a most difficult situation that a serious breakdown in the evacuation of the wounded in the Battalion was successfully averted."

The Fourth Army Front in May, 1918. On April 25th the Australian Corps took control of all formations and of the whole Fourth Army front, from Monument Wood to Albert. But immediately afterwards the III Corps, withdrawn from Villers-Bretonneux, was put in again opposite Albert, the Australian Corps (with all its normal divisions except the 1st) side-slipping to become the southern corps of the army in order that it should have charge of this dangerous flank. The medical service entered upon the interesting task of adapting to the new conditions of warfare the technique of evacuation built up during the years of attrition and rudely jolted by the great retreat.

Meanwhile the 1st Division had been fighting heavily in Flanders, and this narrative must now turn to certain features of special medical interest in the operations that had caused its hurried return thither, the German offensive on the Lys.



The Battle of the Lys, April 1918.

The Genesis of "George." An attack across the River Lys had been part of the original plan for the German offensive, and it was revived when the attack on Amiens failed. It was not expected at this stage either by the British general staff or by General Foch; and the front had been "milked" for the Somme and, in substitution, manned with battered remnants of the Third and Fifth Army formations, which had been previously engaged in filling their ranks from the reinforcements—chiefly lads of 19 or younger—now pouring into France. An offensive on this front had, however, been predicted by the Second Army staff as well as by that of the First (whose front was partly held by the Portuguese), and steps were taken to withstand or minimise the result of a possible break-through. The blow fell, on a wide front south of Armentières on April 9th, and north of it on the 10th, and rapidly developed. In this history we are concerned only with the "medical arrangements" to meet the expected German offensive and the steps taken when it occurred. Both, as it happens, are peculiarly pertinent.

In the second week of March, consequent on the order of the Director-General already referred to,⁵³ the D.M.S. "Fourth" Army⁵⁴ put in train a scheme of dispositions and adjustments of the casualty clearing stations. With the launching of "Michael" on March 21st and the subsequent thrust of "George" on April 9th these adjustments, still in process, merged with a series of urgent—not to say precipitate—moves to the rear. Nos. 1, 2 and 3 A.C.C.S.'s were intimately involved in all of these; and a report of their experiences therefore properly precedes such account as is necessary of the work of the field ambulances of the 1st Australian Division in helping to stop this offensive.

Before "Michael." We left the three Australian units⁵⁵ established in elaborately organised hutted and tented sites, No. 1 between Bailleul and Oulstersteene (functioning as a "Corps Rest Station"); No. 2 at Trois Arbres near Steenwerck some 5 miles only from the front line; No. 3 at Nine Elms near Poperinghe. Nos. 1 and 3 were not involved in this first echelon of moves, and the events with which we are now concerned begin with the initial move of No. 2. No. 1, however, received instructions on March 14th to

**Medical
preparations
in Second
Army**

**The
A.C.C.S.'s—
first echelon
of moves**

⁵³ See pp 608-9

⁵⁴ This was almost immediately before this Army in Flanders resumed its old title of the "Second"

⁵⁵ See pp 382-7.

"cease to function as a Corps Rest Station at midnight" preparatory to resuming as a C.C.S.

First Echelon of Moves: No. 2 C.C.S. At 10.40 p.m. on March 10th the O.C. (Lieut.-Colonel V. O. Stacy) received a message from D.M.S. "Fourth" Army.

"ordering," says the war diary, "the immediate closing down of this C.C.S. Sisters to be evacuated and all patients, fit to be moved, to be disposed of as soon as possible."

On March 12th instructions were received for a move to a site at Noot Boon near Oultersteene—within a "coo-ee" of No. 1—the transfer to be a "test of mobility."

On March 14th the Nursing Sisters were sent to a British Stationary Hospital at St. Omer.

"On the 15th instant 10 motor lorries began transporting material. By nightfall 50 loads had been dumped. By 11 a.m. on the 16th, 26 hours after receipt of orders, we were equipped and ready to receive 200 patients. On the 18th Colonel Manifold, D.D.M.S. Australian Corps, and on the 20th Major-General O'Keeffe, D.M.S. Second Army, visited the station."

