CHAPTER 13

CRETE

When the British, Australian and New Zealand troops left Greece for Crete, General Wavell intended that they should be relieved and reorganised in Palestine and Egypt. This was not found possible because of the heavy burdens already borne by the Royal Navy, and the imminence of a German attack on Crete. The strategic importance of Crete was evident. Only seventy miles from Greece and close to the Dodecanese Islands held by Italy, Crete had a good natural harbour in Suda Bay, though with few facilities for handling ships and cargoes, and also small artificial harbours at Canea, and Heraklion. An airfield at Maleme, close to Suda Bay and landing grounds at Retimo and Heraklion, increased the value of the island as a base.

Terrain

Much of Crete is undeveloped. Some 170 miles long and 20 to 35 miles broad, the island is divided lengthwise by a mountain range which rises in places to 8,000 feet, and falls to the sea in steep cliffs on the southern side. On the northern side, where the harbours are situated, there is a narrow strip of more level country, with olive groves and some fruit trees and vines. The one reasonably good road runs along the coast from the airport at Maleme past the coastal harbours to Heraklion, but other roads are primitive and in most places tortuous and rough. The water supply derived from wells was sufficient, though the surface streams tended to dry as the weather became hotter.

Crete was known to be malarious in the season, but since February a British field hygiene section had been at work instituting malarial control, thus lessening the risk in the rapidly approaching summer. Very little malaria had been seen in the garrison force up to this time. This was fortunate, for the men entering Crete had no anti-malarial equipment. The weather was then fine and clear, with cold nights: it was evident that the long days of spring and early summer favoured an invader.

British forces were already in Crete, including three battalions. Something had been done towards organising defence by land, sea and air, but constant shortages of men and material in the Middle East and serious commitments in several theatres of war had not permitted much preparation. The 7th British General Hospital of 600 beds had been sent to Crete during the latter part of the campaign in Greece, and had been established for a week in a site some three miles west of Canea. The 189th British Field Ambulance had been there for some time, less one company which served in Greece.

Arrival of Troops from Greece

The first phase of the military episode of Crete began when the ships of the Royal Navy arrived with the troops embarked from Greece. From
25th till 29th April ships kept arriving; some were repeatedly attacked by German aircraft during the brief passage but surprisingly little damage was done. The Thurland Castle carrying over eighty nurses and many wounded was subjected to air attack, but though leaking slightly, reached Crete without further incident. The S.S. Pennland was severely damaged by bombing and had to be abandoned. By coincidence a number of the officers of the 2/5th Australian General Hospital were on this ship, which had brought the members of this hospital to Greece only a few weeks before. Excepting for part of the 2/5th A.G.H. staff, left in Greece by deliberate policy in order to care for sick and wounded, most of the members of the Australian medical units reached Crete, either with the main convoys or in small craft which continued to reach Suda Bay till the early part of May. Most of the staffs of the 2/5th and 2/6th Australian Hospitals landed at Suda Bay on 25th April, and on arrival they were marched a short distance inland and bivouacked in pleasant country in the hills, with trees and cool mountain streams. The next day the 2/3rd Australian Casualty Clearing Station arrived and was accommodated near by. These units had carried out useful work during the trip to Crete. Even air attacks did not interfere with care of the wounded on board, and necessary procedures such as blood transfusion were carried out. The medical problems for immediate solution were the care of the 1,000 casualties which had arrived from Greece, the day by day attention of sick and the usual measures of hygiene. For the performance of these tasks the medical units attached to British, Australian and New Zealand forces landing in Crete had practically no equipment. As heavy equipment had been perforce jettisoned on leaving Greece, the only stores and instruments available, other than those already in Crete, were those carried out by hand. One difficulty arose in connection with the disposal of convalescents brought from Greece by medical units. Some were returned to their own units, but others were not fit for work and though not requiring treatment by the medical units had to remain with them as an appendage.

The Australian medical units then in Crete were the 2/5th General Hospital (Lieut-Colonel A. W. Morrow administering command), 2/6th General Hospital (Colonel R. A. Money), 2/3rd Casualty Clearing Station (Lieut-Colonel J. C. Belisario), 2/1st Field Ambulance (Lieut-Colonel R. H. Russell), 2/2nd Field Ambulance (Lieut-Colonel D. M. Salter), 2/7th Field Ambulance (Lieut-Colonel L. E. Le Souef), 2/1st Field Hygiene Section (Captain R. Drummond) and 2/1st Motor Ambulance Convoy (Major W. E. Langford).

As the sick and wounded arrived from Greece they were examined and sorted by officers of the 6th N.Z. Field Ambulance at a transit camp. According to their needs they were sent to the 7th British General Hospital or to medical inspection centres for attention, or returned to their units.

The three Australian field ambulances arrived at Suda Bay between the 26th and 28th April. Over 25,000 troops were then on the island; their medical supervision was obviously a considerable task for the restricted
service available, not because of lack of medical staff, but of stringency in stores. Fortunately both the 7th British General Hospital and the 189th Field Ambulance held supplies; the hospital was particularly well stocked and both units proved most helpful and cooperative.

The advent of the nurses from Greece was welcomed by the commander of the 7th British General Hospital, in whose area they were accommodated. He was anxious to retain the services of the New Zealand nurses, as his own nurses were still in Egypt. Accordingly the nursing staff of the New Zealand hospital was attached to the 7th British Hospital on the understanding that they would be returned to Egypt at the first opportunity. Matron E. C. MacKay of the 1st New Zealand General Hospital was placed in charge of the British, Australian, and New Zealand nurses who had arrived from Greece and acted as Matron of the 7th Hospital. Some of the Australian nurses also helped in the work of the wards, and members of the surgical staffs of the Australian hospitals undertook care of some surgical wards, which were soon overfilled by casualties from the recent campaign.

The transit camps held many sick and wounded temporarily, and such treatment as was possible was undertaken by the staffs of the field ambulances. In addition to the headquarters and “A” Company of the 189th Field Ambulance, there were two other British field ambulances, two New Zealand and three Australian, all fresh from Greece, but all without transport or equipment.

MEDICAL SERVICES IN CRETE

On 26th April Colonel W. W. S. Johnston, D.D.M.S. of I Australian Corps, and Colonel H. S. Kenrick, A.D.M.S., N.Z. Division, went to the recently organised headquarters of Crete Force and there made some interim arrangements for medical services. The New Zealand forces were assigned the defence of the Canea-Maleme sector where the New Zealand field ambulances were attached to their brigade groups. The Australian field ambulances were all in the same neighbourhood, in the Suda Bay area, and Lieut-Colonel Le Souef, commanding the 2/7th Ambulance, acted as senior medical officer. Most of these units were able to function to some extent, using supplies obtained from the 189th British Field Ambulance and the 7th British General Hospital.

