

and cockpit disappeared and naval surgeons lost their prescriptive station in action. Then the captain and medical officer selected the place they considered most suitable, and in this way the location of the surgeon's station is still settled. Owing to the variations in ship construction, it must be so settled until ships are fitted with an operating room below the water-line. It appeared to him that the operating room should be included in the internal arrangement of every modern battleship and cruiser. Among other uses, it would provide protection for the lives of the staff and for the surgical instruments and appliances, which was necessary if such disasters as that which occurred to the Japanese ship *Hiyei* at the battle of Yalu were to be avoided. In this ship the surgeon's station was in the unprotected wardroom. Here a shell entered and exploded, killing or severely wounding the surgeon, nurses, and most of the wounded, and destroying all the surgical instruments and dressings. This shell also set fire to the ship, and in separating from her consorts to extinguish the fire she lost them, and was without medical assistance of any kind until the next day, when the surgeons who came to her assistance found twenty dead and thirty-five wounded men.

#### THE TIME OF TREATMENT.

In all modern navies it had until recently been the custom to remove the wounded at once from where they fell, but it had for some time been inferred that in future warfare it would not be practicable to remove the wounded during an action, and that they would have to shift for themselves until it was over; and that inference had been confirmed by the recent experience of the Japanese. This proposed revolution in the treatment of naval wounded followed from the construction of modern ships, and the nature of modern fighting. It was not so inhuman as it would at first sight appear. The duration of the action was short, and the wounds rarely attended with dangerous bleeding. Then there were few places where the wounded would be safer than where the bulk of the men were fighting, and the Japanese found that during an action the surgeons were not able to do work of any value. In the French navy it had been practically decided not to attempt to give a treatment altogether illusory to wounded during an action. The men should receive

elementary instruction in how to assist themselves, and a good supply of stimulating and restorative drinks should be served out to them.

#### THE CONVEYANCE OF THE WOUNDED.

After action the wounded would have to be moved. For their conveyance many contrivances had been proposed, but except the service cot, stretcher, and ambulance hammock, none had received official recognition. The Japanese during the war with China were only provided with the ordinary appliances just mentioned, which they found perfectly useless under the conditions of war. They threw them aside and carried the wounded by hand, but this had two great disadvantages—the large number of men required to carry the wounded and the danger of aggravating injuries, especially fractures. An ambulance on board ship must satisfy several conditions, which he enumerated. As far back as 1886 he had brought to the notice of the Naval Medical Department an apparatus which he called an ambulance sleigh; but it was put aside on account of its weight, and lay among the stores at Haslar Hospital for fourteen years. Last year, however, at the Paris International Congress he saw M. Auffret's *goutière métallique*, lately adopted in the French and Chilean Navies. It was constructed on the same principle as his sleigh, except that it lacked the most valuable feature of the latter—namely, the runners. The sleigh had now been lightened and improved, and was at present undergoing trial in the Channel Squadron.

#### THE DANGER OF TRAILING SKIRTS.

At the recent Congress on Tuberculosis the co-operation of the public in checking the spread of consumption by adopting precautionary measures of cleanliness and sanitation was invoked. One method of spreading this disease is by means of trailing skirts, which sweep the pavements and gather up dust and sputum which, teeming with germs, is carried into dwelling houses. So long as such skirts are worn out of doors women should make it a point of conscience to hold them up. It would seem scarcely necessary to refer to this point, for one would suppose that regard for the garments in question would result in the adoption of this procedure, did we not so often have ocular evidence to the contrary.

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