

ORAL HISTORY RECORDING

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INTERVIEWER: DR JOHN MITCHELL
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Identification: This interview with Dr Donald Dowey took place in Adelaide on 23rd January 1991. Interviewer, Dr John Mitchell. As Flight Lieutenant Dowey, Dr Dowey was a member of the aircraft first sighting the Japanese invasion fleet steaming towards northern Malaya. Early in the invasion Dr Dowey's aircraft was shot down and he became the first RAAF prisoner of the Japanese. Dr Dowey, after the war, did a medical course at Adelaide and on his retirement was Director of Rehabilitation Services for South Australia.

For quite a while in Changi it was obvious that a large number of men were going to be moved from Singapore into Thailand. And the Japanese were fairly secretive about this and eventually our command obtained a conference with the Japanese to discover where in fact the troops were heading. And they were told that Japan was going to recognise the importance of the Geneva Conventions and were setting up seven POW camps in Thailand which was at that time reasonably neutral and we were in fact destined by separate train loads to go to those camps. And the camps were going to be run on proper lines, there wouldn't be any working parties and so on as such - no impressed labour or anything like that. And, in fact, it all sounded very rosy. Now the end result of that was that whereas the initial forces so-called, or train loads of POWs, were made up of reasonably fit men, the subsequent train loads - in other words getting near the bottom of a barrel - contained men who had in fact been taken out of sick beds in Changi, [Salarang Square] where the hospital was - Salarang Square was the old Jordan Highlanders Mess area, not the mess but the battalion area - and so, as you can see, the later forces such as H Force contained quite a number of men who were in fact not fit to march but in fact found themselves on this force simply because of the reassurances given by the Japanese and it was thought that they would find better conditions and therefore a better survival in Thailand. Stop it for a minute.

Sorry, did you say stop?

Mmm. I should point out here that most of my POW experiences were shared with the British Battalion of which I had become an unofficial member when I returned to Singapore from Saigon - before Singapore fell this was when I was in Saigon - and it just so happened that I was met by a Colonel Morrison who asked me if I would like to become a member of his mess, which I did, before I knew anything about the arrangements and set-up in Changi itself. So I became a subaltern in the British battalion which was an amalgamation of the remnants of the East Surries and the Leicestershire, both permanent regular battalions in the British Army.

Excuse me, Don. Would you like to elaborate on the manner in which you were introduced to that mess?

Yes.

The story you told me. Throw that in if you would.

It's quite interesting because there were five of us who returned from Saigon having spent the previous two months or so under pretty lousy conditions in a single cell which measured about nine feet by eight feet. And in there at one stage we had fourteen men plus a little corner for a bencho, which is the Japanese word for urinal, which was just a shallow bucket.

And it was great fun amongst the Japanese when they disallowed us the right to empty this monstrous container. And so for a large part of this time we seemed to sleep in our own urine - the stench can only be imagined. Anyway, when we got back to Singapore, after Singapore fell, the Australian 8th Division and the British 18th Division plus various odds and sods and regular battalions had all assembled in Changi and we didn't know about this. All we knew was that Singapore had fallen.

We were transported from the docks, from the ship that we came over on, blind-folded and hands tied behind our backs and we were put into the back of a utility. And we were driven off and we did not know where, at that stage. The utility stopped on a road somewhere. We heard lots of voices around and assumed that we had company - English company - and the next events were rather rapid. Two Japanese came into the back of the truck and heaved us all off like sacks of potatoes. I can remember landing on my elbow on the tarmac which sent an awful pain right through my arm. But somebody hoisted me to my feet and undid my hands, which was nice, and somebody else removed the blind-fold, and there before me was the best kitted out officer that I've ever seen. He was wearing a ghurkha type hat, Sam Brown immaculate pressed shirt and trousers and he extended his hand to me. He was wearing a monocle by the war.

And the kit was completed with the usual mandatory malacca cane and he extended his hand to me and he said, 'Name of Morrison, Leicestershires. Would you care to join my mess?'. And I thought, 'You bloody beaut. This is the nicest thing that's happened to me for months'. So I said, 'Well, yes, thank you very much. I would be delighted'. And that's how I became a subaltern in the Leicestershires and I didn't leave them until I came back off the railway back into Singapore when I rejoined the Australian side.

Anyway, harking back to the problems of ... harking back to the problems of H Force, I would think that probably 30 per cent of the make-up of that force was in fact men who had ailments of one sort or another and some of them had, in fact, as I hinted earlier, been taken from hospital beds on the assurance of the Japanese that they would have better conditions in Thailand. This was a monstrous confidence trick which subsequently our own people realised of course but it was then too late.

Now the H Force was largely British; there were some Australians but the remnants of the British Battalion were in fact making up quite a large amount of that force. There were some Argyles and Gordons as well and Malay volunteers. So we were a funny bunch of various make-up and we were also joined by quite a number of Dutch but I think that was subsequent to our leaving Singapore. In fact, I think the Dutch came into H Force actually on the Burma Railway. I'm not too clear on that.

Well our trouble started from the beginning because the conveyance was ... the means of conveyance was rice trucks which were totally enclosed with sliding doors - steel - with wooden floors and we were packed into these rice trucks between forty and fifty men altogether. While the train was going along it was not too bad because we could slide back a door and allow air to get it but there wasn't lying room for all the men at any time. So some of us spent most of the ensuing days standing or slumped in a corner. Surprisingly I was able to shave every day, which I did with an open-blade razor, with the train moving along, and as far as I can recall I didn't gash myself unduly. I used this razor right through my whole POW period.

That's unique in another way, Don. I haven't heard anybody else say that.

That's right. I felt it was very important to be well kitted out. In fact this particular notion was ... it paid off. It paid dividends right through my POW period. I maintained that if you had some bright buttons around the place, and I happened to have a nice impressing looking RAAF cap with the insignia on it, it impressed the Japanese. So you were more likely to get an appropriate or an acceptable response from the Jap if he thought that you were somebody up the ladder a little. It's really evidence of the old dictum in the services: bullshit baffles brains. Anyway, I insisted that I had to be kitted out pretty well if I was going to be leading the march in this particular area, then I had to be looking like a leader and shaving was one aspect of it.

I don't recall any great amount of sickness on the trip other than personal discomfort - heat exhaustion and the like. But, basically, apart from ... into current illness and so on, most of the problems were to be experienced later on on the railway largely due to infestations of parasites and malaria and cholera and so on. Probably our worst problem was beri-beri and there was some degree of pellagra also pretty evident. But I think beri-beri was the biggest problem right from the beginning which meant, of course, that these men were going to fall out on the march through cumulative oedema and they were just carrying enormous quantities of fluid which impeded their movements.

The night we arrived at Ban Pong it was quite memorable. We arrived, I should think, about five o'clock or six o'clock in the evening and there was still some daylight. I can recall vividly the stunted trees in Ban Pong with occupants in the shape of vultures leering down at us from the branches as if they were making happy little notes in their notebooks that further along the line they might get a good feed. Well, no doubt some of them did, but it was a rather unsettling experience to see these vultures sitting around waiting for it.

I don't recall that we had any time to sleep at Ban Pong. The train was off-loaded. The baggage carrier was off-loaded also and we were told by the Japanese that we could bring tools, implements and so on, to make our new camps and particularly

gardening tools because we'd be running our own gardens and it all sounded very idyllic. Amongst the baggage I had too Australian hot boxes which were used for - they were insulated lining steel boxes, like big cabin trunks really - and they were designed to carry hot food up to the troops. I was able to acquire these two boxes ... (short interruption) ... yes, the two boxes were very useful to me because when I had been out on a working party in Singapore at a place called Adam Park and later at Siam Road Camp, an Australian AASC, a sergeant and myself had collected some machine guns and when we knew that the working party was going to fold up and we were to go back into Changi, the problem arose as to how to get those guns back into Changi and still hang onto them. The basis of all this was we had hoped to stage an escape from Singapore and various things kept falling in our way. However, the guns found their way back into Changi in the 44-gallon drum of rice stood over by Stracey McKenzie, the sergeant, and were got through the Jap guard in Changi happily enough. And then the problem arose as to how to conceal them with any degree of satisfaction and safety to ourselves. On one occasion the guns were under my bed when a Japanese came in and started searching the place and, again, the bullshit parade thing paid off and he walked off somewhere else.

However, when the parties for going into Thailand were under way it was obvious to me that I would be on that at some subsequent time and there wasn't very much time to mess around.

So the Australian hot boxes seemed to be the answer. And what I did was to remove the zinc lining, which was easily done by removing wood screws around the top, and the lining inside that, in the walls, was compressed cork of quite a reasonable thickness. So, first of all, the Tommy guns - there were two Tommy guns - I dismantled those and set them in the bottom and we had 500 rounds of 303 ammunition for the Tommy guns and I pushed those in and then compressed cork around them. And some of the components of the guns I put up the side walls. And then the lining was slid back into place. The second box held the Bren gun and that had problems because the foresight was a bit prominent and I had to file that off and the stock wouldn't fit. So that had to be discarded and, at any case, the thing was so wide and the clips for it wouldn't fit into the hot box - good name for it! - the hot box wouldn't take the magazine. So I shortened the top of the liner and replaced and that seemed to work all right and so we used what granulated cork was over to fit in so nothing rattled. And, just as final thing, I put the stock loose inside the box. In addition to that we complied with what the Japs had said in as much that we got any old gardening tools, anything at all that looked like tools and put into the hot boxes and they sent on the train up to Thailand.