The "station" formed by No. 2 at Oultersteene in this move was in the nature of an advanced operating centre. This was still in progress of transformation to a full-fledged casualty clearing station, and the old site was still being demolished, when "Michael" came—and, though the offensive was not on this front, there soon arrived orders for a second echelon of moves to "Ana Jana Siding" at Hondeghem near Hazebrouck.

Second Echelon of Moves (after March 21st). In this move No. 1 also was involved; it was serious business and was accomplished by both units with great celerity.⁵⁶

"At 9.45 p.m. on the 25th instant," reported the O.C. of No. 2 General Howse, "I received a wire to meet the D.M.S. at his office at 10 a.m. next day re another move still further back, and on the 26th I inspected with him the new site at Ana Jana Siding near Hazebrouck. O's.C. of No. 1 Aust. C.C.S. [Lieut.-Colonel A. H. Marks] and No. 17 British C.C.S. were also present and sites were allotted to them. This station is to move first. At 4.30 p.m. on the 26th 4 lorry loads of tents were shifted and the ground measured out for a tent-brigade area.

⁵⁶ The moves of all three units may be followed on sketch map at p. 772. It is very important that it should be understood that the moves described for the Australian units were only part of a hurried "general post" involving, within this Army, some 30-40 units—C.C.S.'s, Stationary and General Hospitals—British, Canadian, Australian and Portuguese.

"From work done yesterday 27th instant it would seem possible that a very workable C.C.S., accommodating from 200 to 250 patients could be formed on any new site in one day, if the necessary [material] arrived fast enough."

By the 28th 50 marquees had been erected, wards equipped, and electric light installed in the operating theatre and dressing room. Routine orders were published in the new camp on the 29th and "a start made on sanitation . . . which should turn out to be most perfect."

On April 5th the Sisters returned from St. Omer.

"By this time," continued Colonel Stacy's report, "the hospital hut for the theatre had been painted throughout but not equipped. Personnel huts commenced, water supplies brought from a stream filtered through sand and chlorinated and pumped into supply tanks in the camp. By April 8th the Oultersteene site was completely cleared and working parties brought back. Parties still working at the original site at Trois Arbres sending back timbers and huts to Ana Jana."

No. 1 A.C.C.S. was warned on March 26th "to be prepared to move in about 10 days"; but March 28th found this unit, also, moving under urgent orders to Hondegheem.

On April 9th came "George" and a stream of casualties: but it found the two units well prepared.

"On April 8th," says Colonel Stacy, "I sent for the party at Trois Arbres to rejoin unit. Some arrived the same night and the rest reported next morning after an exciting time. Tremendous bombardment in the Steenwerck-Bailleul area. No essential equipment left, only some out-buildings. On the evening of the 9th wounded began to arrive in large numbers—in lorries, ambulance cars, and walking—and continued practically all night. No. 1 A.C.C.S. and No. 17 British adjoining us also very busy. The whole staff worked incessantly from the evening of the 9th to noon on the 12th. Weather all the time cold and wet; 1,428 cases passed through—1,183 wounded, of whom 174 required a general anaesthetic—(a proportion, excluding the 212 gassed, of 1 to 5). Practically all had to be given A.T.S. since most were direct admissions and the rest [had] passed through Field Ambulances that had exhausted their supplies."

Third Echelon of Moves (during "George." April 12th).
The next move was precipitate.

No. 2 A.C.C.S. "About noon on 12th April," the report continues, "while still very busy a telephone message was received that all patients were to be evacuated at once and the station packed up ready to move off by nightfall. By 5 p.m. all tents were down, patients evacuated, and sisters sent off in a bus to No. 10 Stationary St. Omer. A new site was given at Blendecques near Arques. Two lorry loads of tents and two trailers went straight off with a party. All officers except one

at the new location by 8 p.m. The night was very clear, and a large scale air raid was in progress over Arques and St. Omer. Lorries plied all night, the journey taking $2\frac{1}{2}$ to 3 hours. The roads congested with troops and refugees, the latter in hundreds. On April 13th the officer-in-charge at Ana Jana⁵⁷ got orders to leave the place at once. Marching out about noon the party reached Blendecques about 7 p.m. leaving a small guard behind. The men marched 15 miles with their packs up, and arrived in good order."

No. 1 moved at the same time. The site at Ana Jana did not come under shell-fire, and it was possible to salvage the equipment of both units and most of the huts, and also the trolley-tramway which formed a special feature of the equipment of No. 2.

