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Trench talk

Graeme Hosken.

This issue

This issue is our colour one for the year. Thanks to those members who supplied coloured photographs for the cover and centre pages. Our lead article is the memoirs of a 47th Battalion RMO who spent most of his war service with that unit. While the editor found extracts of Dr John Jones' writing in Craig Deayton's 'Battle Scarred' (an excellent book), this may be the first time that the medico's account has been published since 1926, when it appeared as a three-part series in a Kyogle newspaper. Thanks to all contributors. If you have an idea for an article, please contact the Editor.

New members

Welcome to Louise Coman, Michelle Fritze, Judge Phillip Mahony, Dennis Nelson, Brett Paterson and Peter Zillman.

Craig Laffin OAM

Congratulations from the committee and membership to FFFAIF Founding President, *DIGGER* editor for issues 1 to 8, and life member **Craig Laffin** for being awarded the Order of Australia Medal (OAM) for services to the community. Craig has been heavily involved in the education community of NW Sydney as a foundation principal of two schools and has long been involved as a president and coach in NSW and Sydney Futsal. He has also been involved in community radio and sporting and multicultural events in the Richmond district of Sydney.

Belated congratulations to member **Neville Browning** of WA for receiving an OAM in 2018 for his services to the preservation of history. Neville is starting to write a history of the 16th Battalion this year, so if you have any ancestral links to this battalion and resources to share, please contact Neville (via Facebook or phone 0439 489 016).

Phil's podcasts

Member **Phil Mannell** has been producing some WWI podcasts [google 'WWI Digger History Podcast']. Phil has recently released a two-part podcast of an interview done in 1973 by Keith Tidswell with his grandfather, **Pte 16961 Jim Briant**, light horseman, cameleer, field ambulance, and a POW of the Turks in 1918. Please check out Phil's work in bringing this extensive two-part interview with a WWI veteran to the public. Phil also has a Facebook page, 'The Digger Stories Podcast', which contains links and photographs that support his podcasts.

Lambis' battlefield tour in 2019

Member **Lambis Englezos** and Maj Gen Mike O'Brien [retd], in conjunction with Boronia Travel, are planning a July 2019 small-group tour of the Western Front battlefields. If this is something that you would be interested in, Lambis requests that you send an EOI to Michelle or John Waller at 03 97962744 or e-mail michelle@boroniatravel.com.au.

Comment from a Canadian matron at Mudros 1915

In her report for October, Matron Charleson writes: 'The food question is still a difficult one; these gastro-intestinal cases need farinaceous food, and this is evidently most difficult to procure. Consequently their convalescence is slow, but, like all the Tommies, they never complain, and thoroughly appreciate the Sisters, whose every effort is on their behalf, even to the extent of buying "Rolled Oats" at exorbitant prices from local dealers, so that Tommy may have porridge for breakfast. The Australians are wonderful fellows, such physique and so unconquerable ... The last breath of one of these brave lads was a loud order: "Fall in!" – and then followed the awful silence of death.' [Matron of No. 1 Canadian Stationary Hospital, Mudros, October, 1915. Found on forum.gallipoli-association.org.] Until discovering and verifying this, I didn't know that the Canadians had a hospital on Lemnos during the Gallipoli Campaign – Ed.

Wreath added to AWM collection

Congratulations to member **Louise Coman** for having her hand-crocheted poppy wreath selected by the AWM as part of their collection showing how Australians commemorated the 100th anniversary of the Armistice. Louise's wreath features the photos of her many relatives who served in WWI.

New password for FFFAIF website

If you have not kept or remembered the new fffaif.org.au member's area password that was emailed to you on 6/1/19, contact the secretary@fffaif.org.au. A reminder that members can download *all* back issues of *DIGGER*.

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Medical officer's memoirs of the 47th Battalion

Major John Thomas Jones MC, MID, RMO.

n its formation the 47th Battalion [Qld & Tas, 12th Brigade, 4th Division] occupied a camp in the desert in Egypt, on the north side of the railway line from Cairo to Ismailia and nearly midway between the railway station at **Tel-el-Kebir** and the trenches of the old battlefield. The situation was ideal for a desert camp. The soil consisted of dry coarse sand and there was a good fall in the ground towards the south. Water of excellent quality was supplied in unlimited quantities by pipeline put down by the engineers. No difficulty was experienced in transport, owing to the close proximity to the railway station.

The number of men in the unit at its formation was very small, but the arrival of reinforcements from time to time gradually swelled the ranks. Some of these arrivals were men returning from hospital but the greater number were men sent for the first time to a unit in the field. Medical details were posted to the unit and after a couple of weeks were complete. Stretcher-bearers were chosen whenever suitable men were available, but it was only after many weeks that a full complement was obtained. Very little could be done towards their training during the first month.

A few days after the camp was set up, provision was made for the prophylactic treatment of venereal disease. Medical orderlies were instructed in the technique, and the men were notified that treatment was obtainable at any hour, day or night. Thus early in the unit's history the importance of prophylaxis was recognised and facilities were placed at the men's disposal for its application. Not only were these facilities made use of from the commencement, but were used more and more freely as time went on, and the value of the treatment fully appreciated.

The health of the men at the camp was good. This was due partly to the excellent site of the camp, and partly to the immense amount of labour employed in making it extremely sanitary. Cook houses were erected, butcher's shops put up and made fly proof, grease traps were put down, deep trench latrines of fly proof pattern were built, and incinerators made from sunbaked bricks.

A commencement was made in the inoculation of all men with triple typhoid vaccine and this had to be continued as fresh un-inoculated men joined the unit.

The Canal Zone 1916

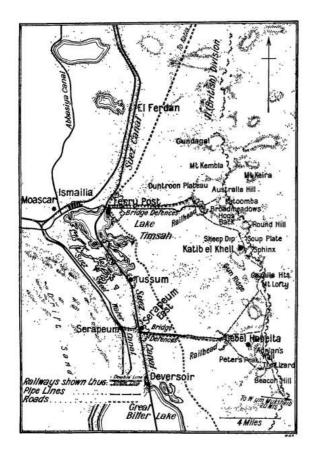
After a month spent at Tel-el-Kebir the battalion moved to **Serapeum**, arriving there in the afternoon of the fourth day. It was a trying march. Many of the men marched with full equipment, rifle and ammunition for the first time. Others had just returned from hospital. The heat during the day was intense and there was no shelter from the sun. The sand was soft and yielding and the marching was extremely heavy.

The stages under such conditions were very long. The supply of water was very limited and on the third day there was very little available until the afternoon. Many men developed abrasions and blisters of the feet. Towards the end of the march, all showed signs of exhaustion and in some this was extreme. There were several cases with marked, heart dilatation. These were later on evacuated to hospital. Fortunately the camp at Serapeum was near the Canal, and bathing in the seawater proved very refreshing.

After a few days the unit moved to a site near the light railway terminus about four miles to the east. Here a fresh camp was erected known as **Railhead Camp**. While in this camp training of water duties details and stretcher-bearers was continued vigorously. Sanitary work was conducted on the same plan as that adopted at Tel-el-Kebir and the camp erected along the same lines.

A hospital building was put up for the accommodation of sick remaining with the unit. This structure consisted of a light framework of wood, 13 feet long, 10 feet wide, and 8 feet high, with walls of double latrine canvas and roof of matting. It proved a great boon. Not only were patients suffering from minor maladies much more comfortable in a cool building, but they were able to be fed on special diet, and received far more attention than was possible when remaining in their own lines. Moreover, it afforded an opportunity to train stretcher-bearers in the care of the sick and in the practical application of the instruction imparted in lectures. So great indeed was the value of this unit hospital that as long as the unit remained in Egypt, the building was moved from place to place with it.

After a week spent at Railhead the battalion moved to the 'front line' trenches situated about four miles further east. The unit headquarters were first about 2 miles from Railhead Camp, and later further east at **Habeita Camp** [see map **next page**]. The unit occupied a very wide front and the various posts were visited by the medical officer daily. Stretcher-bearers were stationed at various posts to carry out the medical officer's instructions. Sick were brought to the hospital at headquarters, and if evacuated to hospital were collected by sand cart sent by the ambulance or more usually conveyed by camels.



The health of the men while in these areas was sound. There were a number of cases of diarrhoea, but few cases were evacuated to Ambulance. Pyrexia accompanied by headache and malaise was common, but as a rule it lasted not more than 48 hours, at the end of which time the patient was quite recovered.