The majority of the men arrived in Crete tired and hungry; in the Suda Bay area canteens arranged by the British garrison force were most welcome and useful. In the transit camps food was available, usually in adequate quantities in these early days, though cooking arrangements were often sketchy. Petrol tins were used for extemporised cooking utensils.

This phase ended with the close of April. The senior administrative officers of the I Australian Corps returned to Alexandria by flying boat on 28th April.
Early on the morning of 29th April a convoy of ships left Suda Bay. With this party were Brigadier Large, D.D.M.S. of the British Force in Greece, and Colonel Disher, A.D.M.S. of the 6th Australian Division. These ships also carried some of the troops who by reason of lack of arms and equipment would not be of assistance in the defence of Crete; all the nurses on the island were also embarked. In this convoy of ships was a small Greek ship, *Ionia* which carried about 200 nurses, some walking wounded and some troops. The crew were unwilling to face the risk of air raids, so volunteers from the troops took charge. During the night following embarkation there were some air attacks, but then the ship joined a naval escort and arrived safely at Alexandria. Another ship *Corinthia* carried many civilians, mostly women and children who were looked after during the voyage by members of the nursing staff of the 2/5th Australian General Hospital. This ship was attacked by planes and surface craft and the sight of the British naval ships was not only very welcome in the morning, but also assured a safe arrival in Egypt. The experience gained in embarking the nurses from Greece emphasised the need for prompt decisions concerning their transfer from dangerous forward areas.

**PREPARATIONS FOR THREATENED GERMAN ATTACK**

The second phase of the story of Crete began early in May and lasted some weeks. This was a period of respite and preparation. By this time most of the men who escaped from Greece had arrived in Crete, with the exception of a body of troops which arrived in Alexandria direct on 29th April. Among these latter were some 4,000 Australians, 80 of whom were sick or wounded. In addition, small groups of men appeared in Crete at intervals during the next few days, after more or less adventurous crossings in small ships. Even up to three weeks afterwards men were coming in, including some of the men of the 2/2nd Battalion, who, after being separated from the main body of the troops in Greece, had made their way to Volos on the coast. With one of the parties was a member of the 2/1st Australian Field Ambulance, who travelled in a small boat with others from the coast of Greece near Argos, navigating by a small map in a pocket diary. It is of course now known that escapes were made from both Greece and Crete by men who took many months to complete a hazardous adventure.

General Wavell visited Crete on 30th April and decided that the defence of Crete would be undertaken by the troops on the island. He appointed Major-General Freyberg as G.O.C. Crete, and Colonel Kenrick became D.D.M.S. of Crete Force, Lieut-Colonel W. H. B. Bull taking the position of A.D.M.S. of the New Zealand Division. There were some 35,000 troops on Crete, made up of British, Australians, New Zealanders and Greeks, with in addition some 4,000 unarmed Cypriots and Palestinians. General Freyberg addressed a number of the units in his official capacity on 2nd May, and pointed out the likelihood of a German attack by air
and sea. In view of the probability of an air invasion on a large scale, the various defence areas had to prepare for independent action in the event of their being isolated by parachute troops. The chief areas of British occupation of Crete were Canea and Suda Bay, Retimo and Heraklion, and in these areas four sectors of defence were organised as follows during the period of preparation.

The Heraklion sector was commanded by Brigadier B. H. Chappel, and was defended by British and Greek forces with the 2/4th Australian Infantry Battalion. A senior R.A.M.C. officer was in charge of local medical arrangements, and Captain P. A. Tomlinson was the R.M.O. of the 2/4th Infantry Battalion.

At Retimo was the headquarters of the 19th Infantry Brigade. Here Brigadier G. A. Vasey, the A.I.F. commander in Crete had a force including the 2/1st, 2/7th, 2/11th and about half the 2/8th Battalions with parts of other Australian units and improvised Greek battalions. Lieut-Colonel Le Souef, with one company of the 2/7th Field Ambulance was senior medical officer.

Major-General E. C. Weston, of the British force in Crete, commanded the Suda Bay area where there were a British group, the improvised 16th and 17th Australian Brigade Composite Battalions, the 2/2nd Field Regiment armed as infantry, elements of other units and two Greek battalions. The 2/1st Field Ambulance under Lieut-Colonel Russell was quartered in the area, and the 2/2nd Field Ambulance under Lieut-Colonel Salter was in the vicinity of Neo Khorion: both units were awaiting evacuation.

At Canea and Maleme, Brigadier Puttick of the New Zealand Division commanded the 4th and 5th N.Z. Infantry Brigades, the improvised 10th Infantry Brigade and Greek troops. For the purposes of medical administration the area was divided into a western sector from Canea to Maleme, where Lieut-Colonel Bull was in control, and the Suda Bay sector under Lieut-Colonel S. O. Dolan.

It was clear now that the Australian medical officers on Crete could only play a subsidiary part in the medical affairs of the island. There were still three large holding medical units of the A.I.F. in Crete, two hospitals and a casualty clearing station but they were impotent as they had no equipment. Only the Australian field ambulances were likely to play any significant part, and possibly not all of these.

In the further unfolding of this story only the experiences of these Australian medical units will be described. This account can only be supplementary to the British account and the stirring narration of the New Zealand Medical Corps which for the first time had complete control of its own forces. The Australian medical story of the defence of Crete therefore centres round the work of the three field ambulances and the unit medical officers in the Canea-Suda Bay-Neo Khorion area, around Retimo and Heraklion, and their part in the final events.
During the first week on Crete living conditions were primitive but in spite of shortages of clothing and blankets and exposure in the chilly nights under the open sky the men remained well. Respiratory infections were notably few. Many men complained of sore feet due largely to wear and tear on their boots on the stony outcrops. As some degree of stability was attained the men tried to improve their general conditions. Diarrhoeal disease was not uncommon, which was not surprising in view of the difficulties in establishing routine preventive measures. Water disinfection was unsatisfactory, and chlorination was limited in application; bulk treatment was impracticable as there were no water carts and individual equipment was scanty. There was a serious shortage of digging utensils, partly owing to faulty distribution which was possibly due in turn to the universal lack of vehicles. Such picks and shovels as could be obtained were needed for digging trenches for air defence, but in addition deep trench latrines had to be prepared. Dumps of tools were afterwards found, too late to be used for these purposes. Rations were rather below full normal issues, but at this stage were adequate, though cooking utensils were scarce. In addition eggs, nuts, oranges and bread could be obtained from the local inhabitants. The men also took the opportunity of sampling Cretan wines.