So far so good. But unfortunately, as I said, we didn't even have time to sleep. By about ten o'clock that night we were on the move and that was the beginning of the horror march up to Thangzun and it was on that march of course that things started to go wrong with health and we lost a number of men on the march. Some just disappeared; obviously wandered off. The vultures followed us and it wasn't a very happy set-up at all.

Thangzun South, of all the camps, I think looked the most

attractive. It was set high up above the river, I should think probably fifty or sixty feet. The road was about fifty or sixty feet above the level of the river. There was a tongue of land which came out with scrub on it. So the road approaching Thangzun campsite had to negotiate the brow of this hill so there was very little land or very little room for manoeuvre beyond that. There was a drop into the river of about sixty feet. Then the road went along a flat piece of ground which was covered with low scrub and there was a spring-feed stream which ran through the centre of it and the Thangzun camp was situated around that stream. So we had good running spring water. There were already some other people there, more notably Tamils who had been impressed from Malaya; another large group of Chinese who I think were Cambodians; and then Dutch from Indonesia, from Java. So we were a fairly international looking mob at that stage.

We set to and put up our own huts, although there were also some other jungle huts there. They were made from giant bamboo. The roof was of Attap and the lashings were of jungle vines and it all seemed to work fairly well. Some of the rooves were subsequently made from giant bamboo - sections of bamboo were chopped up and cupped one into the other like ordinary tiles. So we had a fairly rainproof shelter.

Work started immediately and we went out to work on the railway and our job was initially drilling rock with steel star drills and sledge-hammers. The darg for each day was a metre of rock to be drilled by each team of two. And initially that was fairly hard going because we were ignorant of how to use these things and it was a little risky to life and limb with people unaccustomed to swinging sledge-hammers - they're likely to miss - because the second person in the party had to hold the drill vertical and jump it around half a turn with each strike of the mallet. At the same time a small turban of grass was put around the bottom of the tool to stop water splashing out of the hole. So the second man had to hold the rod vertical, keep this turban of grass, the integrity of it correct, and to dribble water in from time to time. And drilling a metre under those conditions I guess was fairly hard. However, you eventually ... or very quickly learned a few wrinkles as in all jobs and the object of the exercise was to get to the work site first and see if you could find a suitable crack in the rock where you would insert the tool and sometimes you could finish your metre before lunch. In which case the Japs allowed you to go back to camp if you'd finished your metre a day, that was fair enough.

Did that last long, Don, that returning early?

Oh yes. We ... I forget now how long we were there but quite a few weeks - months I suppose.

And they let you return early throughout that period, did that?

Oh yes. The Japs I think were fairly fair-minded in that regard. If they said that this was your particular day's work and you got through it, there was no sense in not adhering to

that. So we had a few pluses. The problems arose of course from a point of view of the general lay-out and the nature of work we were doing. A lot of the men were barefoot and tropical ulcers were an immediate problem. And it was there the problems became multiple and amputations were undertaken by the surgeons to stop the progress of some of the ulcers. Most of them were below-knee amputations but there were some mid-thigh. And it all looked pretty hopeless. And certainly the malarial problem became very apparent. More and more cases were going down with malaria. Men were having xxx every other day and that sort of thing but still going out to work. The Japanese were virtually searching the hospitals for anybody that they thought was fit to work. And, of course, the medical staff were just as anxious that sick men would not go out to work. And it became very obvious that the Japanese weren't interested really in what internal problems the prisoner might have, they were only interested in whether the man had a bandage and if the bandage was on a particular part it was obvious to the Japanese soldier, usually a private, that that man wasn't fit so he would be passed over. But anybody who was not bandaged was considered by them to be fit to work. So some very, very sick people were virtually beaten out to work on the railway.

Were there any Australian medical officers at that camp at that stage?

Yes, yes. We had Kevin Fagin. There was John Diver who was a British MO, a very remarkable and extremely brave man. And another medico I remember was Austin Best who had spent quite some time at Christmas Island amongst other things.

He was British, was he?

Yes. I can't remember the others but ...

Was Dr Higgin there?

No. No, they were a very small force. We did have some assistant surgeons by the way. The British has the Indian Medical Service. In fact I think Colonel Davidson of the Indian Medical Service was in our camp. And there was a Portuguese Indian by the name of [Briganza] who was assistant surgeon. They carried the rank of warrant officer and he was a magnificent man and he was responsible really for the general hygiene of the camp and the digging of slit trenches and so on for latrines was all his business. And later on when the cholera epidemic came through our camp he was instrumental in doing so many things of a practical nature, which I'm sure saved many lives. The other interesting thing is that he carried in his kit a Bell and Howel microscope all the way up the line and of course when we had this cholera problem he was able to identify the vibrio, cholera vibrio, in faeces and was instrumental in being able to pre-empt symptomatology and of course the doctors got moving and refined rock salt through filters and so on and that was used for transfusions to keep up one's body fluids.

Yes, the cholera was a devastating thing. I had again, over a

period that we were there, had got word that one of our hot boxes had arrived at a Dutch camp further down the line and it was within walking distance of our camp. And my informant told me that this Australia hot box was being used by the Dutch in their cookhouse for storing rice. Now, fortunately the Dutch were large well-muscled people because otherwise they must have smelt a rat because this box weighed many times what it should have when it was empty. And, of course, our whole idea was that the Japs wouldn't lift any of this contraband, we would be doing the lifting ourselves and we'd probably get away with it.

However, we decided to go down and collect this hot box for what it was worth, and I didn't know at that stage whether it had the two Tommy guns or whether it held the Bren gun. So an expedition of us set off, four in number, with a large bamboo pole and we stole this from the Dutch cookhouse and trundled up through the whole of that night back to Thangzun South and secreted this box in the jungle and that's where it stayed I think because subsequent to that we ... a lot of the men in the camp went down with cholera and the whole escape notion had to be put on hold.

One of the members of this escape club, if you like, was Jim Morrison, a Malay volunteer. And Jim and I found ourselves on each end of a stretcher because we had an enormous problem being ringed around with Tamil Indians and various others who had very little notion of what the cholera was, all they knew was that people were dying like flies, and it was left to the British and the Australians and the Dutch to organise the whole jolly area, not only our own camps, but these other camps as well. Tamils were not able to look after any hygiene side of things. They used to defecate in the paths, and, of course, our chaps being bare-foot in the main, walked through this excreta and the cholera vibrio prospered in consequence.

Pits had to dug for the disposal of bodies and bamboo was used to incinerate the bodies, so you put in a layer of bodies and a layer of bamboo and set alight to it and so on. And this was a daily occurrence for quite some time. However this little vignette if you like, Jim Morrison and I were on this stretcher party and our job was to go into the Tamil camp area and search for anybody who may have died through the night. And we came to a tent which was empty except for one body. And so I said to Jim, 'I think this is it. We'd better pick up this poor fellow and take him down the jungle path and heave into the inferno'. So we picked up this limp form, and I must admit we didn't really check him out for pulse or anything like that, it didn't occur to us. Everybody was dying around the place, so he was obviously dead. And off we trundled at a jog-trot down this path and we got to within sniffing distance of the crematorium and this fellow sat bolt upright on us in the stretcher, looked wild-eyed around him and shot off for his life through the jungle. We never saw him again. (laughs)

The tragic side of this was of course that within a few days Jim Morrison was dead with cholera and I had contracted the fell disease myself. Fortunately the Japs had given us some anti-cholera injection only a week or less before the cholera came into the camp. Whether it had had any effect or not, there were various opinions on this. Some thought that the

exercise was useless, some thought that it was effective. But in all events I was taken one evening with horrible stomach cramps and vomiting and I tried to get clear of the tent before I delivered either end and wasn't very successful in that. And eventually made my way to the latrine. The latrine was an open pit with bamboo lashed across and on that was a footwalk which was made of one section of bamboo, probably about five inches diameter, another bamboo strategically to put your bottom on and the third one at about shoulder height in front of you to hang onto and that was the method for defecation. The pit of course was a complete cesspool alive with maggots and if you slipped into that, well then, God help you. Well, I was able to make it to the latrine and there I stayed all that night. In the morning they found this strange form frozen onto the bamboo and prised me clear and took me back to the tent where the cholera patients were. And somehow or other I got over that. Only about a week later we found ourselves on the train going up to our second place for work which was a place called Konquita just south of the Thai/Burma border and not far from where the Burma end of the line joined up with the Thai parties.

Anyway, while I'm on this Thangzun South thing, I'd like to tell you about the transfusion which was attempted. Austin Best was a very resourceful chap and very caring. He did everything possible to improve our lot but also to improve the efficacy of their efforts such as they were. And he came up with a notion that if he could get a bamboo needle small enough he should be able to penetrate a vein and carry out a transfusion. And there were a number of cholera problems there requiring - and other problems as well - amputations that had been attempted and men were suffering from loss of blood and so on and needed a boost. Of course we all knew our particular blood group and mine was the universal one AB0, so he asked me, being one of the fit boys - this is before I got cholera - would I like to volunteer to be a donor. And I said, 'Yes, I'll do that'. So the technique was quite simple. He put my body higher than the patient and was also assuming that my blood pressure would be higher than his. The only tubing we had was some red rubber tubing which was rather suspect and of fairly wide bore, and the first attempt he had at this, he didn't have any saline on hand, so it was just a direct link from my arm to the patient. And the inevitable occurred of course, the line clotted, and that was a failure. And about, I think that afternoon, we had another go, and he tried to introduce saline into the system just distal to where the needle went into my arm and that was a failure too. It clotted well before it got to that point. So, unfortunately, the idea of direct transfusion failed on that occasion. I don't know whether it was done anywhere else on the line, but that was a very interesting exercise.