Venereal disease was naturally very rare. There were several cases of dhobie itch [jock itch]. Abrasions of the feet were the most troublesome of minor maladies. Inoculations with triple typhoid vaccine were continued regularly and kept up to date. This was found to be no easy matter on account of the numerous movements of the battalion.

Training also was very difficult owing to the scattered condition of the unit, but every opportunity was taken that availed itself and good progress was made. The establishment of medical equipment was made complete. Red Cross stores were received regularly and proved very useful.

Towards the end of May the battalion returned to camp at Railhead and later to Serapeum. Men were once more able to bathe freely in the Canal and bathing parades were regularly held. On Anzac Day aquatic sports were held which proved a great success.

Left: Map showing Serapeum, Railhead [Camp] and Habeita [Camp]. Source: Bean, Vol. III, p29.

Move to France 1916

Towards the end of April orders were received that the unit was to get itself in readiness for removal to France. June 2nd it entrained at Serapeum and after a journey to Alexandria by train it embarked on HMT Caledonia [right] and sailed 3/6/16 for Marseilles. The embarking state was 27 officers and 980 other ranks. The accommodation on board was very satisfactory, and the journey was uneventful and was completed 9/6/16.

On arrival at Marseilles the unit disembarked and on the morning of the 10th entrained for **West Bailleul**. The journey from Marseilles to West Bailleul was a long but extremely pleasant one. The railway accommodation for the men



consisted of the usual French trucks, bearing the well known signs 'Hommes 40 Chevaux 8'.

Many unkind things have been said about these trucks during the war, but to men tired of the monotony, heat, flies, dust and general discomfort of the desert, and weary with frequent marches over heavy burning sand they were indeed 'wagons de luxe'.

The time was early summer, the temperature was pleasantly warm, the landscape such as the south of France and the Valley of the Rhone only can afford. The train travelled slowly, the French people were enthusiastically cordial and correspondingly kind. Is it any wonder that the 'Diggers' enjoyed every minute of the journey?

West Bailleul was reached 12/6/16 and on detraining the unit moved to billets in the Outtersteene and Merris area. To live in billets was quite a new experience to everyone, and the conditions of life were very different from those in camp. While there were certainly some advantages in living in billets there were also certain distinct drawbacks. The men were able to associate once more with civilians, to obtain beer and wine, to make small purchases in the shops and to lead a more or less normal life. It was very different to the monotony of seeing only one's mates or a few uninteresting natives and living on bare rations.

On the other hand, the billets available were sometimes not of the best, and certainly not as comfortable or as healthy as huts. Again, the men were scattered a great deal and training was much more difficult. Still, here as in every other billeting area in France, the best was made of whatever offered, and life passed pleasantly enough, thanks in a great measure to the unfailing good nature of the French civilians. On the whole, everyone, officers and men alike, at all times found the French charming people.

There were of course cases of friction but they were relatively few and were always adjusted amicably. It was generally agreed that no people in the world could have been so cheerful, so good natured, so optimistic and so brave, under most trying circumstances as they, and the more they were seen and understood the stronger this opinion grew. No Australian will return home without many recollections of acts of kindness and of helpful assistance at their hands.

In this area the billets were fairly satisfactory. They consisted mostly of sheds or barns and the men slept on straw spread on the floors. The water supply was a source of anxiety. Most of the wells were of the shallow type. The manure heaps and middens were in close proximity, as is usual in nearly all parts of Northern France and Belgium. As a consequence the water was more or less contaminated and had to be chlorinated or boiled before use. It was difficult to make men who had become used to a pure supply to realise this.

The food issue was good. At this period in the unit's history the cooking was not entirely satisfactory. There was too much waste, and not enough variety was introduced into the menu. It was some time later on that the importance of economy and good cooking was sufficiently realised throughout the army, and steps were taken to save fat, and to give instruction to cooks at properly organised schools.

Here, as in all billeting areas, latrines were a source of annoyance. There were so many billets that the number of latrines was very great. Timber was scarce, and as a consequence the open shallow pit type of latrine was used almost universally. Whenever timber was available, seats were made and used. While the shallow type of pit would have been strongly condemned in Egypt as a distinct menace to health, here the moist nature of the soil, the cooler climate, and the luxuriant vegetation rendered it almost as safe as the deeper types. Provided great care was exercised to fill in the old pits and dig fresh ones frequently it was quite a satisfactory and sanitary type. Refuse was destroyed by burning when possible, or by burying.

The period spent here was devoted to training. The health of the men was good. Baths were situated at Outtersteene and bathing parades were regularly arranged. Body lice, though more numerous than in Egypt, were not yet very troublesome. Of minor maladies, foot troubles were the most common. After months spent in Egypt moving over the yielding sand the hard roads of France caused tenderness, inflammation and abrasions. Cleanliness, attention to the fitting and repair of boots, and graduated marching exercise was advised and carried out.

July the 3rd [1916]: The unit marched to Sailly and next day to Fleurbaix, where it relieved the 1st Battalion AIF in reserve. Here it stayed eight days, being occupied mainly on fatigue work. During this period one Other Rank (OR) was killed and one officer and three ORs were wounded. July 11th the battalion was relieved by 53rd Battalion AIF and returned to Sailly and next day to Outtersteene. July 14th it entrained for Candas and marched thence to Berteaucourt les-Dames, where it went into billets and remained until 27th July.

While here training was continued vigorously. The marching of the men was still unsatisfactory, partly due to the fact that they were not yet accustomed to the altered conditions, and partly to the poor condition of the boots. The rapidity with which the soles wore out on the Headquarter-hard roads took the Quartermaster's department by surprise, and they were obliged to display much more energy than before to meet this difficulty.

The whole brigade was in the same condition and the brigade commander ordered, as a remedy for poor marching ability, what was probably the worst treatment possible, namely, long and frequent route marches. As might be readily understood, there was no improvement, although continual attention was given to the care of the feet such as provision for bathing, clean socks, and repairs to boots.

Apart from the minor disabilities connected with the feet there were not a great number reporting sick. A few cases of influenza occurred from time to time. **Corporal Hines***, who from the formation of the battalion had been attached from 12th Field Ambulance, was evacuated to hospital. He had done an immense amount of work with the unit and had been of great assistance to the Medical Officer, both in the care of the sick and in training the AMC personnel and stretcher-bearers. Sanitation in this area was very satisfactory, although it presented the same difficulties as those which occurred in all back areas used for billeting and already experienced at Outtersteene. [* Cpl 8695 Hubert Hines, 12th FAmb, detached to AMC Details, 47th Bn, later Lieutenant, 47th Bn and 45th Bn, KIA 18/9/18.]

July 27th: The unit left Berteaucourt and marched to **Herissart**, a distance of 14 miles. The men marched badly. This was due to several causes. The training had been on wrong lines. Many had tender feet. The march was hurried. The day was hot and trying. There were several steep hills. Dinner was not provided until late in the afternoon. Many were physically unable to keep up. Lastly, and this is a very important point, few men will make a trying physical effort unless there is a good reason for it.

These remarks are not made merely to criticise the action of those in command, but to suggest also a possible weakness in medical organisation. The battalion commander has attached to his unit a medical officer to whom he looks for advice for the physical well-being of his men. A brigade commander on the other hand has no such adviser attached to brigade headquarters. In the later stages of the war it became usual to attach an MO to brigade headquarters during big operations and the arrangement worked admirably. In the French Army a MO is always attached to what corresponds to our Brigade Headquarters and it would probably be a decided improvement if that arrangement were adopted in the British Army.

Pozieres 1916

July 29th: The unit moved to huts in the wood at Vadencourt where it remained two days. August 1st: Unit moved to Brickfields where it bivouacked, and next day went to Tara Hill. This was a pleasant little elevation at that time, covered for the most part with poppies and cornflowers crossed by trenches and scarred here and there by shell holes.

August 5th: The battalion moved to **Pozieres** as reserve to the front line. The march was carried out without incident. The weather was hot and the roads dusty and crowded with men, guns, and transport. Sausage Valley, along which the battalion moved, was bristling with guns and crowded with wagons, horses and men. The reserve trenches were beside a sunken road at the head of a valley, behind and to the right of Pozieres. These trenches were subjected from time to time to severe shelling and there were a number of casualties.