We find from the same report that by April 17th No. 2 was again in working order with water and electric light laid on, tents pitched and equipped for 400 cases. By April 22nd a broad cinder road ran the length of the camp for evacuation cars. At the request of the D.M.S. Second Army a plan was drawn up showing the arrangement of traffic for Nos. 1 and 2 Australian stations which were opposite each other. The arrangement is said to have "worked remarkably well."

The records of No. 3 A.C.C.S., which was at Nine Elms, disclose a less strenuous time, but are not less informative of the factors which make up that vital problem
No. 3 A.C.C.S. in evacuation—the *proper nature and place of the casualty clearing station*.

Writing on April 1st the C.O., Lieut.-Colonel R. D. Campbell says:—

"Under a new scheme, as a result of losses in the Somme, C.C.S.'s are being divided in Front Area and Back Area C.C.S.—the Back Area C.C.S. 10-15 miles behind the Front Area C.C.S. This C.C.S. remains a Front Area Unit, which is satisfactory on account of the better class of surgical work [i.e. dealing with a more serious type of case]. Preparations have been made—on paper—for an orderly evacuation of the Front Area C.C.S., if necessary, but its success, being wholly dependent on adequate transport, is problematical."

At midday on April 14th, "as a result of the enemy push-through at Estaires," orders were received⁵⁸ to shift to a new site at Esquelbecq, between Cassel and Bergues, and all patients (284 in number) were evacuated promptly by ambulance

⁵⁷ At this time the German advance had reached Oulstersteene and the edge of Vieux Berquin and it was feared that Hazebrouck might be reached within 24 hours. That night the 1st Australian Division took up its position along the front defending Hazebrouck

⁵⁸ With a view, it would seem, to the forthcoming evacuation of the Ypres Salient.

trains. The Nursing Sisters had been sent back to St. Omer a few days before.

"In view of such a move," says the unit diary, "some time previously 9 lorry loads of material, sufficient to house, feed, and surgically treat 200 patients, had been ear-marked⁵⁹ . . . The shifting of equipment was done by 8 lorries over a distance of 15 miles. . . . With this material, at the end of 48 hours it was possible, if necessary, to receive and treat patients on the new site. At the end of 72 hours we were ready for everything except X-ray work, this being held up owing to the lack of a suitable building."

When the order came to receive patients the hospital was well established, a tent operating theatre having been erected and X-ray work being done in a darkened "Armstrong" hut. The diary says:—

"It was found in most cases that it was possible to undertake only the 'A' class or more severe type of case. The Ambulance Train service [from C.C.S. to Base] being good this did not entail [undue] hardships on the patients. These arrived from the front in good time." Colonel Campbell concluded that when delay occurred it was before the patient reached the motor ambulance convoy.

Between April 26th and 30th over 1,200 patients were admitted of whom 800 were wounded; of these 138 were operated on, the rest dressed and evacuated.

During April the three Australian C.C.S's treated casualties as follows:—

	No. 1 A.C.C.S	No. 2 A.C.C.S	No. 3 A.C.C.S
Wounded	1,812	1,959	1,407
"Gassed"	208	309	133
Sick	427	395	999