Don, did he have any local anaesthetic to help?

No, no.

So it would be pretty painful having that inserted?

That was ... local anaesthetic was a bit of a problem. If I

can diverge, I think in here, this is not to do with Thangzun South, but many, many years later when I was in charge of amputee services here in South Australia, one of my patients had been - I don't know whether I should name him - but he'd been up the line with Bertie Coates, Sir Herbert Coates, and he had an advanced ulcer which had eaten away most of the calf muscle of his right leg, so much so that according to his description you pass your hand between the tibia and what was left of the calf muscle - it was hanging down like a sling. Anyway, Mr Coates, on his round had spoken to this lad and he said, 'I'm sorry, son, we've got to take that leg off'. And the response was, 'Well, that's all right, Sir, you go ahead because it's no use to me'. I remember this piece of surgery very well, the end result of it, that is. And it was a fairly craggy sort of stump which gave lots of problems, not surprising because the healing of course was by first intention and these things were highly infected and suppurated for months, so that was it. But anyway, this story I think is rather charming because the operating theatre was in the middle of the camp and the operating table was made of crushed bamboo. There was a bucket with a fire under it - a four gallon bucket - for the surgical implements and very little else. And Mr Coates had a talk to young Lloyd and he said, 'Well, look, I'm sorry, son' he said, 'I haven't got any anaesthetic'. He said, 'I've got a cigar here'. Now cigars of course were gold, where the hell he'd got this cigar from I don't know and how long he'd had it is unrecorded but, anyway, he had this cigar and he lit it up and he gave it to Lloyd and he said, 'Bite on this'. So I said, 'Well, what happened then' and Lloyd said, 'Well look, they went to work and I lost interest in the proceedings'. And I said, 'Well, do you know what happened to the cigar?' and he said, 'But I think the old bastard went on and smoked it afterwards'.

As you say, it would be priceless.

I thought I could get through that one but, never mind. But those were the sorts of things which I think pepper all the experiences of prisoners of war on the railway. This was amputation of the type that would have happened in Nelson's day except we didn't have a bucket of tar to put the stump in. But those are the sorts of things. Cerebral malaria was another problem. I don't remember us having any problems in Thangzun but certainly at Konquita up on the higher reaches of the river we had ...

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START OF TAPE ONE - SIDE B

... higher reaches of the river we had enormous problems with malaria. I remember one case of a poor fellow who was dying of malaria and was completely raving and had to be tied down to this bamboo chung, just a skeleton which was still with some life in it really, and totally disoriented and not aware really of his surroundings. And we remember very vividly his problems. He was only a few feet away really and night after night his ravings punctuated everything that ...

This is the second reel of the interview with Dr Don Dowey.

Going back to our friend Lloyd, the amputee, that we were talking about earlier is simply to illustrate perhaps the way these men managed, and I mean managed, in the post-war period.

This patient of mine was a demonstrator in the Institute of Technology which was the old School of Mines in South Australia and had no car but he had a motor bike. And you might wonder how on earth a man with an above-knee amputation, wearing a prosthesis, could ride a motor bike. Well his solution to this particular dilemma was to fasten a U-shaped piece of steel to the right hand front fork of the front wheel which was just right when he was sitting on the saddle of his motor bike the heel of the prosthesis rested in this stirrup. I've never worked out how it was that he was able to turn corners but he managed all right with this thing and he used to drive this wretched motor bike through the city and was a frequent caller at the limb fitting services where I was and as far as I'm aware never came off or had any mishap whatsoever. Why he wasn't arrested I don't know but that was his mode of transport.

Right. Well, leave it there.

I think just before we leave Thangzun South I should say a little about scabies. The environs of Thangzun were really rather beautiful. The hills were quite a noble backdrop with quite large trees, jungle trees, and giant bamboo. And there was always an accompaniment, in the evening, of crickets singing away happily. And I remember on one occasions the butterflies of practically every description, millions of them, of various types, colours, were fluttering around and this utterly silent flight with the backdrop of the hills and the sound of running water from the spring where the camps were, it was quite wonderful. The creek that Thangzun camp was around was set up around was a very strong flowing stream which originated about a quarter of a mile upstream from where the camp was. The water tumbled out of an enormous hole in the hill - it is the only way I can describe it - and fell down this small waterfall into a large pool. In fact we used to go up there and bath and get clean. But one of the problems that beset us very early in the piece was scabies and of course these little creatures get into the flexures, particularly the figures and toes, and set up sores, itching and so on. And the treatment for this was to get a scrubbing brush if you could and scrub these areas and let the water flow over it to cleanse the skin and that was about the only treatment we had. There was some sulphur in the camp and a sort of preparation rather like Woodfield's ointment was made up and this seemed to help.

So you had the two tools, one was scrubbing and the other, ointment if you were lucky. But it was a rather humorous situation if you can visualise it, with this stream having broadened out about twenty feet across rippling over pebbles with a maximum depth of about eighteen inches with about forty or fifty naked forms, like flamingoes standing on one leg and then on the other scrubbing vigorously trying to get through to these bloody scabies. (laughs) But at least the water was clean but even that was suspect after the cholera came.

Now, I could leave Thangzun I think and go on the march up the line. I was wrong earlier, I said we went up in carriages, but of course the railway had not been opened at that stage. The rails had been set at Thangzun South but there was very little work having been done upstream from there, up along the River Kwai. So there was still a lot of basic bridge building to be done and cuttings to be made. And we marched all that distance from Thangzun up to Konquita which was about only a few kilometres south of the Thai border. And that was really tough going. We lost a lot of men there. As you can imagine boots were at a premium. Some had no boots. We had footwear from motorcar tyres with a thong through the big toe - between the big toe and the next - and I guess about fifty to sixty per cent of the workforce were managing in that way. Some were still barefoot and some still had footwear.

But I can remember on the march, I was still nominally with the British battalion remnant, there was an occasion there one morning where we rounded a bend in the river and there was a corpse. The only thing that we could see of the corpse was a pair of boots. This poor fellow had just sort of moved off the side of the track and had died where he was and he had been there for some time from my estimate of it. However one of the Leicestershire boys saw this, he had no boots, so he just took those boots, washed them out in the stream and put them on. It was just like that as if he'd gone into a boot shop and bought a pair of boots, and the contents were easy to wash out. So that is the sort of thing that happened. There were stories, and true stories, of men who were dying, it was known that they would not survive and in the morning they would be found naked on their chung; nothing left. And I think that's fair enough.

That's right for survival, wasn't it?

That's right. You learn your lessons there. But, anyway, this particular one was one which ... And then shortly after that there was a monstrous hill that we had to climb. By the way, we had chlorine tablets which were supplied to us from the medicos. I presume they carried all this stuff up from Singapore, and most of us still had a water bottle and the chlorine tablets were used on the march up to obviate against any contamination in the water supply. But most of the water that we got wasn't from the river, it was from springs. It's interesting that that country is limestone country and there are a lot of caves there - areas where there'd been faults and obviously the dome of a cave had fallen in. But, anyway, shortly after that little episode we had this hill that we had to climb and the only way you could do it was hand over hand, grabbing onto bamboos and hoisting yourself up. And I was carrying a fairly heavy pack with actually two normal haversacks, one on my chest and one on my back, and I found this was a great advantage because if you were marching with a haversack on your back you were marching doubled over and I found that my back couldn't take that, so I equally distributed the load in front and behind and I had four Bren pouches, two each side, which kept the two packs apart and allowed air circulation, so altogether it was a good idea and one was able to keep one's balance.

Well, you were more susceptible to problems than most I guess because of your ...

Well, that's right. I didn't know it at the time but I knew I'd had some injuries but I didn't realise the extent of the injuries until I came home to Australia and it was about two years afterwards that I had an x-ray of my spine and showed up these fracture sites.

I didn't realise there'd been the delay in ...

Oh yes, I had no medical treatment at all and didn't think of it.

No, I realise that, but I mean as soon as the war was over I thought you would have been x-rayed.

No. I wanted to get home and start my medical studies and I shot through like a Bondi tram. So it wasn't until ill-health caught up with me that they said, 'Are, gotcher'. And so I went into Daws Road Hospital with duodenal ulcers and what have you and the usual anxiety stage problems and I had this rye neck. And Stanous Gunning, I don't know if you knew him, he was an orthopaedic surgeon, Norm Gunning, he'd been a blacksmith on his early days and was in the First World War. He did medicine after the war. And he was asked to come and have a look at this strange bod that was sitting up in bed with a duodenal ulcer and a rye neck. And he said, 'How long have you had this problem?', and I said, 'Oh well, since I ran out of altitude in December 8th, 1941'. And he said, 'Well, did you have medical treatment?', and I said, 'No'. So they took some x-rays and this is how it all started. And it turned out that I had a [subluxation] of C5 on 6 and had been having a problem with my neck tending to lock a little bit and pains down my arms and so on. So he said, 'Well, what about manipulating this under a general?', so he put me under a general anaesthetic and fixed that one, which was great. I could just about sit in bed and read my chart by turning my head around behind the bed - I had a very good range of motion. And I had further fractures down in my dorsal region and down in my lumbar spine.