The Medical Officer was able to give some assistance to **Capt Elwell**, RMO 45th Battalion [later Major, Laurence Bedford Elwell AAMC, RTA 14/2/19], whose Aid Post was in the vicinity. It consisted of an old German gun pit, hastily erected. The walls consisted partly of earth, forming the bank against which it was placed, and partly of timber. The roof was supported by posts and cross bars and consisted of sheets of roofing iron, perforated in many places by shrapnel pellets and pieces of high explosive shells. Its protective properties were suggestive rather than real.

On several occasions a patient, while being attended to, received another wound from a piece of shell. It was however not marked down for destruction and was used afterwards for an ADS [advanced dressing station].

August 7th: The unit relieved the 48th Battalion in the line to the north east of Pozieres. This relief was accompanied by many casualties to both officers and men. The MO [Jones] relieved Captain Woollard [later Lieut Col, Herbert Henry Woollard AAMC, disch 23/11/19]. There was no dug-out available for an Aid Post. Wounded had to be attended to in a trench. The only intact piece of trench available was that which ran north and south in front of Headquarters dug-out and near an old tramway track. This had therefore to be used though it was inconvenient. It was the chief communication trench of two battalions to the front line. Any great collection of wounded interfered with communications. Attempts were made from time to time to find a more suitable place but without success. Arrangements were made to build an RAP [regimental aid post] some distance behind and to the right, but it was not completed during the unit's tour of duty.

Under these circumstances the obvious course was to dress the wounded and have them conveyed back as quickly as possible. This was no easy matter. It was not possible to accommodate many ambulance bearers. So great was the number of shells falling in the area, and so pulverised the soil that trenches were destroyed as fast as they were made. Even the small trench already referred to had to be repaired and attended to continually. So returning ration parties and fatigue parties had frequently to be pressed into service, and ambulance bearers brought up from the ADS [advanced dressing station] as required.

The number of casualties was very great. There was a continuous stream of wounded passing through night and day. Nearly all casualties were due to high explosive shells. There were no gassed cases. A number of cases were brought in from shell holes and dugouts in No-man's land. These unfortunate men had been lying there for varying periods up to four days. They belonged to units that had fought in this sector before it was taken over by the 47th Battalion.

There was also a number of German wounded amongst them. The character of the wounds varied considerably, from very slight wounds to those of a very serious nature, but speaking generally, the proportion of serious wounds was very high.

The time occupied in conveying patients from the front line to the RAP, a distance of from 300 to 500 yards, varied according to local conditions. As the position was a very exposed one, a patient had to be kept where he was wounded until dark. This did not often occur and wounded from the front line were generally brought in within three hours. Most of them had been dressed by the bearers and improvised splints applied where necessary. A large proportion of these had been so well attended to that they could be sent

straight on to the ADS. The casualties occurring in the more immediate vicinity of the RAP were conveyed and dressed by the MO.

There was no shortage of dressings or splints. The splints employed were often those improvised by the bearers at the RAP. Right-angled splints were mostly used for the arm and long Listons for the thigh. Morphia was injected in all cases where the patient was suffering much pain. During this engagement it was realised how simple are the supplies required by the MO at an RAP. An abundance of shell dressings, a pair of scissors, a bottle of morphia solution, and hypodermic syringe and a supply of water, are all that are absolutely essential.

There were a great number of so called 'shell shock' cases. Many of these were in reality cases of exhaustion. Owing to the intensity of the bombardment and the pulverised nature of the soil, men were continually being buried and were dug out by their companions. After one such experience a man was bruised and exhausted, and they were fortunate who did not have that unpleasant experience. When it was repeated, as it often was several times, even the strongest collapsed and had to be evacuated. There were many who reported as suffering from shell shock which was plainly of the emotional type. Many also made their way to dressing stations further back who were not for the most part genuine cases. No true cases of shell shock were seen.

The supply of food to the men was carefully attended to. Hot meals and tea were prepared at the cookers in the sunken road already mentioned and were conveyed by fatigue parties to every post.

The casualties amongst the regimental bearers were very numerous. These men did very fine work and did not spare themselves in anyway. Those that were unwounded on the third day were absolutely exhausted and fresh men had to be chosen for the work.

Towards the end of the period in the line communications with the ADS became easier. Two lines of saps were constructed, one for bearers coming up, and the other for those passing back. **Captain Winn** MO, 14th Battalion [later Major, Roy Coupland Winn MC, RTA], worked in the same RAP as Captain Jones [the author] and they were able to assist and relieve each other very satisfactorily.

During the battle the battalion, which numbered about 800 men, lost about half its men by casualties. The reason for this very high percentage of loss was due to two main causes. First the heavy and continuous artillery concentration rendered possible by the position and provoked by the importance of the sector. Secondly, the men were crowded in a small area and communications were difficult. Immediately behind was the village of Pozieres, rendered impassable by continuous heavy artillery fire. Communication had to be maintained by skirting the right edge of the village.

This was the first experience of the battalion in the front line in France and it was an experience in what was one of the most trying battles ever fought on the Western Front. From it one learned that no instruction in modern warfare, however thorough, no word imagination picture, however vivid, however fertile, can furnish one with a proper conception of the actualities of a modern battle. But at the same time one learned and appreciated the value of training.

There were many things that with a fuller knowledge on the part of the MO might have been foreseen and improved, but the thing that counts most of all in connection with the medical work of a battalion during the battle is the work of the regimental stretcher-bearers, and they did their work well. They not only displayed great skill in dressing the wounded but wonderful courage and powers of endurance in conveying men back.

August 11th [1916]: The MO Capt Jones was wounded and evacuated. His place was taken by Capt Curtin [later Major, Austin Sydney Curtin, RTA 2/4/19]. August 12th: The unit was relieved by the 48th Battalion and moved back to trenches in support. August 14th it moved back to Sausage Valley, 15th to Brickfields, 16th to Warloy, 18th to Rubempre and 19th to Berteaucourt.

After four days rest the unit moved by stages to **Talmas**, **Herissart**, **Vadencourt**, **Tara Hill** and on **30th August** relieved 16th Battalion AIF in the front line behind **Mouquet Farm**. They occupied this line until **Sept 1st** when they were relieved by 52nd Battalion. During this period in the line **Corporal Jno. Benyon MM***, AAMC, attached from 12th Field Ambulance, was killed. [* Cpl 3372 John Benyon, DOW 2/9/16]. He had done excellent work both at Pozieres and here, and his loss was very keenly felt.

The unit on being relieved moved back through **Tara Hill**, **Warloy** and **Beauvral** and entrained 8th **Sept** at **Doullens**. It detrained at **Proven** and marched to **Patricia Lines**. **Sept** 18th it moved to **Alberta Camp** and 20th inst relieved 47th Bn CEF in the line in the **Voormezeele** sector.

This period in the line was a very quiet one. The RAP was situated in the famous Brasserie on the Ypres-Kemmel Road. It provided ample accommodation and was an ideal dressing station. Sept 26th: The unit was relieved by 45th Battalion AIF and moved back to **Ridgewood Camp**. Oct 2nd it returned to the front line in the same sector and remained until Oct 14th, when it moved to Murrumbidgee Camp where it

was in support. Oct 22nd it was relieved by 26th Royal — Fusiliers and moved to Boeschepe. Oct 26th it marched to Godewaersvrelde where it entrained for Longpore in the Abbeville area. On arrival there it marched to Cocquerel and 27th inst to L'Etoile. The total casualties during the month of October had been one officer and four other ranks killed and 12 other ranks wounded.

Winter in the Somme 1916-17

3rd Oct: Lieutenant Colonel Snowden, who had commanded the battalion since its formation, resigned and Major Flintoff took command [later Lieut Col, Thomas Flintoff, RTA 31/7/18]. **Nov 1st** unit moved from L'Etoile to **Vignacourt**. Here Capt Jones returning from hospital rejoined the unit and **Captain Curtin** reported back to 12th Field Ambulance. **Nov 2nd** moved to **Flesselles**. **Nov 6th** moved to **Dernancourt** by motor lorries. Here the unit stayed five days.

Dernancourt was a small village with poor accommodation. Moreover it was extremely dirty. Sanitation had been very much neglected. There were no permanent latrines as there should have been in an area continually used by troops. Rubbish had been dumped on every vacant piece of ground in the village. Horse manure had accumulated in the horse lines and no effort had been made to cover it or remove it. A great deal of sanitary work was done to improve these awful conditions but our stay was not long enough to complete the work.