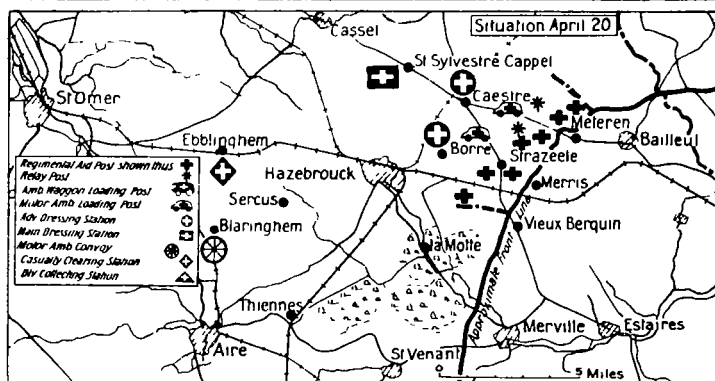
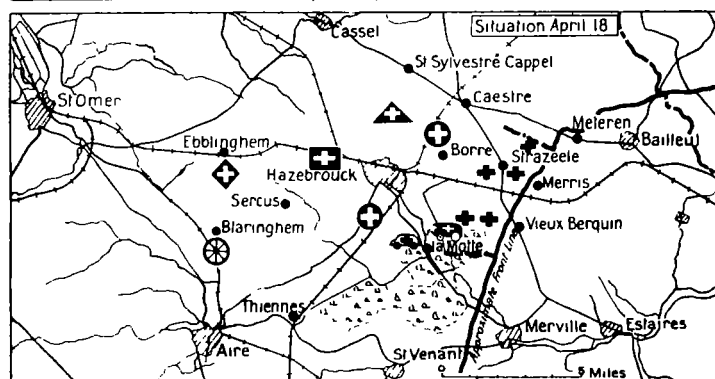
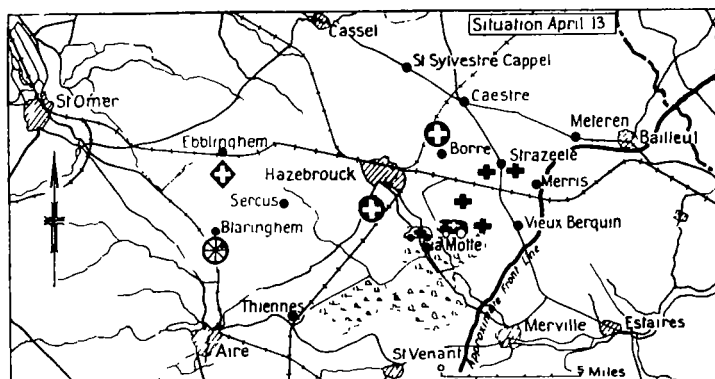
The 1st Division had begun to arrive on the night of April 12th after being heavily bombed while entraining at Amiens.

While the division was coming up the defence rested largely on the 4th Guards Brigade,⁶⁰ which, for a time, held the enemy in a struggle which cost the brigade not less than 70 per cent. of the troops engaged. By the 13th, however, the Australian force was digging in on a line in front of Strazeele and Nieppe Forest, and behind this the remains of

⁵⁹ The detailed list attached in the report covered 4 foolscap pages of close typescript and comprised some 5,000 separate articles and packages, including 31 marquees and 39 bell tents.

⁶⁰ The rest of the 31st Division and the 29th were also in the struggle.

Map No. 10.



THE 1ST AUSTRALIAN DIVISION AT STRAZEELE—MEDICAL ARRANGEMENTS, 13TH, 18TH, AND 20TH APRIL, 1918.

the defending troops that night retired to a security which in this sector never for one moment was again in jeopardy.

The 1st Division, with those beside it, repelled two first-class attacks on April 14th and 17th. Its four remaining months in front of Hazebrouck saw perhaps the most enterprising trench-warfare ever waged on the Western Front—a series of occasional minor attacks, all successful except the first, interspersed with spontaneous raids by the troops who almost daily brought in prisoners until on July 11th on their own initiative they “cut out” piecemeal half-a-mile of German front, taking over 150 prisoners.

The Medical Units. Though full of local incident and imposing at times a very heavy strain on the personnel of the 1st, 2nd, and 3rd Field Ambulances, the medical events of these operations do not call for special description since they illustrate no new developments, at least behind the lines. The division came under the direction of the D.D.M.S., XV Corps. On their arrival the field ambulances, working with their respective brigades, formed dressing stations which were cleared independently by No. 2 Motor Ambulance Convoy; but within a few days a normal divisional system was developed, based on casualty clearing stations at Ebblinghem. The “medical arrangements” in the 1st Australian Division for the dramatic warfare of “George I” are shown in the series of sketch maps. During the first two weeks the division sustained 1,610 casualties—441 killed and 1,169 wounded.

The comparative shortness of the German advance—at most 11 miles as against 40 on the Somme—involved a relatively longer evacuation route from M.D.S. to C.C.S., since the C.C.S.’s were far withdrawn but the M.D.S.’s were not driven very far. In contrast to conditions on the Somme, however, motor ambulance convoys remained intact and this in great measure determined the medical events of the crisis and the fact that at no time was there any difficulty in clearing the field ambulances. During May and June the 1st Division sustained considerable sick casualties from the first influenza epidemic.

On August 6th, in response to a demand as imperative as that which had sent it north, though of a very different kind, the division entrained for the south.