The paucity of transport caused serious difficulties to the whole force in Crete, and this intensified the scarcity of supplies of many sorts. It also restricted communication, which was poor throughout, in spite of the short distances. This was to be expected, for basic equipment was like other material on the island, meagre in amount. There were only eight ambulance cars on Crete when the troops arrived from Greece. Six of these were then allotted to the British field ambulance and two belonged to the Royal Air Force. Five others were brought in later by the navy, thus providing a total of eleven for army medical units. Medical supplies would have been almost non-existent in places had it not been for the stores held by the garrison force; otherwise the medical material brought into Crete comprised little more than what was carried in by the members of medical units. The ingenuity and nocturnal activities of an Australian provided the 189th Field Ambulance with some additional supplies obtained from the pharmacies in Canea.

**THE MEDICAL PLAN**

The medical plan as made early in May provided for hospital service from the 7th General Hospital and an extemporised hospital run by the 189th Field Ambulance which was stationed a little outside Canea, with a post on the road running north of Suda Bay. A naval hospital near Suda Bay treated many patients from the neighbourhood. The 7th Hospital and 189th Field Ambulance were within the New Zealand sector, where the New Zealand 5th and 6th Ambulances were attached to the N.Z. brigade groups. The 6th N.Z. Field Ambulance was also used by the 7th Hospital as a convalescent depot. Special aid posts served the
Awaiting evacuation from Greece at Megara. (J. C. Belisario)

Transporting supplies on Crete. (J. C. Belisario)
Suda Bay, Crete, target for German bombers.

Troops leaving Suda Bay, Crete.
airfield at Maleme and the harbour area, and there was a reception hospital at Heraklion. The dressing stations in these and other field units were often extemporised from slender resources.

As the month of May passed the weather which had hitherto been fine became colder with intermittent showers of rain. There was little cover for the troops, and considerable ingenuity was practised in sheltering the sick. The position was helped by the appearance of the hospital ship *Aba* on 5th May, which with considerable expenditure of time and effort contrived to pick up 600 patients in small boats. These men were safely returned to Alexandria.

During this phase of the events in Crete enemy aircraft continued to attack shipping approaching or leaving Crete and at anchor in Suda Bay or in the vicinity. Daylight movement of ships became too dangerous, and the clear moonlit nights made attacks possible by night as well as by day. Some supplies continued to arrive from Egypt by sea, but losses were inevitable. One severe blow was the sinking of the *Rawnsley*, with a large quantity of stores on board including 25 tons of medical material.

**THE AUSTRALIAN FIELD AMBULANCES**

It is simplest to follow the activities of each ambulance in turn during the first few weeks of May. All three units were at first collected in a fairly circumscribed area a little inland from Suda Bay.

Russell's unit, the 2/1st Field Ambulance, had taken over a camp reception station at Kalives overlooking Suda Bay, and was looking after patients there. The members of the unit were camped in an olive grove behind the village on the shore of the bay. Discipline was maintained unrelaxed throughout this period of suspense, and the men were kept occupied when not working by outdoor exercise, marching and swimming. Their spirit was good. On 3rd May, the commanders of the 2/1st and 2/2nd Field Ambulances were warned to keep their units on two hours' notice of movement. On 9th May some forty ships assembled in Suda Harbour. At dusk they sailed for Egypt taking troops who could no longer be used in the defence of Crete, but no instructions for embarkation were given to the two field ambulances.

Communications were unsatisfactory at this time, and there was occasional confusion as to who should give orders. Russell, on 14th May, received within twenty-four hours three different sets of instructions about the work of his unit. Salter about this time was told by Brigadier Vasey not to take orders from anyone outside the 19th Australian Brigade Group. The 2/1st Field Ambulance was now withdrawn from medical activities and prepared to move closer to Suda so as to be ready for departure at short notice. The proposed bivouac site overlooking Suda Bay was wanted by the artillery, so, keeping a detachment in case of emergencies at the aid post on the harbour wharf, the ambulance remained on the shore, housed in caves. There was here at least some simulation of stable conditions; pay was available, tinned fruit was issued, and copies of a paper *The*
Greek News published locally in English could be obtained. Nothing more was heard about embarkation.

The 2/2nd Field Ambulance camped at Neo Khorion and after a fortnight's inactivity began active work on 14th May, and ran a camp reception station near the headquarters of the 19th Australian Brigade. Full cooperation was given by the 7th British Hospital and the 189th Field Ambulance in supplying medical stores; indeed this readiness to help and share was a feature throughout. Even the stores held by these units could not last long in the face of constant demand. Bandages had been made from flannelette commandeered locally, and even sheets were torn up for dressings. By 19th May medical supplies failed, and work was reduced to a minimum. Captain K. J. Dorney, of the 2/2nd Field Ambulance, was in charge of a convalescent depot one mile west of Suda Bay for a few days, from the 17th May.

Meanwhile, Le Souef had the men of the 2/7th Field Ambulance camped at Neo Khorion, after overcoming the initial problems of scarcity of cooking gear, fuel, digging utensils and blankets. Here they opened a small aid post, and then took over a reception station from the 189th British Field Ambulance in a school house. The hygiene of this was defective, but at least it gave cover to the patients. The members of the unit preferred dispersal under the olive trees to the doubtful advantages of the building. Medical supplies were of course scanty; minor operations were performed with razor blades, and little active treatment was possible. Quite early, on 5th May, the sphere of activities was extended to Georgioupolis on the coast, where another dressing station and a convalescent camp were opened by "A" Company in charge of Major F. K. Wallace.

On 11th May, another dressing station was established by Major J. D. Palandri at Adhele, near Retimo. The medical post here was not marked with a red cross: some bombs fell close by on one occasion but failed to explode. In view of the probability of an attack at Retimo Captain F. E. Gallash and the remainder of "B" Company reinforced this post with extra stretcher bearers and orderlies, and a few drugs and dressings. "B" Company was likely to be called upon to carry out the heaviest share of the medical work devolving upon the 2/7th Field Ambulance, and, further, would be isolated in the event of an attack on Retimo. Consequently the stocks of the unit were depleted to about one-quarter to supply this company; in view of the need for shelter these supplies included the unit's only remaining tent flys. Some red and white cloth was obtained from which brassards were made. Le Souef eked out the slender medical supplies by buying aspirin and boracic acid at a pharmacy in Canea where there were still some supplies for sale. The main body of the unit then moved four miles closer to Suda into an area for unarmed forces, leaving a medical officer and a few men to deal with any patients. The main dressing station at Neo Khorion was closed and re-opened at Vrises, somewhat nearer to the posts of Retimo and Georgioupolis, but the new site was exchanged after a few days for one less exposed. Disposal of
patients was difficult owing to lack of vehicles of any kind. The only practical method of transfer to the British hospital was to keep picquets on the road who stopped passing vehicles; the frequent air attacks in the vicinity added to the difficulties, though fortunately many of the bombs did not explode. A detachment under Captain B. Gillett was able to attend many sick and wounded on the road near Stilos. Just before the German attack Brigadier Vasey asked the cooperation of the medical services in disposing of those men who might in the opinion of the commanding officer affect adversely the morale of others in the face of attack. About 6 per cent of the men evacuated to safer areas at this time came within this category.