Training was continued and special measures taken to instruct all ranks in the preventative treatment of trench feet. Unfortunately, the information available was very scanty and though the general principles were understood, many minor details which experience taught to be of value were not known. As an example, it was known that any constriction applied to the legs was harmful and puttees were a source of danger. Instructions were given to see that puttees were to be put on loose and unwound from time to time. Experience taught how difficult this was to carry out and the method was afterwards adopted of leaving all puttees dumped with the packs and replacing them by sandbags during the tour of duty in the line.

Nov 11th: Moved to **Fricourt** where the unit bivouacked under rather unpleasant conditions. It had been raining rather heavily and the air had a chill in it which indicated very plainly the earnestness of winter. On the morning of the 12th the unit moved along roads wet with several inches of liquid mud and crowded with transport. It was stopped and delayed from time to time and it was well into the afternoon before **Bernafay Wood** was reached. After halting here for a meal it moved off again along roads and tracks infinitely worse than those already encountered.

About sundown it arrived at **Delville Wood**. Here the conditions were awful. No duckboards had been put down at that time, and men had to laboriously pick their way through mud and between shell holes filled with water. Anyone falling by accident into these shell holes was extricated with difficulty. After more hours of weary plodding the front line was reached and the relief carried out. Headquarters were situated at Bull Lane. The front line ran in front of Gueudecourt. The MO had an RAP in Grass Lane 400 yards in front of HQ and on the left edge of the sector.

The RAP was in two dug-outs made into a bank. Each was capable of accommodating about 10 men and they were about 20 yards from one another. They were well timbered and had overhead about 8 feet of earth, thus affording good protection against shells up to 5.9 inch. There was, in addition, a dug-out capable of accommodating two squads of ambulance bearers.

This tour of duty in the line proved a very trying one in many ways. The front-line trenches and outposts were everywhere ankle deep in mud. The support line in Cheese Road (about 50 yards in front of the RAP) and the reserve line in Bull Lane was little better. The men worked continuously to improve them but the soil was chalky and the mud reformed as quickly as it was removed. Duckboarding required much time and labour, even if the materials were available.

The weather was growing daily worse. Gum boots were only available for a small proportion of the men. It was impossible to keep the feet dry. Socks were changed and the feet rubbed with whale oil. The great difficulty was to dry the socks. Fuel was scarce and the socks were frequently absolutely impregnated with mud. After three days many men began to show signs of foot troubles. Many were attended to in the RAP. The men in the front line suffered worst. They were unable to move about as freely as they were in support and reserve. Hot meals were regularly sent up to all the men. These meals were prepared in the cookhouses at Flers and were carried up by fatigue parties. In addition, the RAP supplied hot drinks to men who were passing.

The general health considering the trying conditions was wonderfully good. There were a good many cases of exhaustion which improved with 24 hours rest and attention at the RAP. Only a very small percentage showed any signs of chest troubles. There were a certain number of cases of pyrexia, some of

which were certainly due to trench fever. At this period body lice were very troublesome. This was unavoidable owing to the difficulty of obtaining baths and fresh underclothing.

After six days in the line the number of foot troubles had increased very much. A number of cases were evacuated and many were treated at the RAP. Considering the conditions, the wonder was that these troubles were not more numerous than they were, and clearly proved how much care and attention could do to minimise them. They varied in severity. Some men who reported early had merely early inflammatory signs. These responded to treatment well. Some men reported from outpost and front line duties with marked inflammation, some with small necrotic patches developing beneath the skin, others with marked blistering. These were much more difficult cases to treat and were evacuated.

Nov 14th: Lieut Colonel Flintoff was wounded and evacuated. His loss was greatly regretted by all ranks. In addition to the confidence he inspired as a leader he took a keen personal interest in his men, and did all he could towards their comfort and welfare. Any suggestion made by the MO was always acted on promptly. His place was taken by **Major Lewis** [Eric St Leger Lewis, RTA 1/2/18].

Nov 19th: The unit moved to support in **Switch** and **Gap Trenches**. In these trenches the conditions were little better than in the front line. The trenches resembled ditches, where it was difficult to get a spot that was moderately dry to rest in. Work was at once commenced to improve these trenches by cleaning, deepening, sandbagging and draining. This however proceeded very slowly, for the battalion was not at that time numerically strong and had to furnish large parties daily for forward work.

The amount of movement involved in these fatigues was much better for the health of the men than the inactivity of the front line, and the MO was mostly concerned in the treatment of minor maladies such as abrasions, boils, etc.

Nov 27th: The battalion returned to huts at **Bernafay Wood**. The casualties for the month had been 13 other ranks killed; two officers, 54 other ranks wounded and four other ranks missing.

Dec 4th: Unit entrained Quarry Siding, detrained at Meaulte and marched to Dernancourt, where it stayed until 17th inst when it entrained once more and moved to Flesselles. It remained in this area up till the end of the month, recuperating and training. Once more men were able to obtain baths and change of underclothing, and they needed them badly. Body lice had become by this time a great menace and the large number of cases of pyrexia, some mild, some severe, from which the men suffered, were no doubt due in nearly every case to this cause.

January 2nd [1917]: The battalion moved from the **Flesselles** area to **Lahoussoye** and next day to **Dernancourt**. This village had been considerably improved by cleaning up, better sanitation, and the erection of bunks in many billets.

January 5th: The unit moved to **Sydney Camp** at **Fricourt** and next day to **Perth Camp** just to the north east of **Bernafay Wood**. There it remained for some days. The cold was now intense and life was not at all pleasant. Fuel was difficult to obtain. The water supply was interfered with by the bursting of pipes and arrangements for bathing and clean clothing considerably upset owing to the same cause. Sick parades were fairly large and evacuations to hospital reached a daily average of four.

As might be expected, foot troubles were very numerous. All those who had been affected by trench feet in its various forms, whether mild or severe, suffered greatly during the very cold weather. The treatment adopted both prophylactic and remedial for all the various foot disorders was based mainly on the French System, viz. frequent bathing and rubbing.

A supply of soft soap, camphor and talc powder had been made available and was used with very satisfactory results. To ensure that facilities were at every man's disposal for the care of the feet, it was arranged that every hut should be supplied with basins made by cutting out one side of unserviceable petrol tins. After the evening meal had been served, the cooks heated up an ample supply of water which was distributed to all the huts. Men bathed and rubbed their feet and used the remedies with the help and guidance of the battalion stretcher-bearers and AMC details.

The plan worked well. The results were good. The men found the treatment comforting and clean and had confidence in it. From this time onward the number of cases of trench feet was relatively very small. The use of whale oil was absolutely discarded. It had been found of little use. One great drawback about it was the great tendency it had to collect dirt. Cleanliness appears to be one of the most important factors in trench foot treatment, both prophylactic and remedial.

During this period there was a good deal of trench fever. Body lice were very troublesome. Clean clothing was very difficult to obtain.

January 8th: Major Imlay [later Lieut Col, Alexander Peter Imlay, DSO & Bar, RTA 23/3/19] was transferred to the battalion. On the night of 15/16th the battalion moved forward and relieved the 48th Battalion AIF in the line in front of **Gueudecourt**.

The dispositions on this occasion were very similar to those which held previously. From the medical point of view there were many improvements made possible by better knowledge of the sector, and more time and opportunities for provision. Men left their puttees dumped with their packs and used bagging as substitutes, thus diminishing the risk of constriction of the legs.

A plentiful supply of comforts had been collected. At the RAP in Grass Lane, hot soup and cocoa were supplied nightly to the men in the front line and in supports. A rest post was established near Headquarters in Bull Lane. This was used for the treatment of minor maladies and early trench feet. It was a post at which men could obtain also prophylactic treatment for trench feet.

In addition, a coffee stall was opened here and hot drinks were served out day and night. The personnel in charge of this post were AMC details and unit stretcher-bearers. The medical officer visited this post daily, held a sick parade for the company in reserve there, and carried out the supervision necessary for its efficient working.

The health of the men during this period of duty was very satisfactory. The amount of labour expended in the care of the men was amply justified. The cold was intense and the conditions awful. The greatest discomfort was experienced during periods of thaw. A severe frost abolished the mud and made it possible to move about without discomfort, but as soon as a thaw set in the mud returned in greater quantities than before. The battle casualties for this period were very light.

January 24th: The unit was relieved by 14th Battalion and moved back to **Mametz Camp**. The cold weather continued. **January 30**th: Two men died suddenly. Both men were of middle age. Neither had made any complaint of feeling unwell. The heart failure which caused their deaths was probably due to the severity of the conditions in which they had been living.