It would be relevant maybe if you just tell me a little about the actual cause for the back problem, when the aircraft went down. What happened?

We were on ... this was on the first day of the attack of the Japanese on Kota Baharu which was really the opening rounds of the Pacific war preceding of course the attack on Pearl Harbor by about two and a half hours on corrected time. And the Japs put in a landing at Kota Baharu rather like the old Gallipoli style sea-borne assault. The foreshore was protected at a battalion or a couple of battalions I think of [Dogra] State forces and they were positioned in pillboxes along the beach and it was our job to take off from the aerodrome which was almost within rifle distance of the shore - it was very close - and go out and try and sink the shipping and generally terrorise the landing barges and anything else that we could

see. But the assault started at about half past one in the morning and we were in the air almost immediately and it was very very short business to take off, do a circuit out over the ships, select your target, drop your bombs and come back. And I don't know how long but I know I landed back after the first sortie with a cigarette in my mouth that I'd lit up before I'd taken off, to give you some idea of the quite rotation.

We stood around for a while and bombed up and there was a bit of debriefing went on and I think we were the second sortie off the ground that morning and then I think we were the tenth again on the second shot. And we sent out, we took a swing out to sea. The weather at the time was rather troublesome, there was patchy rain, quite heavy rain, low cloud which was drifting over the sky and occasionally the moon would come out and light things up, so you could see a bit of detail but apart from that it was pretty miserable. And yet there were two alternatives:

either it was high level attack where you would fly over your target with a bomb site and take a bead on the ship; or, what was known as mast-head and this was a sort of kamikaze-type thing where you got down as close to the water as you dared and approach the target on full throttle and weaving at the same time. The idea of that was, of course, to try to get down below any armaments that the Japs might have on the deck of the ships and hope that you got through. And you'd skip bomb. The bombs would be jettisoned and because of the small drop, something like ten or fifteen feet, they hadn't nosed down at that stage, they still have a forward thrust, and the idea was that this would get in through the plating of the ships and blow them up. Very good in theory but doing it in practice was a bit hairy. Anyway, our second trip we went out to sea a bit further and didn't take on anything. There were three or four transport in a line astern and we found quite a sizeable ship which was out beyond that point and decided to have a go at it and it turned out to be a cruiser. And I think that's where we came unstuck because I've never seen so much tracer and flak in my life. The stuff was floating up past our ear holes and I thought, you know, 'Any minute now this is it'. Anyway, we got through and onto the other side and I think we must have got back to the area between the transports and the shore. I can remember doing a bit of side gun work and then the captain of the aircraft, John Ramshore, said that he had lost control. And I don't remember very much after that. We pitched into the drink. I suppose we would have been doing about 150-160 knots.

So you really hit ...

The aircraft just disintegrated.

It was not a controlled ditching.

No, not really. It was an attempt at a control but it's very difficult ...

You really flew in here.

... with retrograde amnesia I was out to it for quite some time. And the only thing that held me up was the Mae West which had survived. And I think I'd gone through the perspex

roof and I think Ramshore had too because he was alive after the crash but I didn't get any responses from him. I came to probably half an hour or three quarters of an hour later - but that's only guess work - and I called out and he responded and shortly after that I didn't get any response, so I think he must have died. And I never saw the other two crew so I was on my own.

You were the only survivor.

Yes.

And how did you get back to shore by the way?

Oh, well, I drifted in and out of the battle zone.

Oh, that's what I was wondering.

There was a current and the wind took me south and there's a group of island south of Kota Baharu called the xxx Islands and I thought, 'Wacko, I'll be right. If I can get down there at least there may be some Malays or somebody on the island. I might be able to get away'. But at that stage I had temporarily, thank goodness, lost the use of my legs and my arms. My hands weren't doing what I wanted them to do and so all I could hope for was to be drifted ashore and hope that eventually something would come good. At that stage I didn't know anything about spinal shock or anything like that but undoubtedly that was the problem amongst others. And I had a lot of burns on my back which I didn't know about at that time.

So I drifted out of the battle zone and then the wind changed and the tide changed and I drifted back through the whole jolly shooting match again until I got north of the general combat area opposite the mouth of the [Kolanton] River which at that time was in spate; there was a lot of rubbish coming out. The whole delta area was muddy. And out of the corner of my eye I spotted this Malay prow and at that stage I was starting to come good. I could move my legs and my breathing was easier and I thought, 'Well, this is the only chance I'm ever going to get. Here's a nine foot boat with nobody in it' and I worked out an interception on it and was able to grab the gunnel and this is how things turn out, you know. When we were up there we used to hire or buy canoes from the Malays for a certain sum and when they thought you'd had it long enough for the money provided they'd come along in the night and steal it and you'd have to go down to the campon there and get another one and that went on. But they were very difficult little craft to sit up, they had very little bilge so they were very tricky to sit up and we got very expert at getting into these things without them coming unstuck and filling with water. And it was that sort of training in play which stood me in good stead out there in the drink because I was able to get into this thing. I finished up lying down face-down and I don't remember any more really for quite some time until I found myself in that position and I thought, 'Well, you silly bastard, you should be sitting up looking where you're going instead of lying face-down in the xxx'. So I was able to manoeuvre myself around and sat up and it was then that I could see that I'd already drifted a long way out to sea. Judging from the horizon I

would think I was about seven or eight miles out and no bloody show of getting in, no paddles, and I was picked up the following night when the Japs came down with a supporting flotilla of boats and I was able to make my presence known.

And you were actually the first RAAF member to become a prisoner of the Japs.

Mmm, I think I was the first prisoner of the Japs.

Bonfield says this is so.

There was one chap who was fairly close on my heels and that was John Close who was a lieutenant in the Royal Artillery and he was in charge of the anti-aircraft battery on the aerodrome and he was picked up very early in the piece too. He'd only just arrived a few days before and didn't know his way around the place and they found old John trying to contact his end of the works and tied him up to a tree while they got on with the war. And a couple of days later they came back and got him and he was flown to Saigon. And, of course, we went by ship from where I was. I was taken from Kota Baharu off a sea route by the navy and they took me to Singora and then I was handed over at Singora to the Japanese Army and they put us in the local Thai gaol for a couple of months.

Oh, that was the beginning of the episode you told me about.

This was the beginning of the incarceration and the Navy were damn good by the way. They looked after you.

But you had no medical attention all the same, is that right?

Not from a western point of view, no. The only attention I got was for my burns which were very troublesome. I was a bit like a piece of raw meat from my shoulders down to my buttocks and it was very very painful and I couldn't lie on my back. And the medical orderly on this small coal-burning boat which only had one gun up front was whistled up by the young lieutenant and he came back with a large bottle. And it was indicated to me that it would be a good idea if I bent over, so I obliged, and he poured neat spiritus iodine across this raw back, like a piece of raw beef, and I lost interest in proceedings. That was the medical treatment I got.

Yes, well, as I said earlier, shortly after this poor fellow was found and his boots were taken by one of the Leicestershires we came on further evidence of the cholera problem. There was a young chap by the name of Selby - in fact, in my own mind I've labelled this enormous hill Selby Hill - and he was perfectly well that morning, as far as I could see, and by lunchtime he was dead of cholera. And it really shook me. I thought, you know, this is a pretty nasty organism but this boy had died just there in front of us. So I christened this monstrous hill that we had to go up hand over hand Selby Hill in memory of him. It was quite a pretty place as some of the places were, a lovely wide pebbly stream, clear

water - I've never seen water so crystal clear. But those are the sorts of things that happened: a man was alive one minute, perfectly well, laughing and joking, and at the end of the day, dead.

So we were all getting a little bit near the end of the string. There wasn't so much malnutrition at that stage but, as I said to you earlier, at Thangzun South was had quite a lot of fresh meat through rustling Thai cattle with the connivance of the Japanese. So we all did very well out of it.

Do you want to elaborate on that a little?

What do you mean? By the connivance? Well, we had a very cooperative [goonso] or sergeant who thought it would be nice to fill his tummy too. And we had a lot of Queenslanders who were experts at managing cattle and the cattle we had up there of course were fairly small, they were typical Indian humped cattle, and Thangzun was an ideal place because the hills which surrounded us went right out to the edge of the river so the road there was just a narrow D-file with a straight drop down to the river on one side so the cattle couldn't escape. And the Thais were usually only two in number: one took up the rear and one took up the lead, so in between was our pickings.

And these Queenslanders were very quick off the mark and we all soon learnt how to throw a beast. What you did was you ran along with it and reached up under its neck to the opposite horn and pulled it down and they went down straight away. And there were gentlemen there waiting with long knives and despatched them. It was all rather gruesome but at least we had a very good arsenal.

Anyway, later on, we got all this organised with the help of our Japanese guards and made a corral and at one stage we had up to eleven or twelve head of cattle, all nicely stashed away up the valley.

And they were poached. They should have been going further up the valley.

Yes, they should have been going up to the Japanese Army. In fact they went into our tummies. I don't think that the march up to Konquita was any more remarkable than the rest of it. I can't think of any specific incidents that occurred which are worth recording. The camp we were in at Konquita was on the bend of the river. There was quite a large, very deep whirlpool which was part of the river system and I remember a broad sandy beach. There were quite a few elephants up there that were helping out with the gathering of jungle timber and bringing it down to a common yard where we used to adze the timbers for bridge building.