REARRANGEMENT OF MEDICAL PLANS

It was evident that the original plan for the medical units had changed, and that the 2/1st and 2/2nd Field Ambulances were unlikely to be returned to Egypt. The last Australian medical units to be embarked at Suda Bay were the greater part of the 2/5th A.G.H., the 2/6th A.G.H. and the 2/3rd C.C.S. These all left on 14th May; Lossiebank taking the 2/5th A.G.H. and the 2/3rd C.C.S., and Nieuw Zeeland the 2/6th A.G.H., 2/1st Field Hygiene Section and the 2/1st M.A.C. The Lossiebank carrying nearly 2,000 men caused anxiety when one engine broke down, and the ship was forced to circle for two hours in the danger area until the defect had been remedied. Both ships were attacked from the air, and had some narrow escapes, but arrived at Alexandria safely.

On 16th May the hospital ship Aba returned, and using caiques and a launch towing two boats, succeeded in embarking 561 patients, mostly from the 7th General Hospital. Though raiding planes respected the red cross while the ship was in Suda Bay, an attack was made on her the next day, causing casualties and damage, but the ship and patients reached Haifa safely.

GERMAN ATTACK

From the middle of May onwards there was increasing hostile air activity. Heavy attacks were made on the airfields, and the Suda Bay area was singled out for special attention. On 18th May the 7th British General Hospital was bombed in low level attacks. Three British medical officers and two orderlies were killed, and three orderlies wounded. The British surgical specialist was amongst those killed, and a New Zealand surgeon was appointed to the position. Further machine-gun and bombing attacks took place over the hospital area the next afternoon. The German Air Force had such overwhelming superiority in numbers that further resistance by the depleted Royal Air Force was useless and all the British aircraft were withdrawn from Crete on 19th May.

The second phase of the assault on Crete began on the 20th. Intense air activity ushered in a sustained German attack. Dive-bombers came over in waves, and most of the anti-aircraft guns were silenced. Paratroops were dropped between Canea and Maleme, and then troop-carrying planes
Crete, 18th May 1941.
and gliders came in. Retimo and Heraklion were also heavily attacked. Determined efforts were made to counter these attacks, and extremely heavy losses were inflicted on the Germans. All possible non-medical forces were armed to cope with unaccounted parachutists, and all the medical units prepared to deal with the expected casualties. During the next two days fierce fighting raged as thousands of German parachutists landed in the strategic centres of the northern part of Crete, and hundreds of troop-carrying planes brought in reinforcements. The Germans suffered colossal casualties, but nevertheless could not be permanently dislodged from the Maleme-Suda Bay area despite destructive counter-attacks by the New Zealanders. They also succeeded in cutting communications between Retimo and Suda Bay, thus isolating the forces at Retimo, from which the 19th Australian Brigade had moved its headquarters to Suda Bay. All attempts failed to dislodge the enemy from the road into Retimo.

In the hospital area incredible and tragic events happened. The 6th New Zealand Field Ambulance was captured and the next day released: its commanding officer, Lieut-Colonel Plimmer, was shot by a parachutist though he had surrendered. The 7th British General Hospital was also attacked and captured, after some damage to the wards and loss of life of patients. Losses of staff and patients would have been greater only for the excavation of some wards below ground level. Adequate protective markings were displayed; red crosses were painted on the three roofs before the attack, and crosses were laid out on the ground. It appeared that the Germans would not recognise as non-combatants any persons wearing steel helmets, and regarded them as not being protected by the red cross, though this view is not based on the Geneva Convention. Care was taken later to avoid any such possible resemblance to combatant troops. It may be that enemy Intelligence did not reveal the true nature of the hospital area, but since a captured air corps report shows that hospital “barracks” and “huts” were seen on 18th May it is hard to justify an attack on 20th May. The hospital was freed, and the next day recaptured, when the staff immediately re-established wards in large caves on the shore. These happenings are described in the New Zealand Medical History.

Meanwhile all efforts had been made to land reinforcements on Crete. The enemy’s air superiority made this most hazardous. All the naval operations around Crete were carried out at high cost in loss of ships and men. Notwithstanding these difficulties some reinforcements were successfully landed, part joining the forces at Heraklion and part those at Suda Bay. On the night of 21st and 22nd May enemy troops attempted to land on Crete from the sea, but their small craft were intercepted by ships of the Royal Navy under Rear Admiral Glennie twenty miles north of Suda, and the whole force dispersed. The firing of coastal defence guns and flashes and noise of guns at sea were seen and heard by the troops in the Suda area who realised their significance, and were greatly heartened. The action was costly, nevertheless, and the fleet by remaining on watch in the danger zone in daylight hours suffered heavily from attacks from the air.
By the 23rd the position in the chief defence areas was serious. The Germans had poured in air-borne troops in thousands, though estimates of the numbers landed on the previous day have been exaggerated. The Maleme airfield, after fluctuations of combat, had passed to the German forces which had joined with other forces near Galatas, the site of one of the camps originally prepared for New Zealand troops. At length the defenders were forced to withdraw to an area west of Canea. The 189th British Field Ambulance was holding hundreds of wounded men in an extemporised hospital. Unfortunately in the bombing of the British hospital area tents containing precious medical stores were destroyed, a loss which was felt heavily in all sections of the Suda Bay-Canea sector. The New Zealand field ambulances were also caring for large numbers under great difficulties. A little south of Canea the 1st Marine Tented Hospital, which had only been a fortnight on the island, was helping to take the overflow of the 7th General Hospital. No more respite could be expected and the field ambulances worked hard at moving their patients on as a further German attack was expected. This attack matured on the afternoon of 25th May, when an intense land and air bombardment of the Galatas sector initiated fierce fighting. In spite of successful counter-attacks by the New Zealanders the Germans increased the pressure of their growing forces, and by infiltrating behind the front at Canea, forced a withdrawal. The medical services worked continuously during the battle, but Lieut-Colonel Bull, A.D.M.S. of the N.Z. Division instructed both the field ambulances and the British hospital to withdraw some seven miles to Neo Khorion. After delays and many difficulties these units reached Neo Khorion with their patients on the 26th, and there carried on with their work. The staff of the 7th Hospital were compelled to leave 300 patients in the caves, in the care of two R.A.M.C. officers and orderlies. An effort was made to remove them but this failed. This unit had done fine work holding some 500 patients in caves since the German air invasion, cooking on primus stoves, carrying all water, and doing surgical work on an operating table in the largest cave.