February 8/9th: The battalion returned to the line, relieving the 16th Battalion AIF. This period of duty was very similar to the last and the conditions were not different in any important degree. The health of the men was good. The battle casualties were two other ranks killed, two officers and 10 other ranks wounded. The sick evacuations for the period numbered only 11 and of these five suffered from mumps.

February 22nd: The unit was relieved by 48th Battalion and returned to **Townsville Camp** where it remained until 24th inst, when it moved back to **Mametz** and 26th inst to **Becourt**. Here it remained until **March 16th** when it entrained at **Mericourt** for the **Abbeville** area.

Here it remained for 18 days, being employed on fatigue work for the engineers. It was a very welcome change. The billets were comfortable and the work agreeable. A good deal of training was also added to the other duties. The weather was much milder than that experienced in the Albert area. The general health improved very much and the men were in excellent spirits.



Left: This photo was taken at Assevillers on 28 March, 1917. Captain Jones is second from right, standing with some of the 47th Bn's staff officers. Major Imlay is second from left. AWM C04422.

April 4th: The battalion entrained at Abbeville for Albert where it arrived early on the morning of 5th and marched to Ovillers Huts, about four miles north east of Albert. Next day it moved north east and bivouacked at night in a field between Sapignies and Bapaume. 7th inst it moved to Biefvillers. Here the

village had been almost entirely destroyed by the enemy, who blew up the houses when he retreated, but some shelter was provided in places which had escaped complete destruction.

The First Battle of Bullecourt 1917

The weather was still very severe. Mud was prevalent everywhere and the roads were not in good order. In the afternoon 10^{th} inst orders were received to move forward to **Vraucourt**. This was carried out and Vraucourt was reached after it became dark. Here the battalion halted, awaiting orders. The village had been entirely destroyed and men sought places of shelter among the ruins, along sunken roads, and in holes excavated in banks. Some protection was necessary against the bitter cold. Snow lay thick on the ground and the roads were deep in mud.

About midnight all moved off towards **Noreuil** to be in readiness for the impending attack on the Hindenburg Line. After drawing supplies of ammunition behind Noreuil we moved along the sunken road running between Noreuil and **Longatte**. Two companies were detached and sent to assist the 46th Battalion AIF. The remainder of the battalion was kept in reserve. Headquarters occupied a position in the sunken road already mentioned. The medical officer and his personnel remained close to headquarters. Owing to the disposition of the men, no RAP was established, but the MO remained at hand ready to move to any point to which the battalion might be ordered. Two RAPs were already established in this sunken road. One was occupied by the MO 48th Battalion, the other was used conjointly by MOs of the 51st and 46th Battalions.

The battle opened at 4.30 am on the 11th [April 1917] just as the first light of dawn illuminated the landscape. The story of the fight, the absence of preliminary bombardment, the failure of the tanks, the capture of the German trenches between Bullecourt and Queant by the infantry of the 4th Australian Division, the failure on the left of the 62nd British Division, are matters calling for no comment by the medical section. It is sufficient to mention that the 4th Australian Division, owing to failure on the rest of the line, were in an untenable position, that they were heavily counter-attacked later in the day by the enemy, and that this counter-attack delivered from both flanks forced them back to their original position.

The casualties in the division were naturally very heavy. The 47th Battalion lost two officers and 19 other ranks killed; three officers 68 other ranks wounded; and 56 missing. The wounded began to reach the RAPs shortly after the attack began. The numbers gradually increased and they came in a continuous stream during the whole day. The MO 47th Battalion was able to give assistance at the RAP of 46th and 51st Battalions, and the wounded, considering the number that came in, were passed through quickly. Some delay was caused later in the day by the disappearance of ambulance bearers, so the number of men carrying wounded was supplemented by men detailed for the work by the COs 47th and 51st Battalions.

A complaint was made by the CO 51st Battalion that the MO 47th Battalion refused the aid of stretcher-bearers from 47th Battalion to assist bearers of 51st Battalion. This complaint originated from a statement made by **Captain Smalpage**, MO 51st Battalion [Edward Stanley Smalpage, RTA 21/12/17]. Captain Smalpage did apply to MO 47th Battalion for bearers. Moving into action stretcher-bearers are invariably posted to their companies. That was done on this occasion. Two companies of 47th Battalion with their stretcher-bearers had been detached to another battalion. The remaining two companies were in reserve and at any moment may have been sent forward. Their bearers naturally had to remain with them. What the MO 47th Battalion did was to obtain untrained men from CO 47th Battalion to act as bearers and as many were supplied as could be spared by CO.

Even when the battalion was withdrawn in the evening, 40 remained behind to assist in clearing the battlefield. This incident brings out very clearly one important point. Many medical officers reach the field with little knowledge of field work. It is very important that a medical officer should pass through a course of training before being sent out. It is inconceivable that a complaint such as the one just mentioned should have originated from a medical officer possessed with even an elementary knowledge of his work.

In the evening of 11th inst the 47th Battalion was ordered back to **Vraucourt**. Here they spent the night amongst the ruins, snow and discomfort of the village. Next morning to add to the mental depression and the surrounding misery, a number of men were killed and wounded through the accidental explosion of several hand grenades. Later in the day the unit moved back to **Bapaume** and entrained that night for Albert.

On arriving at Albert on the morning of the 13th inst [the unit] moved out to **Crucifix Camp** at **Fricourt**, and four days later marched to **Henencourt Wood Camp**. Here Temporary Lieutenant Colonel Lewis became ill and was evacuated. Major Imlay then took command.

April 22nd: The unit moved to **Lavieville**. There was an increase of sickness during this period. There were many causes for this. The psychological effect of the Battle of Bullecourt must not be ignored. The men on returning from the line were very depressed and despondent. Nor was this to be wondered at. A battle in which they had fought heroically and suffered heavy casualties had proved a failure through no fault of their own. They had also been exposed to very severe weather conditions and the camp at Henencourt was very unhealthy.

About this time too, great difficulty was experienced in obtaining clean clothing. Very often that supplied as clean was in reality in a filthy condition and verminous. Why this should have occurred it is difficult to say. If clothes were put through a laundry it surely was possible to supervise the work. As a consequence of the prevalence of lice there were several cases of trench fever There were also many cases of pyrexia of a mild type, lasting two or three days. It was impossible to ascribe a cause for the increase in temperature with its attendant malaise, but in all probability lice played an important part as a causal agent.

May 14th: The unit moved to Midlands Hut, Aveluy, and May 16th entrained for Bailleul West, and on arrival there moved into billets in Steenwerck area. May 30th: Moved to Bulford Camp, just south of Neuve Eglise. The health of the men had now improved very much. The weather was that of early summer. Baths and clean clothing were available and bathing parades were arranged for frequently. The camp was very clean, healthy and sanitary. Boils were the most common cause of indisposition. The average daily sick parades numbered only 29.1. Reinforcements had joined the battalion and it was up to strength. Training was actively carried on.

Messines 1917

The whole of the line in the Messines Sector was reconnoitred by small parties of officers, NCOs and many of the men, including the medical personnel. In addition, a large ground map had been prepared by the engineers near Romarin and this was thoroughly studied by all ranks. Perhaps for no battle during the whole war were preparations so thorough or preliminary work so good as for the attack on Messines. The date of the attack was a matter for much speculation but was kept a profound secret. The MO attended a conference held by the ADMS [Assistant Director of Medical Services] and also was present at those held by the CO of the battalion.

June 7th: The first attack was launched in the early hours of the morning and the first objective, 'The Black Line', taken. A second attack was to take place some hours later in order to capture a second objective, 'The Green Line'. The task set for the 4th Division was the capture of the Green Line of the New Zealand Division's sector. The 47th Battalion moved out from Bulford Camp about 9 am. It was a perfect day. The sun shone brightly and the men, laden as they were with all the impedimenta necessary in a modern battle, found it distinctly warm.

They reached the Black Line with very few casualties. At 3.30 pm the second 'hop-over' took place. The fight was a fierce one and there were delays due to stiff opposition and counter-attacks before the final objective was reached and the Green Line established. The MO moved forward with the CO and reached the right edge of **Messines** just after the second attack was launched. Fighting was going on fiercely and the arrival of the party at this spot was greeted by a rapid succession of whizz-bangs. A search was made for a suitable place for a RAP.