Now whereas at Thangzun South we'd been engaged in road building and making cuttings and so on and filling in valleys, at Konquita we were actually building bridges. And the Jap lieutenant who was the engineer in charge of all this was one Lieutenant [Shumitzu] who was a very pleasant man and one who I had high regard for and would have, had circumstances been otherwise, would have been proud to have had as a friend. He

was out of the general running of the Nips. He, in my estimation anyway, he had a wide appreciation of things and I think what helped of course was a good command of English which he had. So we used to talk about things and we got on with the job. But the problem arose at Konquita when the labour groups that had been making a cutting through the hill completed their particular darg and we were nearing the completion of our little bridge across a narrow gully which would have been about eighty feet across I suppose and about thirty or forty feet deep and there was our bridge sitting up at least a metre, almost exactly a metre above the floor of the cutting. And it was fairly evident that Shumitzu had made a blue in his calculations, or some surveyor had - which is more likely - and Shumitzu had carried out these instructions and had made the bridge and when the whole thing was completed there we are sitting up a metre. So I said, 'What the hell are we going to do now?'. And he looked very embarrassed and I could see losing face was setting in at a great rate and he got very serious and he said, 'Well, look, you're not going to like this but we are on a very tight schedule. The railway line has to link up at a certain date. Preparations have been made. There's some big people going to come up here and it's just up the line there and here's our bridge sitting up. We've got to lower it'. And I said, 'Well, how do you expect to go about that?'. He said, 'Well, I have done this once before in Manchuria, we had a similar problem, and all we need to do is get some lifting gear' - namely two differential pulleys, chain pulleys - 'and get some more logs out of the jungle, set up sheer legs each side to take the weight and then cut a metre off the vertical supports'. This was a two stage bridge so you had a trestle and then another trestle above that bearing the rails.

He was going to tilt the bridge, was he?

No, lift it from each side.

Oh right, but still keep it horizontal.

Each stage you set the differential pulleys and you take the stress on the chain blocks. Then a work crew would get underneath and cut off the legs and presumably reslot them. So it was virtually tongue and mortars.

Yes, extraordinary!

And then you let it down. And there were two stages of this little bridge so he reckoned he could do it that way. And I said, 'Not on my life, boy. You're not going to get any of my blokes down there. No way. I'm responsible'.

You were game standing out.

Well I had to. He got very ropable about this which was understandable. And I said, 'No, no way. You can shoot me. You can do what you bloody well like but none of these blokes are going under there. It's not on. It'll collapse'. So he went to work anyway and they took the strain and of course this thing started to lean and I stood my ground and he called a

halt in the proceedings and lined us all up. I suppose there must have been thirty or more POWs. And I thought, 'Oh God, what's coming now'. And he was only a little chap and I don't think his heart was in it anyway but he had to go through the motions and he went along and systematically slapped all our faces and I was last on the line and by the time he got to me he was a bit tired, you know, he was a bit fed up with the whole bloody business and I think he was more concerned with getting on with the bridge building. So I stood my ground; I'd had my face slapped; he'd saved his face to a certain extent without hurting mine, so he went to work. And he called for volunteers. So, again, I lectured the two or three blokes who volunteered and said, 'Look, it's on your own heads', which was one way of putting it. Well, shortly after that there was a rumble and a crumple and a lot of dust and so on and this thing collapsed ...

Completely ...

... and one side went down and the whole bloody lot went over like a pack of cards. So victory for me. I won round one, you see. And our blokes wormed out from the twisted timber and dust and stuff that was flowing around and the only bloke that got any injury at all was a monstrous little Japanese guard who depended on glasses for sight and his glasses were broken in the process and he was out of the action too. So I thought, 'Well, wacko, we've won two rounds here'. However, that's all we did win because it was all men back to camp, so we all had to march off back to camp. And we stayed around there for most of the morning from memory while Shumitsu went in next door losing more face to an engineering unit which wasn't anything to do with him. In fact, I think he'd got his differential pulleys from there too. So he was in deep trouble poor old Shumitsu. Anyway, he borrowed from the same unit some acetylene flares - great big things - they would have been about ten to twelve feet high with a great big acetylene tank and we trundled all these things out to the bridge site again and we worked on that for forty-eight hours without cease. I've never been so tired in all my life. You know, my eyes were hanging out like orbit stops ... all the other chaps too, but at least it was safe work and we pulled this thing to pieces, which we should have done in the first place, and we cut the prescribed amount off, set it up again and it all went together. And I gather that the linking up ceremony further up the line went ahead without hitch. But it was a very interesting period I must say.

On this matter of POW experiences it has always interested me, having done medical training subsequent to the war, how the experiences effected people differently and I think very vital importance, fundamental importance, of assessing not only those anecdotal situations but realising that all ex-prisoners of war have an ongoing anxiety problem. And the two that come to mind: one was an East Surry officer in the early part of the POW period who seemed to be totally incapable of accepting the fact that he was a prisoner of war, that life was going to be different, and that he had to assimilate that fact but also assimilate different sorts of foods. And he refused to eat rice. This seemed to be a minor thing at the beginning because

there was still bread available. And strangely enough there were still people around the place who were able to sign cheques and so on and take IOUs and this fellow virtually bankrupted himself while he was a prisoner and still alive to buy bread rolls which were still available. And although we pointed out to poor old Richard that the bread rolls were at that stage fifty per cent rice anyway, he still would not eat a bowl of rice. And anything that had rice grains in it or boiled rice or any other sort of rice - and we were making our own rice bread by milling it, by rolling the grains with bottles until we got a flour and then we could make some bread - and Richard wouldn't eat that. Eventually he faded away and died of anorexia and starved himself to death. Now that's an incredible story really, and he was a man - this was only very early into the period of POW condition, only a matter of months.

And why would he not eat rice?

Because he'd made up his mind that he wasn't going to bloody well eat the sort of food that they ate.

Really.

And that was all there was to it. But the other one that comes to mind is I think very indicative of the type of personality that somehow equates in my mind in post-war experience with alcoholics. Most alcoholics are, or appear to be very personable people, they are friendly, easy to get on with, nice people; you like them. And this man was a very similar man. He was a Queenslander in the AIF and I met him in Changi in Adam Park on a working party and he had come up with the officer party which came up subsequent to H Force. They came up as a separate group and then moved in with us and of course they had a chip on their shoulder and a very big problem that the Japanese were putting officers to work on the railway like coolies and no concessions given for officer status and quite a lot of them went to the wall because they couldn't accept that as a temporary hick-up in their experience. And you talk about Japanese losing face, well, these blokes lost face too. But, anyway, this bloke, Lenny, was in Changi in Adam Park. He was the life and sole of the party, wonderful sense of humour, [ale] fellow well met. And during part of my time on the railway, again when we were still at Thangzun South, a Japanese had asked me ... in fact, directed me to go up the line to Hintock because that was the area where the pay was dished out.

We were paid for our labour. And it wasn't very much but they trusted me with this pay bag because they were short-handed themselves and they wanted somebody to go up the line and collect this money. And on the way to Hintock was a place called Death Valley and Lenny was part of the group there. And I was absolutely shocked. I saw him sitting on his own in the middle of this camp. The camp was deserted and the rest of the mob were out on the railway. It was a monstrous place. Every night when they came back there was virtually a grave-digging party that would, on average, bury seven or eight people. The way you got onto the railway, which was bordering the river at that stage, you had to climb up a cliff face with hand holes and bamboos stuck in corners and that sort of thing to get to

the top of it and then it was a gentle slope down to the river. So there was an awful feeling of claustrophobia in this camp. But here was poor old Lenny not recognising me, totally out of keeping with his previous character. And he faded away much the same as Richard had. Just lost that will and it seemed to me that it's also a part of a person's make-up. I don't think he had that much of a chance anyway. Some survive, but some don't.

When you gave that analogy with alcoholism, and I was thinking of course of xxx syndrome cycle, did some people become aggressive, sort of spontaneously aggressive in a way?

Oh, I think we had our blow-up periods, yes, but not to a great degree. I think that the leveller there was malnutrition and you didn't exercise yourself unduly. If you went from A to B, you worked out in your mind first how much energy it was going to need, then you'd cut that in half before you started moving. You never saw anybody running in Changi. It didn't happen. So, you know, the whole thing was related to the quantum of energy that you had in you and that you were able to expend.

So people were fairly placid in a sense who otherwise may not have been?

In the main I think, yes. Or outwardly accepting of their lot although inwardly they may have been fuming. And that, of course, is another stress. But the anxiety state is undoubtedly a permanent state of affairs and, as I said to you earlier, whether it's recognised by the individual or not, it exists and you can't get rid of it. It's like the old man of the sea in Sinbad the Sailor.

What is that?

The old man of the sea was on Sinbad's back and he couldn't get him off. Well, that's like an anxiety state. Even though you think that you've got control of things, he'll tap you on the shoulder and say, 'Wait for me, chum. I'm here' and it colours everything that you do. It's very interesting.

Yes. And you'd compare that of course with civilian rehabilitation where they ...

Well, I've had a lot to do with rehabilitation. I suppose I was Mr Rehabilitation in this State for years - [twenty] years. I've had a pretty wide experience of that. That's why I sort of learn lessons from this and put it into my medical practice.

