

THE CARE OF THE WOUNDED.

Colonel Sir Anthony Bowlby, C.M.G., Consulting Surgeon to the Expeditionary Force, contributes to the *British Medical Journal* an interesting article on "The Work of the 'Clearing Hospitals' during the Past Six Weeks," in the course of which he says:—

"For the sake of those who are not yet familiar with army nomenclature, I will premise that a 'clearing' hospital is placed conveniently near to the field ambulances of the different corps, and that the wounded are sent into it as soon as possible after being injured, and after their first field dressing. In actual practice this generally means that the men wounded during the night-fighting are brought in in the morning, and those wounded in the day may either be got in during the afternoon, or else it may be necessary to wait till darkness permits of their being brought in safely.

"A 'clearing' hospital is essentially a 'mobile unit,' and must be able to move with the army at the shortest notice. Consequently, it is not equipped like a 'general' hospital, for it has no tents or huts, and it has stretchers instead of beds, and no such luxuries as X-rays and a pathological outfit. It consists really only of a staff with a sufficient amount of surgical and medical equipment for emergencies, and is in future to be called a 'casualty clearing station.' But, although these are the normal conditions, we were very fortunate in that we found some excellent buildings in this town and in the neighbouring ones, and we occupied school houses, hospitals, lycées, and colleges, many of which had a few excellent beds and bedding, and two of which had sisters of charity as nurses, and operating theatres. What is very striking is that these small towns have far more commodious buildings than would be found in any similar places in Great Britain.

"It must be realised that a clearing hospital is supposed to be staffed and equipped for 200 patients, but warfare and necessity know no laws, and sufficient accommodation was at once found in a derelict college and in a jute factory, and all night the staff laboured hard and got through their work splendidly. But this was only the beginning of a month of unprecedented difficulties, all of which have been surmounted in the same spirit of prompt decision and energetic action which characterised this first incident.

"It is quite impossible really to describe the scene at a clearing hospital when the fighting was at its height, but I will try to give some idea of it. Picture a large open space surrounded by buildings. Into this there drives a motor ambulance. The tail curtains are opened and reveal four 'lying-down cases' on stretchers. These latter are swiftly and carefully slid out, and carried into a large receiving room 30 or 40 ft. long. Another ambulance draws up with six or eight men who are 'sitting-up' cases, and these are helped out and walk into the receiving room.

The clothes of the patients are all thick with mud. Ambulance follows ambulance, for the field ambulances at the front have been filled up during the night, and there has been heavy fighting again at daybreak—a common hour for attacks—and thus it has happened that on many days from 500 to 1,000 or more wounded have arrived at a single clearing hospital in a single twenty-four hours.

"And now look inside the receiving room. Here are half a dozen or more surgeons, often some dressers who are medical students, and a score or two of well-trained and very efficient orderlies. Men with simple flesh wounds are sitting on the benches round the room while the surgeons look at their wounds, and perhaps decide that a simple dressing is all that is required; the skin is painted with iodine, the wound is washed with an antiseptic, a dressing is put on by the orderly, and the patient goes off to another room for rest and food.

"In another patient the arm bones are fractured, and splints have to be applied before the wound is dressed. In another case there is a bad smash of the thigh or the leg bones, and an anaesthetic is required and given, while the clothes are cut off, the wound washed out with an antiseptic, and splints and dressings applied.

"Here is a man in whom it is only too evident that the limb is hopelessly smashed, so the patient is put into the ambulance and sent round to a neighbouring building where a surgeon is in waiting ready to amputate, so the work of dressing the wounded is not interrupted by an amputation. But, in addition to the dressing of wounds, you will see that one surgeon is detailed to inject every man with antitetanic serum, and you will notice that all the men are given hot soup or milk, or perhaps stimulants, while they wait their turns to see the surgeon.

"But you must next appreciate that the hospital is only a 'clearing hospital' or 'station,' and in its turn it must be promptly cleared of all cases that can be moved, so as to be ready for next day's wounded. Therefore, ambulance trains must be ready daily to remove their hundreds to Boulogne or Rouen, or to hospital ships waiting to go to England. You might, at first thought, consider that there should be no difficulty about these trains, but there is a great one. The first duty of every general is to defeat the enemy, and trains for troops, and guns, and horses, and stores are the very first consideration, and Red Cross trains must wait their turn."

Sir Anthony considers that "gangrene is to be prevented to some extent, at least, by avoiding all constricting bandages which lead to constriction and oedema, and by opening up, and washing with antiseptics, wounds which seem to require it, so as to relieve tension, and prevent the removal of dirt, bone débris, and clothing, and all such wounds require the most free draining, and, of course, no such wounds are to be sutured.

"There is also no doubt that if dressings are allowed to stay on too long, so that they dry, and

[previous page](#)

[next page](#)