Headquarters took for their accommodation a concrete pill-box which had evidently been used by the enemy for a similar purpose. It had several rooms but none of them had a door wide enough to admit a stretcher. At one end of it was a wicker structure protected on three sides by a bank of earth. The fourth side opened on a communication sap. It was well screened from observation. The drawback about it was that the overhead protection was very poor. This being the best place available it was used as an RAP. The ADMS was notified and communication established with the ADS Spring Street. This ADS ['Spring Street'] had been arranged for with fine forethought. It consisted of several concrete structures built close to the original front line. It had been well camouflaged and to escape attention had not been used until the attack started. It was consequently a well protected dressing station situated well forward.

Nearly all the wounded from the first attack and many of the earlier cases from the second attack were carried there by the regimental stretcher-bearers. The personnel taken by the MO consisted of the AMC corporal and the medical orderly and one runner. Experience has taught that it is unwise for a MO to take more than two or three with him during an offensive operation. To take more exposes men unnecessarily without increasing efficiency

The equipment taken in consisted of a large number of shell dressings, morphia, hypodermic syringe, 3 doz. roller bandages, 1lb cotton wool, a few splints, several pairs of scissors, 3 tourniquets, a primus stove and water.

A search was made for the RAP of the New Zealand battalion in that sector but only shell holes were found in the spot which corresponded to the map location given by the ADS. The New Zealand Division had charge of the evacuation for the whole sector for 24 hours, after which time it passed to the 4th Division. No bearers however arrived during the first night and wounded were conveyed back to the ADS by regimental bearers or by passing fatigue parties. The casualties came through in a constant stream all night but they were dealt with without congestion. Early next morning the RAP of the New Zealanders was located. It was

established in an old enemy pill-box, about 300 yards to the right. The MO was very busy and in need of more bearers.

Shortly afterwards Captain Collins, MO 48th Battalion, arrived at 47th Battalion RAP. His battalion had been sent forward to assist the 47th and 45th Battalions. By this time bearers of the 4th Divisional [Field] Ambulances had come forward in sufficient numbers to keep the RAP clear. The corporal and medical orderly of 47th Battalion were sent to assist the MO of the New Zealand battalion. He was very grateful for their assistance as he needed some help. His RAP, like the 47th, was receiving men from various units, including many from the 3rd Australian Division.

The MO 45th Battalion, whose aid post was in front and to the left of 47th Battalion Headquarters, was by this time in telephonic communication. This proved useful as he was able to ring through messages as to the number of wounded he had and number of bearers he required for their removal.

Captain Winn, the bearer captain for the Ambulance, came up and stayed for some time at the RAP. All was going smoothly when the enemy counter-attacked strongly and put down a heavy barrage. During this heavy barrage the RAP was struck by a direct hit and four ambulance bearers and the 48th Battalion orderly were killed and two others wounded. There were in addition many casualties in the forward area.

That afternoon **Major St Vincent Welsh*** who had charge of the evacuations, wrote saying that he would refuse to send any more bearers until another RAP was established in a safer locality. This action was strongly to be condemned, as the position of the RAP is a matter over which the CO of the battalion concerned has control, and the duty of the Ambulance is to clear it. [* Unidentified, possibly from NZ Division. Interestingly, his name was redacted from *Vol. I* of the Medical History, where AG Butler quoted from this paragraph by Captain Jones.]

As it was late in the day, the MOs 47th and 48th Battalions made the best provision possible for evacuating their wounded, and early next morning made a very careful examination of the surrounding area. No suitable structure was found that could be used, although a site was found suitable for the construction of a dug-out. At that time, however, neither the men nor the materials were available for the work and the ADS were notified accordingly.

On the arrival of a number of squads of bearers shortly afterwards, evacuation was continued very actively. The interruption, however, caused some delay, especially in clearing the RAP of 45th Battalion. By the evening of the **9**th [June] all posts were clear and from that time onward there were no difficulties.

The medical work during this battle was on the whole very good. The number of casualties in this sector was fairly heavy. The 47th Battalion alone had the following losses. Killed: officers 8; wounded 7; gassed 0; missing 0; total casualties 15. Other Ranks: killed 68; wounded 319; gassed 2; missing 37; total casualties 426. Killed 76; wounded 326; gassed 2; missing 37; total [battalion] casualties 441.

Still there was never at any time very much congestion or undue delay in passing the wounded through to the ADS.

There were several factors which contributed to lessen the difficulties in the work of evacuation. The arrangements made before the battle had been good. The men were quite familiar with the locality. The ADS was well advanced. The weather was fine, the soil dry, and moving about was not difficult. The battle was a very successful one, all objectives being taken and the front line consolidated within a very short time from the commencement of the battle The evacuation of wounded during a successful engagement is naturally much easier than during an unsuccessful one.

One striking feature about the casualties in this battle was the very small number of shell-shock cases. There were none seen at all by the MO 47th Battalion yet at times the enemy barrages were very heavy and long sustained. The reasons for this appeared to be: (1) the battle was one of movement (2) the men knew what they had to expect (3) the battle was successful. During an engagement in which there is movement and excitement, shell-shock cases are rare; again too, cases are not so common among men who have been under fire before as among fresh troops. Men know what they have to face and their inclinations are dominated by will power. Perhaps the greatest psychic factor of a battle is the knowledge of its success or failure. War neuroses have never been found numerous among tried troops in any successful battle of movement.

The regimental stretcher-bearers not only of the 47th Battalion but of all the battalions engaged did excellently. The reasons why they did so well on all occasions were numerous. They were, in the first place, carefully chosen. Good physique, pluck and a liking for the work were essential. Secondly, they were well looked after out of the line. The MO looked upon them as his special unit and trained them himself. Men knew that if they had any cause for complaint the MO would attend to the matter without delay. Lastly their training was varied, so that it never grew monotonous and they each in turn were given responsibilities. They were expected to take their turn at drill, at cooking for patients and at nursing the minor cases of sickness in

the rest billet. When the time came for supreme efforts and great risks they never failed to give a good account of themselves.

During this battle 'Thomas splints' were used by RMOs. They were not at that time very well known in forward work and their value not properly appreciated, but they soon became popular. They were one of the most valuable aids to medical work in the field. Their proper application was at first a source of some difficulty, until it was understood that, in common with all dressings in the field, free removal of clothing is an essential preliminary to their proper adjustment.

June 12th: The unit was relieved by 46th Battalion and returned to Winter Trench and next day to Bulford Camp. June 14th: Moved to la Creche and 16th inst went by bus to Renescure. June 20th: It embussed and moved to Berquin area, where it was billeted in the village of Doulieu. While here the unit refitted, and trained. 29th inst: Moved to Romarin Camp behind Hill 63, and next day it moved to dug-outs in Hill 63 itself.

The general health of the men during the month had been very satisfactory. Most of the maladies were of a minor nature. Advantage was taken at every opportunity to obtain necessary dental attention. The importance of this was more and more recognised as time went on. There is no doubt that the care of the teeth as provided for in the AIF contributed in no small degree to the excellent state of health of the men. The dental officers and their staff as a rule showed great interest and exhibited a great amount of energy in their work.

The efficiency of the dental units improved as time went on. This was probably due to greater personal interest and the development of an esprit de corps. The personnel of a dental unit took a just pride in the brigade to which they were attached and they felt that the dental efficiency of the men was their especial care.

The accommodation tor the men at Hill 63 consisted of dug-outs made by tunnelling into the hill. They were the best dug-outs constructed by the British that were seen on the Western Front. It seems strange that when the Germans very early in the war realised the importance of dug-outs, and concrete 'pill-boxes' where dug-outs could not be built, as a means of saving their men, the British paid very little attention to them and were content to make use of very indifferent shelters.

The tunnels on Hill 63 were an exception and were not only very spacious but gave excellent protection against shells of all calibres. Certainly during the unit's tour of duty as support in this sector they were the means of saving many lives. There were, however, some drawbacks about even such excellent things as well protected dug-outs. They were by no means healthy. Living underground in damp rooms which had been used constantly by men for a long time was certainly not ideal from the point of view of hygiene, but what brought trouble was the soldiers' *bete noir*, body lice.

Unfortunately at that time it was impossible to deal effectively with these parasites. The Russian Delouser was not then known, baths were not possible in this forward area. As a consequence trench fever was fairly common. With our present knowledge I am convinced that trench fever could be absolutely eliminated from modern warfare. Since the louse is responsible for the spread of the disease, its destruction is essential. (One steam thresh disinfector on Foden Lorry with which each division was provided, excellent though it was, could not deal with this immense task.)