And would you feel that there was a greater incidence from the POW trauma than from civilian trauma then? Or, not a greater incidence but a different sort of incidence, put it that way?

Certainly I think there's a total incidence of the anxiety states amongst ex-prisoners of war whether they admit it or not.

END OF TAPE ONE - SIDE B

START OF TAPE TWO - SIDE A

Yes, you made that statement.

With the civilian population of course you don't know what traumas that person has been through. To a degree the ex-prisoner of war is easy because you can label it and say, 'Well, he was up there. We know that that happened and therefore he must be affected in this way and that way'. But when you're dealing with civilian problems you don't know those things and you rely very heavily on getting a sound history of course as you should in all medical matters and surgical matters. But ... so it's not strictly comparable but I think having been through that particular melting pot is an incredible advantage. It's a privilege in a sense to have survived, to be able to come back because it gives you the capacity, John, to cut the corners. You'll find that the person who hasn't got any experience and who has only got book learning will bullshit for hours and you can come into the room and say, 'Look, but what about so-and-so?', and somehow or other you peel the whole bloody lot apart and you get quite down to the pith of it.

But I guess that's the same with experience in any facet.

This is tape three of the interview with Dr Dowey. Dr Dowey will now talk about some of the medical personalities that he has known, both medical officers and auxiliary staff and hopefully he'll cover the period both during the war and since when he was a medical student at the University of Adelaide and, of course, a graduate practising in South Australia.

That's right. We were talking earlier, John, about Alan Hobbs and Syd Kranz. Both of these doctors were on F Force on the Burma Railway and I met both by chance when a section of F Force was passing up the line through our camp at Konquita. So it was only a short few minutes really to say hello and that was my only contact with both those doctors on the railway. There was another bloke in F Force who was a famous cricketer and I can't think of his name.

Oh, Ben ...

Ben Barnett. That's right. And I had a word with him.

He was so well-known. Can you remember much about him?

No. He was a fairly pleasant enough sort of [genk] and we sort of shook hands and he looked a bit surprised to see an air force type wandering around on the Burma Railway because there weren't too many air force pilots. And so I think this is what singled me out. And we sort of fell on each other's shoulders and they passed on into the next phase. But I did have a lot of contacts with Dr Hobbs, Dr Kranz as a student in early 1950s at the University of Adelaide and the Adelaide Hospital and I've discovered both of them as very kindly and very staunch

friends. The fact that I'd been a prisoner of war I think figured largely in their minds and it certainly went well with me in my final examinations and thereby hangs a tale.

About a week before the final written papers - we used to do a week of written papers in those days and then there was a three or four-week period of viva examinations following. Quite a good system if you were strong enough. But, as luck would have it, I arrived at the hospital for a ward round one morning having ridden my motor bike from Crafers, which is down the Hills Road, and I felt every bump in that road and when I arrived I realised that I had some mischief in my abdomen and presented myself to the honourary and he said, 'We'd better put you on the table and examine you on the couch', so that was done. And with a little bit of prodding he said, 'What's the time now? Have you had anything to eat this morning?', I said, 'Well, I had quite a reasonable breakfast'. And he said, 'Well, don't touch another thing and we'll have you on the table by one o'clock', and I had an acute appendix. So that put me away and I was denied any textbooks. The surgeon incidentally was Rupert McGarrie, Sir Rupert McGarrie, and he was an expert at passing exams. The examination technique was one of his things. And he denied me any textbooks while I was in the hospital. I was up in casualty ward and he told Sister that if anything looking like a textbook should float in in my presence get rid of it. So I gave up after about twenty-four hours of this and started reading penny-dreadfuls. And it was the soundest advice that I've been given by any medico ever because by the time I'd finished this stint in hospital it was time to go and sit my written papers. And one paper each morning and one in the afternoon for six days and I was as fresh as a daisy and all the work that I would have done in that last week would have been useless anyway.

So there I was sort of just out of hospital and then we proceeded to the viva section of the exams for the next three or four weeks. When it came to the surgical vivas the top part of the outpatients department was taken over - the casualty section - and various bodies were brought in for the occasion, there were also other patients who happened to be in hospital, if they thought they'd be interesting from a medical point of view. There was some old standard cases there as well. And the Director of Medical Studies was Sir [Philip Messent] at that time. So I presented myself at the doorway of Sturt Ward I think it was and on the right was a curtained area, or down both sides of the ward were curtained areas you see. Sir Philip Messent was on the left hand side and on the right was Doctors Hobbs and Kranz in the same cubicle. And Kranz's forefinger of his right hand is beckoning me to go over there. And I'm looking over at Sir Philip Messent and thinking, you know, he's the senior one in the pack, do I take a nod from him or what. And they were getting a bit restive about this so I thought, 'Well, I'll go in that direction'. So away I went and the curtain was immediately drawn across. There was no patient there at all and the conversation was very pleasant. They said, 'How are you getting on? Have you been enjoying your course?', and all this sort of palaver, and time was ticking by. And I thought, 'Goodness me, this is a funny sort of viva'. And then Alan Hobbs looked at Kranz and he said, 'I

think we'd better ask him a question or two, don't you?'.
(laughs) So, yes, they asked me a question or two. I couldn't remember what they were. But anyway, that seemed to satisfy their honour and my examination. So I sort of teeted out of there and ran into the arms of Sir Philip Messent who had a very suspicious looking client in his bed. So he said, 'Look, you've got five minutes to do a quite examination and I'll be back'. So I did a certain amount of braille over this poor person, it was a male patient, and he came back. And he came back, and he said, 'Well, tell me what you've found', and I did a quick catechism of things to show him that (a) I'd been thorough and then he said, 'What do you think?'. And I took a hell of a leap here and I said - in the dark I think too largely - but I said, 'I don't think this is a surgical case, Sir, it's a medical case'. 'Oh, why do you think so?'. I told him why I thought it was a medical case and not a surgical case and he didn't give me an answer. But I found out subsequently that it was: it was a ring-in.

And then the third station, there was another forefinger beckoning me and it was Sir Rupert McGarrie (laughs) who had a patient that he particularly wanted me to see and he'd pulled my appendix out the week before. (laughs) So I did very well in my surgical vivas.

That was one thing about Alan Hobbs, I met him again during the surgical exams in one of the wards and I remember very plainly he asked me what the distinction between a thrombo fibritous and a flebo thrombosis which was very simple really but I was able to tell him that. But I think, you know, with both those teachers they were superb men and no doubt there experiences on the railway counted for a hell of a lot. The problem was of course Alan had his voice problems later on and was having problems even then and eventually had to drop out of the actual practice of the surgery because of it. And then, of course, poor old Syd died of a heart problem.

And obviously they'd be very humane, very practical examiners ... or human I should say.

Yes. Extremely human and they didn't mess around with things. In fact, Kranz used to lecture us in general surgery and so on, largely abdominal stuff and he used to maintain that the ... you know the ladder pattern that you get in bowel [interception] or whatever gas levels, you get a step ladder effect, he always used to say, 'That was Kranz's sign'. I don't know whether his claims to discovering that were right or not.

And Don, what was Mr Kranz like as a person?

I didn't run in against him that much but one usually heard him from afar down a passage or in a exam room or whatever. He had a very stentorian voice. He used to frighten the pants off nursing sisters and that sort of thing. But, no, his bark was much worse than his bite. I met him also on a number occasions immediately post-war when he was working with the repatriation commission and that was the time when they were sort of calling in ex-prisoners of war on a routine basis just to make sure

that they'd picked up all the relevant necessities in a sort of drag-net arrangement. And I remember Syd being more than helpful and he took the view that, well, if you're a prisoner of war you had all these problems anyway, so why not put them on the list. And any back pedalling on your part was very smartly put down. 'Listen, son, I'm putting that on the list. You may not have it now but you could come up with it later', you know, and that was his attitude and I think it was correct.

It's a pity a lot more didn't do it.

Yes, indeed, yes. No, he was a very loveable man, very loveable indeed. Do you want the story about the nursing sister?

Yes, my word.

This is a little story about Syd Kranz when he was ... he used to be very ... liked to run a fairly tight ship during operations and the nursing sister who was helping him wasn't known to him as one of the regulars. And during this operation she was saying, 'Yes, Doctor. Thank you, Doctor', and Kranz put up with this as long as he could and he couldn't stand it any longer and he said, 'Mister, Nurse. Mister, please'. She replied to him, 'Sister, Mister'.

No. What I was going to say about Syd Kranz was in his teaching he brought back all the time with great force this need to make surgery or medicine or whatever branch of medicine you go into to make your medicine, not somebody else's medicine or quoting somebody from a textbook or somebody else's manoeuvre. Surgery is full of it and unfortunately it seems to mesmerise some people and they never rise above this bookishness and so they never become their own person in relation to that. And the result of that is that he used to maintain the surgical procedures become virtually laid down law when in fact they shouldn't be and they unnecessarily perhaps complicate the area of surgery where people feel that they're not really being good in this particular area unless they've got a whole paraphernalia of things to back them up, whereas this man knew of course that you can manage with very little and get away with it. If you know your anatomy, you know your pathology and you've got the skill in your finger tips and I think this was the message that I learnt from Syd Kranz and that was a great help - a great help.

Come back to fundamentals.

Yes.

And how about Mr Hobbs as a person, what was he like?