**WORK OF THE FIELD AMBULANCES**

Owing to the isolation of the different components of the defending forces, lack of communication and of medical supplies the Australian field ambulances were only able to make a limited contribution to the medical needs of the troops in the Suda-Maleme area. The nature of the attack made conditions doubly difficult. Paratroops had been reported as landing in many places over the preceding days; in some instances investigation revealed no troops, but splints and other medical supplies were found. Elastic bandages recovered from the ankles of dead paratroops were used in the dressing stations.

Russell's ambulance was still in reserve, the men being quartered in caves. Salter's unit the day after the invasion began had moved to an olive grove near a road junction with the coast road, where a dressing station on a modest scale was set up. Sick and wounded were held here
in a ruined house, there were few facilities for treating them and little chance of sending them on. The only equipment consisted of a few stretchers, some medical haversacks and a few dressings. There were doubts about the purity of the water supply; this came from a village well and was suspected of being contaminated. No sterilising powder was available and shortage of fuel made boiling the water impossible. Dysentery was occurring in a considerable number of troops, but fortunately it was mild, and subsided in a few days. Le Souef acted as liaison officer with the brigade headquarters when the action began. "A" Company of the ambulance was ordered back towards Canea, and the trend of events in the next day or two showed that the brigade headquarters would probably be moving towards Suda. The possibility of the isolation of "B" Company at Retimo was apparent early; Le Souef in visiting this company had to leave the town promptly to escape being cut off by paratroops. On 23rd May some British engineers called at the dressing station to enquire the way to Sfakia: this was taken as an indication that a retirement was being contemplated. Next day Le Souef with some men from his "A" Company and some from the 7th General Hospital, went across country to his headquarters site. Here a brigade vehicle was obtained and by midnight sixty patients and the staff of the dressing station had been moved to large caves in the side of a hill, not far from where "A" Company was now established, well concealed in an olive grove. The protection of slit trenches was necessary, for enemy aircraft were busily attacking the roads. In the caves many local inhabitants were sheltering. These Cretans had been from the first most friendly disposed towards the defenders, and gave them milk, eggs and cooked potatoes, which were a welcome supplement to the reduced rations obtained from a depot on the Suda road. Patients were still arriving, and stretcher squads were sent to the 2/7th and 2/8th Battalions to collect wounded. Captain R. R. Anderson, R.M.O. 2/8th Battalion, had improvised stretchers from small pine trees and blankets but found they were too heavy for use. It was now imperative to hold these men, of whom about fifty had collected in the dressing station, for enemy parties were too close to Canea for patients to be sent to the hospital. Only one small body of wounded was transferred to hospital in this period.

As previously described, the New Zealand field ambulances arrived with patients at Neo Khorion on the night of 26th/27th May. This centre was no longer on the outskirts of either military or medical activity, for the front line, or rather the irregular edge of the enemy advance was flowing swiftly on. On 26th May, General Freyberg signalled to the Middle East that evacuation of Crete was inevitable. "In my opinion the limit of endurance has been reached by troops under my command here at Suda Bay."

Though the brunt of the attacks had fallen on the Suda Bay and Maleme sectors sustained assaults were also made on Retimo and Heraklion. These areas were cut off from the other defence areas and communication was almost impossible. Conditions reverted to the most primitive types of
warfare, with the defenders seeking to destroy invaders by groups or by individuals, and themselves acting in small groups. There was no front in the military sense, and it seems incredible that while parachutes dropped men, ammunition, food and medical supplies, runners were attempting to carry messages on foot through positions held by enemy groups. No contact had been made with "B" Company of the 2/7th Field Ambulance at Retimo; only long afterwards was it known what happened to the defenders of this area. The pressing needs of the Suda area had called the greater part of the 19th Australian Brigade away from participation in the action at Retimo, and under Lieut-Colonel I. Campbell the forces remaining there kept up a gallant defence. The further story of the medical detachment will be told later.

The arrival of large numbers of wounded from the overwhelmed western areas brought to the 2/1st Australian Field Ambulance a short period of intense activity. To relieve the untenable position of the British 189th Field Ambulance extra billets were secured in a school and other building at Kalives, and during the night of 26th/27th 150 patients arrived. Many of these men were exhausted; the ambulances landed by the Royal Marines were most useful, and extra stretcher parties were organised. By seven the next morning about 600 patients were under treatment. A Greek nurse arrived who had been working in the British hospital and was most helpful. Red crosses were marked out on the roofs of the buildings often made from red carpets and other materials from villages, and were in the main respected. One low level attack was made by an enemy plane with one casualty, a patient who was killed in bed by a bullet coming through the window. Russell asked Crete Force for a surgical team, but the request was refused, and the unit was warned that no security of tenure there could be expected. The steady flow of casualties continued from British and New Zealand forces and the Royal Navy, and were disposed of and treated as well as circumstances permitted. A large overflow had to be dispersed under the trees.

WITHDRAWAL TO SFAKIA

General withdrawal was now taking place from Suda Bay and Canea. This was part of the withdrawal of all forces from Crete, for which plans were made. A sea movement was planned from Heraklion, in which it was hoped that the forces in Retimo would be included. The remainder of the troops could only be taken off from beaches on the southern side of the island, where there were no harbours. The only practicable route was over the central hilly spine of Crete to Sfakia. Here there was a suitable area for embarkation by boats, though the road, which was rough and stony after winding through hilly country, degenerated to a mere track and ended at a steep escarpment traversed by a steep rocky path aptly described as a goat track. The distance was about thirty-four miles. The 19th Australian Brigade and New Zealand units had the task of fighting a rearguard action, and began by withdrawing to Neo Khorion. The plan provided for control from Suda area of the movement to Sfakia, setting
up a staging camp halfway, and policing the route and preventing stragglers from holding up progress. The New Zealand Divisional Command later attempted organised control, but no real degree of military precision was realised. The withdrawal of 3,486 troops from Heraklion was successfully carried out on the night of 28th May, but the close encirclement of Retimo by the enemy prevented more than small groups of men from escaping over the hilly country to the south coast.

Heraklion at the time of the withdrawal was threatened from the hygienic aspect as well as the military. The troops quietly abandoning their posts for the perilous sea evacuation left behind them a town in ruins. Captain Tomlinson, R.M.O. of the 2/4th Battalion, pointed out the danger of an outbreak of infectious disease from the broken sewers choked with filth and from decomposing bodies.