No effective means of doing this work was found until the Russian Delouser was introduced about the end of 1918. This proved to be so simple in construction that every unit could construct one for its own use in a couple of days (it required very little fuel to work it), it could deal with all the clothing and blankets of the men whether in the line, in support, in reserve, or in rest. Had such knowledge been available in the early days of the war, many thousands of men of the AIF would have been saved from the sufferings and dangers of trench fever, and the efficiency of the force considerably increased.

The work of the unit during this tour of duty consisted of various fatigues for the forward area. Though strenuous, these fatigues were for regular periods and on completion of their work the men were able to rest in comfort and security in their dug-outs.

The general health of the men was good. Minor cases of sickness were sent back to the battalion's rest billet at Romarin Camp, situated about two miles to the rear. This billet was looked after by several medical personnel and was visited by the MO daily.

The Advanced Dressing Station for this sector was in a building known as **Underhill Farm**, just behind Hill 63, and sick and wounded were rapidly passed through. Medical comforts and Red Cross supplies were ample, and here, as elsewhere were replaced when used with great promptness.

July 18th: The unit was withdrawn and moved to **Doulieu** area where it went into billets and stayed for some time training. **August 6th**: It moved once more, stayed that night at **Stove Farm** and next day moved up and relieved the 13th Battalion KKRC on the night of 7/8th in **Wytschaete** with HQs at every

house. This period of duty was a very quiet one. The number of casualties was not very high. The weather was good and the ground fairly dry, although the situation was low-lying.

Dug-outs were not possible in this sector. The only protection available was either trenches or old German pill-boxes The RAP was a concrete pill-box affording good protection. It was unfortunately on the left flank of the sector and was, as a consequence, a long way from the right portion of the sector. However it was the only structure available and it was near a road along which the wounded had to be evacuated to the ADS.

August 14th [1917]: The unit was relieved by 46th Battalion AIF and moved to support with HQs at **Torrken House**. The RAP was a shelter built of sandbags roofed with iron and screened by a hedge. It was situated just behind HQs. The support trenches were in the immediate vicinity.

While here the battalion had one of those visitations of ill-fortune which occasionally fall to the lot of every unit. The sector was a quiet one. The trenches were fairly good. Occasionally the area was shelled but not severely, yet there were a large number of casualties. By ill luck shells fell directly on to trenches where men were or exploded nearby, causing casualties among the cooks. Another killed a transport driver. These misfortunes befell the men both by night and by day. It is the experience of every unit; battalions like individuals have periods of good luck and periods of bad. This was a period of bad luck for the 47th.

The casualties for the tour in front line and support were 29 other ranks killed, 59 other ranks wounded, one other rank missing. **August 21**st: unit was relieved by the 18th Battalion, Kings Liverpool Regiment, and moved to Aldershot Camp and **August 28**th to Candescure and **29**th to billets in Eyhoflick, a small village to the east of St Omer.

The health of the unit during the month was excellent. The daily sick parades averaged only 12 while the daily evacuations were only 1.25. The most common maladies were those caused by exposure such as bronchitis and common colds. There was unfortunately a good many cases of venereal disease. It was the experience of this unit that nearly all the cases of venereal disease originated in England while men were on leave. Very few cases ever arose in France and from this unit's experience it could be stated most emphatically that France was freer from venereal disease than any country that the unit was associated with, although she had within her borders millions of troops from all parts of the world, and whatever the methods were in achieving such a result she set an example which the rest of the world should follow.

Sept 3rd. Unit embussed and moved to the **Bonnay** area. HQs and two companies were billeted in **Fruges** and the remainder in **Hezecques**, about 3 miles distant. The stay here was a very pleasant one and was devoted to training and recreation. Water was plentiful and men were able to bathe frequently.

It was possible to obtain a limited supply of green vegetables to supplement the rations. At this time the cooking in the unit had been much improved and the most was made of the rations issued. It was truly remarkable the benefit derived from variations in the daily menu, the advantages obtained by appetising dishes prepared by men who had been trained in cooking schools, and the economy effected by the utilisation of every part of the ration issued.

Passchendaele 1917

Sept 19th: The unit embussed and moved to **Staple**, not far from **Hazebrouck**, and **21st** marched to **Steenvorde**. **Sept 24th**: Moved to **Canal area** near **Ypres** and **25th** to the dug-outs in the **Ramparts** of Ypres. **Sept 28th**: Moved to support line to the east of Ypres with HQ at **Garter Point**. **Sept 30th**: Unit was relieved by 9th Battalion and moved to reserve line at **Westhoek Ridge**, the fighting in this sector had recently been very severe.



Left: Stretcher-bearers of the 47th Battalion AIF making their way up to the front-line trenches between 'Albania' and 'Helles', in the Ypres sector, 28 September, 1917. AWM E00773.

From Ypres forward to the front line was really one huge battlefield, shelled continually by guns of all calibres and bombed frequently by aeroplanes. The soil was torn with shell holes and pitted everywhere by huge cavities. The weather had been unsettled as the autumn season had set in and rain fell frequently. The area was saturated by water and mud lay everywhere. It was difficult to move, except along the roads or on duckboard tracks. These conditions were bad and they continued to

grow daily worse. Up till the end of the month however the health of the men was very good and the total sick evacuations for the month numbered only 29.

Oct 1st: The battalion was relieved by 11th Battalion AIF and moved back to Montreal Camp where it embussed and moved to Steenvorde area, where it remained for some days. Oct 10th: Unit entrained at Abeele Station and detrained at Ypres and moved to Jordan area just in front of Ypres and later in the day to Anzac Ridge. Oct 11th: The front line was reconnoitred and preparations made for an attack. The MO took an active part in this work. He went over the ground, studied maps, collected necessary equipment, and instructed his NCOs.

The battle area had become much worse since the 1st October, and the difficulties in sustaining active operations had materially increased. It was a matter of considerable difficulty to move over the area encumbered by equipment. To bring up supplies in the enormous quantities required for an offensive operation was a task so huge that words fail to describe it adequately. It must suffice to say that despite the mud, the shell holes, the awful condition of the roads, everything was got ready. About 11 pm the MO moved forward with his CO. They travelled through the darkness, groping their way along duck-board tracks or through the mud and finally after a weary journey of several hours arrived at a pill-box chosen to be HQs for 47th and 48th Battalions. Pill-boxes here were very few, shelter of any sort was difficult to obtain. The MO had to be content with a small chamber in HQs. It was very small and not very suitable for a RAP but was the only structure available.

The attack started at daybreak on the morning of 12th. Immediately a heavy enemy barrage fell on all the forward area, including HQs. Here the casualties were numerous. The men attached to HQs of both 47th and 48th were in trenches round about and practically all were killed or wounded. In the 47th alone 24 were killed and 10 wounded in the immediate neighbourhood of the pill-box. The wounded were attended to and walking cases sent back.

Messengers were sent to the ADS at the **Soda Factory** at **Zonnebeke** to guide Ambulance stretcherbearers forward but no bearers came. It was found afterwards that of the three runners sent at different times, two were killed and the other wounded. Meantime, wounded had to be accommodated in the trenches or shell holes.



Left: View of the swamps of Zonnebeke on the day of the First Battle of Passchendaele (12/10/17). This photograph indicates the general condition of all depressions on the battlefield on the day of the main assault upon Passchendaele by the 3rd Australian and the New Zealand Divisions, the 4th Division attacking on the flank, AWM E01200.

During the whole day the battle continued fiercely and the shell fire did not relax for a moment. The situation was a very trying one, for the only hope of saving badly wounded men is to have them conveyed back promptly and there was no means of doing this. The success or failure of the battle was in suspense too, for although the 4th Division had advanced to its objective, the result of the attack by

the 3rd Division on the left was in doubt for some time and when news did eventually come through it was discouraging.

Early in the afternoon the AMC Corporal and the Medical Orderly were wounded and the MO was left without any assistance. The situation, trying though it was, was yet to reach its climax. Shortly after the Corporal and Medical Orderly were sent away as walking cases, the enemy counter-attacked strongly. The 4th Division being outflanked was forced to withdraw, having many casualties during the action. The COs 47th and 48th Battalions also were wounded about this time. Fortunately just after this, as darkness began to fall, Capt Collins MO 48th arrived, bringing with him several squads of Ambulance bearers.

It was the first relief to a tension becoming more and more intolerable. The more urgent cases were sent away at once and the others were removed later on. During the night all the wounded that could be found were sent away and next morning the MO 47th returned to the ADS at **Zonnebeke**, leaving Capt Collins in charge of the RAP. The area around the RAP was littered with dead, which had to be piled in heaps to clear the trenches, and from the RAP back to the ADS, a distance of over a mile, dead lay every few

yards. From a Medical Officer's point of view this action was one of the most depressing that could be imagined.