He was a very quiet and steady man. He was a very good general surgeon, meticulous, very kindly. Did an immense amount of homework with his patients visited and was never seen to be in a hurry. And when an operation was in progress he had a very quietly, I suppose the general feeling of caring in the whole process. In other words he was sufficiently competent as a surgeon, again, not to be doing somebody or others procedure

and asking you questions about that particular thing. He was there because he was competent and knew how to go down to the shop and buy a pound of butter. He didn't want to know the street name. You know, that sort of familiarity. And a very, very competent surgeon in my book. It was a great shame that he wasn't able to go on much longer than he did.

Well those two, Norman Eadie I didn't know very well. I only met him at POW officer reunions.

Maybe if you could describe what you can remember of him?

Well, he was another one, a very quiet sort of bloke. He wouldn't set the Thames on fire. Very pleasant. But, no, I didn't have that much to do with him.

He was an older person of course.

Much older person than me and I just ...

He'd been an engineer ... Sorry, for interrupting.

Go on.

I was going to say, before he did medicine he'd been an engineer for six years.

Had he?

He'd been a First World War gunner. So he's no chicken ...

Well, that's right. There were quite a number like that in that particular bracket who were First War blokes. Came out and went on and did medicine. I had one on my honorary visiting list at St Margarets with I was in charge of social security at Rehab. Eric Swan, he was a First War bloke.

Now, Roy Mills, I can say much about Roy. He was also on F Force. Our paths didn't meet until ... well, we met early on in Changi and I tried to teach him chess and he tried to teach me differential calculus and I don't think either of us won. But I've always had a very high regard for Roy Mills. He was very friendly, almost a florid sort of character in the sense of almost like a farmer. You would think he'd be a farmer not a doctor. But, again, usually you find in big men like that that they're gentle people and I took to Roy very much and I think we had a very pleasant friendship but I didn't know anything of his doings on the railway but I've met him since. I gather he's done very well in chest work in ...

In Newcastle.

Newcastle, yes. Kevin Fagin, of the medical people that I knew Kevin is the only one who's ever slammed a knife into me.

Perhaps if you tell us about that.

That wasn't on the railway but that was after we came off the

railway and the ex-prisoners of war were then assembled in a place called Siam Road, Siam Road Camp, which had been an RAF Base in Singapore. It's right on the edge of the golf course which the Japs committed mayhem and all the sacrilege that you can think of. Fancy turning a golf course into a Shinto Shrine but that's what they did and we worked on the periphery of this thing before we went up on the railway. And then when we came out we came back to that camp.

Oh, you helped build that shrine? I didn't realise that.

Yes, yes. So Kevin was on H Force of course and was well known for his work there. So when we got back to Siam Road Camp, those of us who were fit enough went out on working parties as usual and the method then was to pull trailers which were old military trucks with the chassis and the engine pulled out and then all you had was some brakes and the steering wheel and not always brakes and the power for the truck was slave power really. You had a rope extending out the front going about twenty-five feet or so and there were poles set at intervals so that you could get three blokes each side on these poles and the thing was that you pulled the thing up the hill and when you got to the top of the hill you coiled in the rope and all piled onto this damn thing and away you went, brakes or no - mostly not. So there was great shouting and hilarity and any of the local populace that got in the way were mown down. And then the trick was to know just when to bail out because the thing would carry on up the next hill to a point but before it started to run backwards you had to have this thing all pulled out and everybody in the tracers ready to pull up. Coming home of course it wasn't funny because you had a load of wood and what we were doing was cutting out rubber stumps from a swamp.

The Japs had put charges in there and lifted these things out.

The trees had been felled and I don't know what they were trying to do, whether they were trying to reclaim the swamps or what, but I guess that's what they were after. So most of our working day was spent in this ooze, waist deep in water and we had to roll these rather recalcitrant stumps out of the sockets that they were in, roll them to a ramp and then heave them up onto the back of these trailers. And you could get up to three stumps onto a trailer. And that was our firewood.

So on this particular day I was working out in the swamp and somebody very cleverly took a quick count of heads and said, 'For Christ sake, Dowey's missing'. And I was underneath and they fished around and they found an arm or two and rolled this thing away off me and so I came out of that pretty well I thought - covered with mud from arse hole to breakfast time. Anyway we loaded up our trailer and on the way back I noticed that my shoulder was hurting a bit and it felt a bit stiff. And then somebody behind me, the next echelon of trailer, noted that I had a swelling. So when I got back to camp I paraded myself to the doctor and said, you know, 'I think there's something wrong here', and there was. I had a long haematoma, an enormous damn thing, and at that stage it had tracked down the [facial plans] and parallel to the spine and I was trotted off to see Kevin Fagin. And he had a little bit of local anaesthetic which was nice and put a drain into the distal part of this thing so that it would gravitate and pulled out as much

of the clot as he could. At that stage it was still reasonably fluid. However it collected again and he thought it might be wiser to put a full drain in from the top. So he put some rubber tubes through and snipped it in various parts to allow drainage into the tube and that it how it was and then I was bandaged up and sent off to the hospital. And the hospital was pretty tatty I might say. The beds were so close together that you couldn't get a knee width between them and blokes were dying from various causes. And I lost interest in proceedings after a while. I can remember a foot of the bed conclave that was talking gravely about my condition and Austin Best was there, the English doctor, and Kevin and I can remember Best saying, 'I think he's got pancreatitis'. And I didn't know what pancreatitis was or anything else at that stage. And anyway that rings in my memory. So I passed out and I don't know how long I was like that but I then woke from this tranquil sleep to find that there was something chewing the top of my thumb. At that time the hospital was infested with rats.

So this rat had decided that the form didn't move when you bit into it so you might as well eat it. So the top of my thumb was being liberally chewed into by this rat and that's what brought me round. And I then felt this pain in my back and realised that there'd been some surgery done and that this pain wasn't going away. So I prodded the form next to me and said, 'Are there any medical orderlies?', and he said, 'No, there's only one medical orderly for the three huts'. A well run hospital! And the medical orderly was a chap by the name of Lobo. He was an Anglo-Indian and you know that wonderful honey coloured skin that the Anglo-Indians used to have, some of them, a most beautiful colour, not a hair on his chest and he'd spent a lot of money on tattoos and he had this emblazoned tattoo on his chest of furred flags and a bloody great eagle, you know, rampant, all in technicolour. So, anyway, I knew Lobo and I thought, 'Well, I've got to get out and find him'. So the chap said, 'Well, I think he's in the top hut' - this is at night. So I rolled over in bed and I happened to fall between the space which was one knee width - that's how thick I was - and crawled out from underneath this [charpoi] and found that I was not able to walk at that stage. So I went on my hands and knees - we were in the centre hut - and I went to the top hut. And there was a series of steps that went up to come up to floor level and there was a weak light there, a sort of a candle or a taper oil lamp where young Lobo was on duty. And the first things he got to know that there was anything different in the night time, apart from mosquitoes, as this awful grisly looking creature looking at him from floor level, just a head without a body. (laughs)

A tropical monster.

Yes. So I indicated that there were problems with my back and would he please have a look. So he sat me in the chair that he'd been in, around the wrong way, so that I was leaning over the back of this thing and he undid these bandages and he said, 'My goodness me, Sir' - or something like that - 'you've got a nest of ants in your back'. You know those little red meat ants, what my grandmother used to call [meryins], that's the Cornish name for them, and they had tracked up the wall of the hut and had discovered this wonderful feed and they'd gone in

and out of the tube, cleaned the whole bloody lot out, and that's what I could feel. So he got some saline solution and hosed this lot of fellows out and bandaged me up again and I got better. But I reckon the bloody meryins saved my life. But you can tell Kevin Fagin that.

While we're on this hospital, so-called, the rat problem was more than somewhat and was a great trial to everybody. So, you know, from the point of disease, apart from rats wanting to eat patients, so they brought in a chap who was one of the Dutch-Indonesian - there were a lot of mixed blood Dutch troops there - this fellow said he could get rid of the rats. A bit like the Pied Piper of Hamelin and all he needed was a stout sort of box, rather like our steel Australian hot boxes. So somebody rummaged around the place and found one of these things and he caught rats - quite a number of rats - and he put them in the box and he didn't feed them and the rats started eating each other - gruesome thing. So when they got down in numbers to a certain point he opened the box and let them out and the cannibal rats chased all the other rats out.

Isn't that interesting.

Mmm.

I thought you were going to say ...

That was at that particular time. And you can tell Kevin that one too.

Well, that makes sense.

He'd remember it.

So he got rid of them.

Yes, we got rid of the rats - the pied piper. I think that's about the sum total of my knowledge of the Australian doctors.

Well, Don, just coming back to Mr Fagin. Perhaps if you could describe what you remember of him. You've since him the war, haven't you?

I haven't seen Kevin since the war, no. But I do remember him then as a young vigorous man very much cut in the surgical mien. There's a difference between physicians and surgeons: it's rather like people who are of the church, they seem to be an entity. And Kevin I think was a surgeon to his boot straps and was highly respected as such. I don't know that I ever got close to him. I think it would have been difficult under those circumstances. He was ... you know, in this small instance it was doctor/patient relationship but there were hundreds of cases that he had dealt with.

There's one interesting little codicil if you like to Kevin Fagin that I've just remember and that was during the latter part of the war the Italians opted out and in Penang Harbour was two submarines - two transport submarines - that were there loading rubber. They must have been pretty hard up for rubber.