On 28th May, the rough road across the island to Sfakia was full of troops. Some vehicular movement was possible, but facilities for move-
ment of patients were very limited. It was inevitable that some patients must be left behind. The red cross on the vehicles used for the sick was respected by German airmen. As it was necessary for most of the men to walk all the way, the criterion of selection of patients able to join the march to the embarkation point was their ability to make their own way. Hence an order was promulgated by the British Headquarters in Crete that "no walking wounded will be permitted to start who have not a fair chance to finish the route". The staff of the 2/1st Australian Field Ambulance divided their patients into those who were able to march four miles and those who were not. There was no time to organise rations satisfactorily. Food dumps were prepared to supply men moving to Sfakia, but in the darkness and confusion these were not always used. A general basis of three days' rations carried by fit men was adopted, but shortages such as biscuits and bread reduced the value of these. Previous enemy action had destroyed a flour mill and sunk a ship carrying flour, so bread was scarce. The commander of the 2/1st Field Ambulance now had to dispose of his 600 casualties held in the improvised billets at Kalives. At five o'clock in the afternoon of 27th May there were 230 men who were able to walk, and 375 unable. He conferred with Lieut-Colonels Bull and Le Souef and decided that more than one medical officer would be needed to look after men who must be left. A warning had previously come from Crete Force that one medical officer and some orderlies would probably have to stay. Playout of the 2/1st Field Ambulance was selected from volunteers to remain, and the commanding officer decided to stay with him. Every man in the unit would have been agreeable to remain, but Russell was ordered to accompany the unit when it moved off from Kalives before midnight. Casualties were still arriving.

The rear party of the 2/1st Field Ambulance followed on at 2 a.m. on the 28th, but was lost in the hills; villagers in a little settlement gave them food, water and wine, and at daylight sent a guide with them. There were sounds of firing close by, but after a day's travel across country they caught up with the main party at dusk. The whole body moved on to Imvros, and under orders stayed there till dusk the next day. Despite instructions that movement was to take place only at night, the roads were crammed with men by day. Most of these were not soldiers but civilian Greeks and Cypriots. Water was obtainable but no rations. Meanwhile the 2/2nd Field Ambulance had moved back to its old site at Neo Khorion, even managing to get road transport for some of the wounded. On the 28th they left by night and marching through the hours of darkness stopped at Imvros with other troops. The two New Zealand ambulances also reached Imvros in a party including the 7th British General Hospital, all under the command of Lieut-Colonel Twigg the commanding officer of the 5th N.Z. Ambulance. Two trucks carrying sixty patients also arrived at Imvros, but most of the staffs and patients from medical units had to walk in straggling groups, except they could get a lift in the few passing trucks. The walking wounded collection post had been arranged at Kalives, and some rations and a pannier were left there
by the 5th N.Z. Ambulance. The position was rapidly becoming more involved; the 19th Australian and 5th New Zealand Brigades fighting as a rearguard had successfully withdrawn, but there was little time left. Wounded were brought on in vehicles whenever this was possible, but the condition of many of the vehicles was poor, some had to be thrust off the road to prevent congestion. Among the thronging marchers along the road were men whose wounds might well have prevented them from travelling, but they showed the utmost fortitude. The 2/7th Field Ambulance continued to receive patients at its dressing station till the evening of 27th May. The commanding officer was not definitely informed of the movement to Sfakia till some officers of the Royal Marines arrived with wounded and told him that the retreat was in progress. Carrying some patients on blankets the headquarters and "A" Company started back towards Neo Khorion, and after commandeering a truck for the wounded marched past the village and then dispersed. A small dressing station was established at Neo Khorion by Bull as there were wounded patients to care for, and he and Captain King remained there, later being taken prisoner. "B" Company was of course still inaccessible. In small groups the unit moved on by night, lying in concealment by day.

During the 28th May the commander of 5th New Zealand Field Ambulance and officers from the 189th British Field Ambulance noticed that considerable movement of troops was taking place on the road during daylight, and taking advantage of this, they managed to have trucks filled with wounded. Red cross flags made from red and white blankets were displayed on the trucks which safely reached the headquarters of the 2nd New Zealand Division without interference. While the 2/2nd Field Ambulance was at Imvros Lieut-Colonel Salter was informed by a German prisoner that German pilots were instructed to respect medical establishments, but only if no concealment or camouflage was attempted, if hospital areas were marked out with red crosses, as well as displaying the flags, if no steel helmets were worn, and if the men kept still or moved quietly about their work when planes flew over.

The three Australian field ambulances after passing on from Imvros were more or less reunited on the 29th, and proceeded to Komitadhes where the road ended at the steep escarpment above the beach. Part of the 2/1st Field Ambulance was lost for a time, but eventually all the men were collected. Many of them were very tired and hungry, and as diarrhoea was affecting a considerable number of the troops their general condition was not good. Food was scarce, though search of abandoned vehicles often revealed unexpected supplies. Water was available, though scarce in places, and it was fortunate that the inevitable queues at water points were not attacked from the air. Medical care was organised at some points along the road to Sfakia. The 2/2nd Field Ambulance established a dressing station in a church. A hospital was also improvised at Nebros, and at this a number of medical officers collected. A medical officer and some orderlies were needed to stay to look after fifty wounded men. By drawing lots between the single men Captain Dorney of the 2/2nd Field
Ambulance was selected, and Privates Pinkerton and Robinson from the same unit; they were promoted to lance corporal. Seven days' rations were left with this party.

**EMBARKATION**

Embarkation began on the night of 28th/29th May and continued on the next night. There were many difficulties in this manoeuvre. No signal communication existed between the top of the 500 foot escarpment and the beach, and messages had to be taken on foot. It was a laborious climb up the rocky track from the shingle beach to the top. The descent to the beach was firmly controlled; no time could be allowed for over-cautious negotiation of the steep and rocky trail, though many of the men needed assistance. Previous arrangements had been made for priority of embarkation but men were sometimes astray from their units and valuable time was lost in assembling and checking them. In a desire to prevent congestion and confusion, officers controlling movement kept the men from the immediate vicinity of the top of the cliff, but this tended to defeat its own end as the rate of movement slackened unduly, slowing the loading of the boats. The ships' officers could have handled more men in a given time. Destroyers were used for the embarkation; escorting cruisers anchored off Sfakia while the destroyers patrolled seaward with anti-aircraft cruisers, each destroyer coming in between the cruisers in turn to receive men from the beach. Landing craft were used to transport the men to the waiting ships. The size of the beach in itself limited the rate of embarkation. Sfakia is only a little fishing village, and the beach is only 150 yards long and barely 20 yards wide, too small to permit the use of ships' boats in addition to other craft.

