

in nearly all of these districts with accommodation ranging from 10 to 500 beds according to the size of the district, with a view to making them competent and capable of undertaking the necessary duties which will be required of them should the wounded or convalescent be put under their care. Valuable assistance has been given by the nurses with regard to the equipment of these various hospitals. Several districts have offered hospitality to the Belgian Refugees, the nurses assisting with the medical inspection on their arrival. In yet another district, where thousands of soldiers were billeted, it was found necessary to open a temporary hospital for the ones who fell sick; a Queen's Nurse took charge and was able, with the assistance of voluntary workers, to have the men properly attended.

The various Relief Committees realise the great assistance that the nurse is able to give them; she is very successful in this branch of work, owing to her knowledge of the home conditions of numbers of families in her district, and enters the home as a friend. Last, but by no means least, are the sewing classes in which the nurses take a part. Hundreds of garments are being made and valuable help is given with regard to the size and shape of the necessary articles required.

Many volunteers, whose services have not been required by the War Office, including ex-Queen's Nurses and others, have offered to take the places of nurses who have already been called up, and so the districts have been supplied with temporary assistance as far as possible.

## RED CROSS WORK IN GERMAN LINES.

The following notes have been sent to *The Lancet* by one of Dr. S. Osborn's assistants who has been in charge of a Red Cross contingent in Belgium since the commencement of the War:—

"We have just returned to Brussels after spending a week at Gembloux treating German casualties from the battlefields around Namur and Aizeau. During that period about 350 Germans passed through our hands, and altogether we must have seen 1,500 or more cases. At first some of the Germans refused to be treated by us, and as we were not allowed to help the wounded prisoners we had time on our hands in which to observe the German medical corps on active service. It cannot be said that their methods impressed us favourably. Among the cases that came under us for assistance, wounds of the extremities were at least three times more common than in other parts, the upper extremity suffering equally with the lower. In the gunshot wounds there was the usual small wound of entrance with the larger one of exit, which was suppurating in 60 per cent. of our cases, showing that the German first field dressing is not a very efficient preventive against sepsis. The wounds of entrance healed rapidly, there was no sinus

left, the typical wound at the end of four days being represented by a suppurating patch of tissue about an inch in diameter at the place of exit. We saw few fractures, but such as occurred were severe and compound. Several of these had been treated at dressing stations with plaster-of-Paris splints—a dangerous practice when the men were unable to be kept under observation for some time. A Hanoverian officer with his left arm in a plaster-of-Paris splint came to us and complained of pain in the hand. On examination Mr. Osborn found no evidence of circulation, and at the end of 45 minutes' work with a razor, as we had no clippers, the splint was removed. It had been intended that this man should have gone on to Liège, an eight hours' journey, without further medical attention. The German transport for wounded was very poor indeed; except for four light ambulance wagons, about 2,000 wounded were evacuated through Gembloux on improvised farm carts, each cart containing a little straw and carrying about twelve men. The scheme was to collect the cases from the battles round Namur and Aizeau, to use Gembloux as the railhead, and to hurry all the cases without discrimination back through Liège to Germany. We saw one man, who was shot through the pubes, taken from bed, dressed in full kit with his rifle slung, and dragged along on foot to the station. Here the only accommodation provided for the wounded consisted of cattle trucks in which wooden benches had been placed, no space being left on the floor for the badly wounded. Of the great discomforts and the foul atmosphere of such a journey we can speak for ourselves, since we were compelled to use this means to return to Brussels. The feeding of the patients at our hospital was in charge of a German orderly, and here, again, there was a total lack of discrimination. Black bread and German sausage or fat bacon were provided every day, and if a man were too ill to eat such fare, he went without. Fresh milk was impossible to obtain, but our nurses managed to secure condensed milk and weak coffee for a few of the gravest cases. We saw several operations in the big base hospital. It was a curious sight; a most extraordinary mixture of asepsis and filthy work. For instance, the region round the wound was shaved, yet half the hairs fell into the wound; the surgeon washed his hands most carefully, and then touched the cigar which he smoked all the time; the instruments were carefully sterilised by boiling, and then placed on a towel which had been used for the instruments for the last twenty operations. Big collections of pus and blood on the table were ignored, the only means of removal appearing to be on the uniform of the next patient. Nearly every case witnessed consisted of removal of bullets from a suppurating part. Treatment consisted in enlarging the wound, probing and extracting with long forceps, and then forcing a way through the tissues with the forceps to the most dependent part, where a second incision was made, when a gauze wick was inserted.

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