So they were getting, with the Japanese occupation, they had the right to go in their and get rubber and presumably take it back through the Med. And when the Italians opted out of the war these two Italian submarines were taken over by the Japs and these fellows found themselves prisoners of war much to their horror and consternation and they were taken into Siam Road Camp and put into the centre of the camp in their own little bit. And we put up with it for a while and then, you know, Australians being what they are, they said, 'Oh to hell with this. These poor bastards, they didn't deserve this sort of treatment'. So a couple of our blokes got through their wire and said, 'Hey, would you like to come outside for a while and mix with us?', so they did. And eventually this fraternisation went on to a point where the Japs gave up and the Ities sort of melded with us. And one of them was a young lieutenant who developed an acute appendix and Kevin Fagin was whistled up to have a look at him and, yes, it was acute appendix so it had to be operated on. And Kevin winkled out this appendix through the tiniest slot that you've ever seen. Talk about key-hole surgery, I don't know if you ever saw Doctor in the House?

Oh, years ago I remember.

James Robinson Justice, and he says, 'Where's my Bernie's point?', you know, and he said, 'What sort of incision would you make?' and the fellow makes a long line and he said, 'Ah, key-hole surgery'. Anyway, this was typical key-hole surgery ...

It really was.

... and the bloke got over his acute appendix and prospered. And as a momento and a feeling of great gratitude on his part no doubt, he gave Kevin a gold cigarette case that he had. I wonder if he's still got it.

Good, Don. Well, I suppose to finish up, perhaps if we just get onto yourself, because you did medicine only after the war. Perhaps you would tell me briefly what you were doing before the war, your joining up and what lead you to do medicine and how you found the course after?

Yes. Well John, I don't know whether I did medicine or medicine did me but if I go back to my school days I was educated at the Adelaide High School. I wasn't a very good student in those days, I was more interested in sport - rowing, gymnastics and so on - to the complete detriment of my studies.

So when it came time to think of what to do when I left school, I hadn't really given that much thought at all and the depression years were still very much with us so job opportunities were not that good. And I went to work in the tool room at General Motors Holden at Woodville. And the idea was that I should be a journeyman apprentice because I was a little bit over the age for straight out apprenticeship. So I started learning the gentle art of tool making with particular reference to car bodies and dies and the sort of general machining things that you do in a tool room - in a big tool room this was. And I used to go to night school at the School

of Mines and do fitting and turning as well. And I also did a correspondence course in drawing office practice and machine design in parallel with all this. And several years went by and eventually it was pretty obvious that storm clouds were gathering in Europe and Hitler was going through various states - Czechoslovakia and so on - and it was obvious that there was going to be a war. And at that time there was a lot of talk about manpower, of people in trades, so that you would not be able to go and join up in the forces and you'd be totally rail-roaded or stymied from doing this. So I thought, 'Well, I'll get in first'. So I left my employ and went with a small parcel of money that I had, which wasn't much - I think it was about thirty pounds - to the Royal Aero Club at Parafield and proffered my amount of money and said, 'How far will this take me in learning to fly?' and they sort of said, 'Well, that's very interesting that you should say so, but it won't go very far'. (laughs) So I wasn't going to be put down on this and I said, 'Well look, I've just served my time' - which was a lie because I'd statched my time, I was coming up to the end of my time but I hadn't served my time as a toolmaker and they didn't ask to see any certificates and I didn't have any - 'in the tool room', I said, 'How about I work in your hangar for nothing. How far would it go then?'. And the senior pilot, the chief instructor there, Jack Buckham, who eventually became a very great friend of mine - he was one of the old sergeant pilots in the RAAF, one of the original sergeant pilots ...

From the First World War?

No, no, no. This is between the wars.

Oh right. Oh I see, permanent air force. Sorry.

A position of sergeant pilot. So Jack said, 'Look, I'll tell you what I can do. We're having a meeting of the aero club next Monday. I'll put you up for this and see what we can come up with'. And he did and I saw him about a week later and he said, 'That's all right, old son. You give us the money and we'll teach you some flying and you work in the hangar on the air frames'. So I learnt about air frames and engines and a hell of a lot more and for every hour that went down on the log book I had about three or four hours up in the air with Jack Buckham that never went into my log book. And he was a damn good pilot. So that was a very satisfactory experience. And I needed a bit more money so at that time my brother John was a student in the life class at art school and he's now a sculpture of some merit and he said, 'Well, why don't you come along to the art school, we need a model in the life class' which meant posing nude in the middle of winter. I wasn't very keen on that but anyway, I thought, 'Well, in for a bob in for a pound'. So I used to go along there and for quite some months I used to pose in the nude for this polyglot mob of arty-crafty people and then we'd swill cups of coffee afterwards to restore my circulation. And that brought in, I think it was ten bob a night which was quite good money. So that kept me hobbling along. Then I applied to the Air Force for entry and was accepted after a trade test and I found myself on a riggers course at Laverton with all the other rookies and so on. There were wireless courses and fitting

courses, chaps doing armoury and so on.

Now the European War had broken out at this stage, had it?
Or just before?

No, this was 19 ... I got in I think January 1939 when I actually was doing this. Anyway, I finished this course and by some strange chance I was dux of the course which gave me virtually carte blanche to decide where I would like to go and I chose No. 3 Squadron at Richmond. And from there on the war was sort of getting under way. The Empire Air Scheme hadn't materialised but I realised more and more that what I really wanted to do was to exercise my flying skills. And it was virtually a no go area for an airman to become a cadet, it just wasn't done and it hadn't been done up to that point. And there was only one other who had achieved this and that was a South Australian who was engine fitter and he was taken on as a cadet in training. So I thought, 'Okay, we'll have a go at this' and eventually went up for a large interview with lots of brass hats around the place and they pummelled the daylights out of me on all sorts of questions but I must have come up with a number of right answers and eventually I was accept in.

So I was on number 28 cadet course and graduated off that. Went to Darwin in 12 Squadron then 13 Squadron in Darwin flying Hudsons and then one of the No. 1 Squadron people who had been on my course came home to Australia and they had a vacancy and I was next on the list. So I went up to Singapore. So that's how I served as an airman ...

And what were you flying in Singapore? The same aircraft?

Lockheed Hudsons.

Still.

Yes. So we were flying Hudsons and patrolling the South China Sea and around the other side up to the north of Sumatra which was all very interesting. And while I was in Singapore I decided that flying wasn't going to be the whole be-all and end-all of my life, I wanted to do a few other things and I'd always been interested in animals. I thought perhaps veterinary science. So I wrote to Professor Clunies-Ross in Sydney, just a letter to say, 'Look, here am I in Singapore. We're greatly restricted in flying time ...' because the petrol rationing everywhere and the European thing was going against us and we were losing tankers hand over fist. So there wasn't much petrol around, certainly not for flying in Singapore. And we were doing something ridiculous like three or four hours a month. That's true. This is a front-line squadron. It was bloody hopeless. Anyway there were endless navigation courses, anything to keep us occupied. So I had a bit of spare time and I went down to [Raffles] library and looked up various old textbooks they had there which weren't much help but I did learn about frogs and pasterns on horses and that sort of thing. What do you do when a horse gets pastern slab?
(laughs) Anyway, Clunies-Ross wrote back and was very supportive and I thought very helpful indeed and he gave me the names of a number of past graduates who were practising in Malaya and I made contact with some of those who in the

Singapore and Johore Bahru area ...

END OF TAPE TWO - SIDE A

START OF TAPE TWO - SIDE B

... Singapore and Johore Bahru area. One was one of the sons of [Sultan Ebrahim] who was the sultan of Johore and he didn't have any time for his old man at all. But, anyway, that was an interesting sort of episode and eventually, as you know, I was put in the bag. And it was while I was on the Burma Railway I somehow had a revision of thinking. I'm not sure whether it was the right thinking but, anyway, I opted to study medicine.

And I was helped in that a lot by various of the doctors who for various reasons always, one or other, seemed to have a basic text which was useful. So it was easy enough if you had a group of doctors in a camp that you could find a Grey's anatomy with one or a Manual of Surgery or something to do with zoology or whatever. So I was able to bone up on these things.

There was a Catholic padre who tried to teach me a sort of dog Latin which wasn't much help but at least he tried. So I was sort of preparing myself for this and it was a marvellous thing really because rather than being confronted by the wide open world which ... see, POW life is very, very easy. You don't have to make your own decisions. It might be rough physically but mentally things are happening but you don't happen them. And this is the problem that a lot of blokes found when they came home, they had no idea what they wanted to do. The world had moved on; their friends had moved on. They felt uncomfortable at home because they didn't have any friends. You know, marriages had taken place, other people had moved in and so on. But the family wasn't a family any more and here you were, you were odd man out and you're smoking cigarettes continuously and you've got an anxiety state and everything's up the creek without a paddle. Now I got through all that because I had one thing in mind and that was to go back to school. I knew I'd have to matriculate and I had a couple of leaving subjects and that was all. With the grace of God they let me keep those. So I went back to school for that 1946, I went back to school and did the subjects needed - Latin and French and English, Physics, Chemistry and Maths I and Maths II and managed to jump the hurdle and I was on my way then into medicine.

Well, I think that's a tremendous story. We're almost on the end of the tape. Don, thank you very much.

Thank you.

That completes the interview with Doctor Don Dowey at Adelaide on 23rd January 1991.

END OF TAPE TWO - SIDE B - END OF INTERVIEW

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