After the first night the men had to find places for rest and protection, especially the sick and wounded, all of whom had not been taken off. The remaining wounded and others who had priority for embarkation were taken as close as possible to the beach beforehand; some found shelter in caves and under improvised cover. Time was sometimes lost during the nights of the 29th/30th and 30th/31st May collecting the men from shelters. Air attacks were frequent during the day; many of the patients showed signs of fear and anxiety, needing not only such minimum comforts as food and water but the help of reassurance. Not only the sick and wounded suffered severe trials of body, mind and spirit. Even the fit men felt keenly the toil of their weary journey, menaced by attacks from the air, which increased the number of wounded, and even added to the injuries of men wounded already. Over them brooded the uncertainty and frustration of an embarkation which for many of them would never be realised; only in utter weariness could they lose themselves in sleep. A number of collection posts for walking wounded were set up at points near the end of the road; these were cleared as word was passed back from the embarkation point. Occasionally men tried to press past wounded during the slow descent to the beach, but little trouble was experienced. There was no lack of assistance during the ordeal of the final clamber.
down the rocky face to the beach, and a donkey was used for the wounded on the last stretch of their nightmare journey.

Some doubt arose as to how many men would be embarked after the second night. The men awaiting movement felt that more could have been taken. The embarkation officer allotted one medical officer and five medical orderlies to each fifty patients. On the first night about 700 troops were embarked, including 200 wounded. Unfortunately a large scale air attack caused loss of a destroyer, and damage to two cruisers returning from Heraklion, thus embarrassing movements from Sfakia on succeeding nights. On the second night 6,000 men were taken, though it had been hoped to take 9,000. Efforts were made by General Freyberg to get more ships for the evacuation on what he realised would probably be the last night. Four destroyers left Alexandria to carry out this manoeuvre, but enemy action and mechanical defects compelled the return of two ships, and the remaining two embarked 1,500 men. It was then thought that 6,500 men were left on Crete, including more than 1,250 Australians.

It was confidently expected by the remaining forces on Crete that embarkation would continue for another two nights and the staffs of medical units made their plans accordingly to gather all the sick and wounded. The enemy had made contact with the retreating force, but the rearguard action under Major-General Weston was continued with success and little further interference from land forces was experienced. Though the number of men lifted on the night of 30th/31st May had been disappointing, the landing craft left on the previous night were still available at the beach and by having these loaded when the ships arrived on the night of 31st May/1st June a precious half hour of time was saved. The men were embarked with such expedition that the beach was promptly emptied, but an unfortunate delay resulted while more men were hurried down the last stretch of the road above and the final declivity. This last minute rush of troops was a misfortune, as many of them were perforce left behind though approximately 4,000 actually sailed with the ships. The general opinion was that too great a restriction had been placed on movement at the beach head, and on the approach to the descent. Filling the beaches might have increased the risk of attack, but ample cover was available within a few hundred yards, where men left over from an embarkation might have retired for shelter in the early morning hours. Food and water were both serious problems; although incoming ships had brought rations there were still men who had had no food for several days. Some food had been dropped by aircraft at Plaka Bay, and General Blamey on the last night asked that a ship be sent there. However, it was doubtful if troops had received any message advising the use of this beach, and it was too late for arrangements to be made. Among the last 4,000 men embarked were as many medical personnel as possible, excepting those needed to care for the men too ill or helpless to be moved. Le Souef on the afternoon of 31st May found some more wounded men and obtained stretcher bearers to move them. As an additional medical officer was required to care for the remaining men Captain Gunther of the 2/1st Field
Ambulance was chosen to remain. In arriving at a decision as to who should stay and who should be in line for departure the three Australian ambulance commanders consulted together and selected men as fairly as possible on the basis of the value of each individual for particular duties. The final list drawn up was made on the assumption that still another night would be available. This opportunity never came and Le Souef and other members of the Australian ambulances remained and were taken prisoner.

A few parties managed to escape in various kinds of craft; one contrived to reach the African coast in a landing barge after suffering great hardship and some loss of life. Others hid in the hills where they were befriended by Cretans. It is interesting that Homer speaks of a tribe known in those days as "true Cretans", who even up to the present claim that in their refuges in the "white mountains of the west now called Sfakia" they have never been conquered by invaders.¹ The majority of the British, Australian and New Zealand troops then remaining were, however, taken prisoner. It was evident that capitulation was the only course. The senior officer in charge of the remainder of the force was empowered to capitulate, as definite information had been sent to Weston personally from Wavell that no further embarkation was possible. Not only were there sick and wounded left who needed medical care, but illness was increasing, chiefly due to diarrhoeal infection, probably carried by unsterilised drinking water.

Fortunately the return of the sick and wounded to Egypt was in the main accomplished once they were placed on the destroyers, but enemy action from the air often subjected them to dangerous and trying experiences. The most unfortunate happening was the attack on H.M.S. Orion on the night of 28th/29th May from Heraklion. Bombing attacks wrecked the bridge, put the ship temporarily out of control, and caused heavy casualties among the troops on the mess decks. Many men were killed, and many others suffered severe burns, fractures and other injuries, due to blast, and were admitted to the 2/11th Australian Hospital at Alexandria.

**FURTHER EVENTS IN CRETE**

That part of the defending force which was left on the island capitulated to the Germans. A little church about a mile from the beach was used as a treatment centre at first after capitulation, but the Germans, no doubt wisely, ordered evacuation of the patients to more settled areas. This imposed a test of fortitude on the patients and endurance on the stretcher bearers, as the ground was exceedingly rough and stony. An air attack on the beach immediately after the negotiation of surrender, but before the air force could be acquainted of the situation, caused more casualties and considerable distress.

The experiences of "B" Company of the 2/7th Australian Field Ambulance at Retimo were unusual. After setting up an M.D.S. and an