The unit was relieved 14th inst and moved back to the Canal Dugouts and just behind Ypres and 19th to Gordon area and 22nd to Montreal Camp. 26th inst the unit entrained at Brandhoek, detrained at Wizernes and moved thence by bus to Delettes, where it remained for some days.

The health of the men during the month, notwithstanding the exposure to which they had been subjected, was very satisfactory. The total number evacuated for the month was 46. The prevailing complaint was the common cold.

Nov 15th: The battalion marched out and moved by easy daily stages to the **Abbeville** area and **22nd** inst arrived at **Bethencourt**, where it went into billets. The march was well arranged, the stages were easy, the accommodation en route excellent. The roads were in good order. The weather was fine. The men did the march in very good style. The sick were collected by the Ambulance daily. There were no cases of falling out. This all goes to show how well men will march even when carrying full equipment if the arrangements are good, the stages short, and the rests adequate.

During the month the sick wastage was very low, in fact it proved to be the smallest in the division, upon which fact the unit naturally congratulated itself. The 4th Division had hoped and expected to remain in this area for a much needed and long promised rest. It was an ideal area. The billets were good. The area was right away from the line and near the sea coast.

In reserve near Peronne 1917

Everyone was quite satisfied and quite happy when early in December orders were received to move forward at once. **Dec 5**th: The unit entrained and moved to **Peronne**. Upon detraining it marched to **Haut Allaines**, a ruined village about three miles north of Peronne, where it occupied a camp just off the edge of the village.

This camp was found to be in a very unsanitary condition and it was found necessary to put in a great deal of work to correct this. The whole brigade was in the immediate vicinity and a considerable distance from the other brigades of the division. The necessity for baths, which would be at all times available, was soon apparent. It was arranged therefore by Brigade HQ that baths should be erected in the camp. Assisted by the engineers this was soon accomplished and very satisfactory baths were available for the men during their stay here.

The idea of a brigade on all occasions arranging for its own baths was one which came increasingly into favour. The importance of baths in connection with health became more and more apparent. Not only were they important in keeping down body lice, but they were an aid to health in many other ways. Boils and carbuncles, sore feet, septic fingers and many other minor maladies are prevented by cleanliness.

The large baths found in many areas, while they are very useful, are for long periods not available, and it is during those long periods that troubles arise which are felt for months afterwards and which incapacitate many of the men. The remedy is simple. The apparatus necessary to bathe a brigade is very small and very light, it need only consist of a small boiler, a pump and a few yards of piping. It could be carried by each brigade, could be erected anywhere, and would provide the men at all times with bathing facilities. It should be part of a brigade's equipment, either during war or in peace manoeuvres.

When the unit arrived at Haut Allaines the weather was very cold. It continued to grow colder and snow fell frequently. The men were engaged in fatigue work and training and the exercise kept them in very good health. During the whole month there were only 15 evacuated to hospital, which indicated that the general health was very satisfactory.

Right: View of the tent lines of the 12th Brigade camp at Haut Allaines. Note the heavy layer of snow covering the ground. The 12th Brigade was in this area as part of the British reserve after the Battle of Cambrai. AWM E01554.



The men passed the Christmas and New Year seasons in this camp. While disappointed that the anticipated period of rest had not materialised, they accepted the inevitable, and aided by gifts from the Comforts Fund and supplies from the brigade canteen, passed the festive season in the most cheerful manner possible under the circumstances.

Source: Major Jones' account of his time with the 47th Battalion was published in the 'Kyogle Examiner' in four parts, on 9, 13, 16 and 23 January, 1926, under the heading, 'A Medico's diary: History of the 47th Battalion'. Jones was transferred from the 47th Battalion in November 1917, which explains why his account of the battalion ends in December of that year.

Notes: (1) Subheadings have been added by the Editor. (2) Spelling of some place names and surnames has been corrected.

The writer: **John Thomas Jones** was a 24 year old medical practitioner from Albury, with no prior military service, when he enlisted at Albury, NSW, on 19 October, 1915. He had been practising in Kyogle and then in Sydney as an assistant medical officer at the Coast Hospital, where he specialised in 'medical and surgical and contagious diseases'. Prior to leaving for medical training in Sydney in 1910, Jones had been superintendent of the Albury Hospital. Jones nominated his sister, Miss Eleanor Elizabeth Jones of Dean Street, Albury, as his next of kin. He sailed on the *Berrima* on 17 December, 1915, and was attached to the 14th Field Artillery Brigade Headquarters at Tel-el-Kebir on 2 February, 1916.

Captain Jones was attached to the 47th Battalion on 10 March, 1916, and disembarked in Marseilles, France, on 9 June. At Pozieres on 12 [sic] August, Jones was wounded in action, receiving a penetrating shell wound to the right calf. A fragment of shell was removed at No. 3 Casualty Clearing Station and he was sent to the 7th Stationary Hospital at Boulogne on 14 August. The wound turned septic and Jones was transferred to the 3rd London General Hospital at Wandsworth, UK, where he was admitted on 16 August. Following an X-ray, small metal fragments were shown to be still in his leg.

Jones was recommended for a Military Cross on 10 October, 1916. The recommendation by **Lieutenant Colonel Snowden** [47th Bn] reads: From the arrival of the battalion in France until evacuated wounded on August 10th, this officer has been untiring in his devotion to duty. From 7th August until evacuated wounded 10th August [sic], he worked unceasingly in a dressing station which was continually shelled. (The MC was subsequently awarded on 29 December, 1916.)

Jones returned to the 47th Battalion on 1 November, 1916. Exactly one year later, on 1/11/17, he was reallocated to the 12th Field Ambulance. Between 9 and 14 November, 1917, Jones was detached to the 47th Battalion before being detached to duty with the 4th Divisional Train the next day (length of detachment not known).

Jones was MID in **Sir Douglas Haig**'s despatch of 7/11/17 for distinguished and gallant services and devotion to duty in the field during the period from 27 February to midnight 20/21 September 1917.

Lieutenant Colonel Imlay of the 47th added further details in the MID recommendation: For continuous gallantry in action tending wounded under fire and consistent devotion to duty as RMO, embracing all engagements in which battalion has participated (from 25th February to 20th September 1917), notably Bullecourt, April 1917, and Messines, June 1917. This officer has done wonderful work in the field in his capacity as Medical Officer, his organisation of his Staff has achieved excellent results in conserving the health of the troops. He has always set a splendid example of self denial and bravery to all ranks and has rendered valuable services.

John had leave to the UK from 27 December, 1917, to 11 January, 1918, where he stayed at the Hotel Cecil in the Strand. On 27 August, 1918, John Jones was transferred to Administrative Headquarters AIF London for duty with the Director of Medical Services. He was promoted to major on 10 September and returned to France for duty with the AAMC on 13 September. On 25 September, Jones began duty at the 2nd Australian General Hospital in France.

On 12 October, 1918, Dr Jones was posted back to the 12th Field Ambulance (4th Division) from the 2nd AGH. He transferred to the 2nd Field Ambulance on 27 October. Jones returned to duty in London on 18 January, 1919. From 8 February to 30 May, 1919, Jones was on non-military employment at 11 Markham Square, Chelsea, where he undertook further medical training.

John Jones returned to Australia on the *Miltiades*, leaving Plymouth on 19 June, 1919. His appointment as an officer in the AIF was terminated on 28 October, 1919. In 1944, the Albury Sub-branch of the RSS&AILA was seeking details of Jones' military service so they could arrange a headstone on his grave in the Albury Cemetery. His obituary in the 'Kyogle Examiner' (1/5/42) reads:

The death occurred at his home at Mittagong last week [April 1942] of Dr John Thomas Jones, a well known North Coast doctor, after an illness lasting about eight months. Prior to and after the last war, the late Dr Jones practised his profession at Kyogle. He saw service in the war, and was awarded the Military Cross. He was twice married. His first wife predeceased him about eight years ago at Kyogle. Soon afterwards Dr Jones retired from active practice and made his home at Woolgoolga, where he resided until about four years ago. About six years ago he married Nurse May Warby, of Woolgoolga. In 1938 they sold their Woolgoolga property and went to reside at Bundanoon, later moving to Mittagong. The late Dr Jones was well-known on the Upper Richmond River. The late Dr Jones was 58 years of age. There were no children of either marriage. He was a native of Albury, and the funeral took place at that town.