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A.D.S. Major Palandri tried to secure some additional supplies from Greek stores in Canea, but was unable to obtain any. The Greek medical officers agreed to look after their own wounded. When the German attack opened on 20th May the company was isolated from its parent unit, and concern was felt for the safety of the unit commander, who left just before the heavy air assault began. From the beginning of the action it was thought wise no longer to trust to concealment and dispersal, and conspicuous red cross emblems were again used, made from red and white parachutes captured from the Germans and draped over olive trees under which, sheltered by their tent flys, the unit was working. These were respected by the German air force. After 21st May the isolated company was kept very busy with casualties. On this day an armed German group appeared, but beyond a rigid inspection did not interfere with the work. Australian, German and Greek military casualties were now coming in, and some Cretan civilians. Palandri tried to arrange for evacuation of some casualties from Suda Bay to Alexandria, but without success. In the fluctuating fighting around Retimo the Australians took a German paratroop medical aid post. On 23rd May Captain A. G. G. Carter, the medical officer of the 2/1st Australian Battalion removed wounded from the aid post in no man's land to the Australian dressing station. Here Australian and German medical officers and orderlies, worked side by side. A three hours' truce was arranged for the collection of wounded. Major Palandri and Captains Gallash and M. Mayrhofer of the Australian ambulance continued working with two German medical officers and their orderlies and several Greek medical officers with Greek medical students. They used the same operating theatre until the 24th May when the Germans were allotted to their own operating tent. There were then 147 Australian patients in the dressing station, with 252 Germans and 51 Greeks. The scarcity of medical supplies was relieved by Captains Carter and J. J. Ryan of the Australian 2/1st and 2/11th Battalions, who daily sent in captured medical stores. Some German supplies were dropped from the air, and some items were damaged. On 26th May the Germans allowed Ryan to collect wounded under the protection of the red cross, and ceased fire while this was done. He also arranged with a German officer for safe passage of British and German wounded to Georgioupolis, but a German non-commissioned officer turned back the truck. After 28th May no communication was possible with Suda or Canea. The Germans occupied the Australian post on 30th May, and sent casualties by air to Athens. One curious feature of the action in Crete was that patients were transported by air in German planes from Crete to Greece while the withdrawal was taking place and before the remaining forces capitulated.

After the force at Retimo had been captured Carter with some of the ambulance staff and some wounded were transferred to a large building in Retimo. The grounds were very restricted and were occupied by over 2,000 Greeks. The building was in a filthy condition, which distressed the German senior medical officer to whom it was reported, and who thereupon had more Australian wounded flown to Greece. The remaining
wounded were sent to Greece on 1st June; the Germans refused to return records of admissions, discharges and deaths. On 3rd June the Australian medical staff was permitted to use a part of the building separate from the Greeks; this was a relief from the point of view of hygiene which was exceedingly primitive. The diet had been very poor the ration being unboiled rice and raisins, a little bread or biscuit and black tea, but was now somewhat improved. On 6th June the final movement of this detachment back to Greece was made. This necessitated a march of twenty miles, a severe ordeal for many of the men, whose boots were worn out. Eventually some vehicles were obtained.

Le Souef and the remainder of the ambulance parties who had been left behind at Sfakia were accommodated in various sites in the Suda Bay sector. Improvised shelters at Maleme were dirty and verminous. At Kalives in the buildings occupied a few short days ago by the 2/1st Field Ambulance conditions were better, but very crowded. There were 300 to 400 patients here at first, most of whom had beds. Marks of machine-gunning from the air were found, although red crosses were marked on the roof. At Canea the site of the 7th British Hospital was used and here too beds were found for most of the men. Rations were scanty, especially at Maleme which was really only a transit camp, but in other areas the bounty of the Cretans added rice, lentils and a little meat to the fare, and the men were allowed to pick grapes. Clothing was very scarce, largely owing to the action of the men themselves who had discarded it on the way to Sfakia. Many of them bartered clothing for cigarettes with the Greeks, and numbers of wounded were flown to Greece practically without clothing. Boots, worn out on the rock tracks and the spiny plants common on the island were little protection to their sore and tired feet. It is little wonder that the Cretans have a reputation for the making of good footgear. Some sea bathing was allowed at Canea. A few things could be still bought in shops, but a German threat to search men for money led Le Souef to call in any notes held by the men and destroy them, after recording credits in their paybooks. Some patients were taken by sea to Greece, under poor conditions; the more fortunate were flown back. Their physical state was only fair. Many suffered from an inadequate diet, mostly consisting of carbohydrates, and with a caloric value of about 1,400. After the first month it was somewhat improved, but eggs and vegetables were usually unobtainable except by the charity of local inhabitants.

The sick and wounded were fortunately not kept in Crete, but were promptly returned to Greece where they were treated by the Australian hospital left there under command of Major Brooke Moore. The remainder of the captured forces were later also sent to Greece; their experiences there and in prison camps in Central Europe will be told later.
Evacuation from Crete on S.S. *Lossiebank.*
Major Susman at an aid post, Crete.

(J. C. Belisario)
APPENDIX 1

Numbers of A.I.F. Troops in Crete

(Army Records)

Estimated total of A.I.F. in Crete prior to the attack 6,486
Total number evacuated (including 526 wounded) 2,887
Unaccounted for 3,599

Complete nominal rolls of the number evacuated from Crete cannot be located, and the figure (2,887) cannot be checked but a careful investigation of the casualties in Crete gives the undermentioned figures—

A.I.F. prisoners taken in Crete 3,068
Killed in action—Crete (includes 35 killed during the evacuation) 250
Died of wounds—Crete 24
Died of other causes 7

Members of the A.I.F., who after the fall of Crete June 1941, evaded the enemy and subsequently escaped and rejoined A.I.F. in the Middle East 155

TOTAL 3,504

Accepting the number of evacuated from Crete as being correct the foregoing figures make the number of A.I.F. in Crete prior to the attack 6,391 or 95 less than the estimated figure of 6,486.

APPENDIX 2

Numbers of Troops from Crete landed at Alexandria

<table>
<thead>
<tr>
<th>Date</th>
<th>Ships</th>
<th>Embarked</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Previous to 26/27 May</td>
<td></td>
<td></td>
<td>112</td>
</tr>
<tr>
<td>26/27 May</td>
<td><em>Abdiel, Hero, Nizam</em></td>
<td>Suda</td>
<td>930</td>
</tr>
<tr>
<td>28/29 May</td>
<td><em>Orion, Dido, Kimberley, Decoy, Jackal, Hotspur</em></td>
<td>Heraklion</td>
<td>3,486</td>
</tr>
<tr>
<td>28/29 May</td>
<td><em>Napier, Nizam, Kandahar, Kelvin</em></td>
<td>Sfakia</td>
<td>680</td>
</tr>
<tr>
<td>29/30 May</td>
<td><em>Phoebe, Glengyle, Perth, Jervis, Janus, Hasty</em></td>
<td>Sfakia</td>
<td>6,029</td>
</tr>
<tr>
<td>30/31 May</td>
<td><em>Napier, Nizam</em></td>
<td>Sfakia</td>
<td>1,510</td>
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<tr>
<td>31 May/1 June</td>
<td><em>Phoebe, Abdiel, Jackal, Hotspur, Kimberley</em></td>
<td>Sfakia</td>
<td>3,710</td>
</tr>
<tr>
<td>31 May/1 June</td>
<td>By air</td>
<td></td>
<td>54</td>
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</table>

16,511

Note: The figures given above are those supplied by the army from a count of those actually landed at Alexandria. These figures are only approximately correct. Those killed on passage are not included. Allowing for men killed on passage and for probable miscounting on disembarkation it is believed that about 17,000 troops were evacuated from Crete.