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MEDICAL SERVICE SWIFT IN SOLOMONS

Special Dispatch to New York Times from South Pacific Base.

Ten days ago from a hill 1,000 yards behind the front line on Guadalcanal I saw a skirmish line of marines advance across a ridge ahead of us and enter a heavily wooded ravine. A few minutes later the sound of machine-gun fire came crackling up out of the ravine and they dug in to let their artillery take care of the three machine-gun nests they had encountered.

Several of the marines were wounded by the fire, among them a cotton-haired youngster whose right hand had been left a bloody mass of jagged bone and dangling fingers and flesh by a Japanese explosive bullet. I saw him at the field dressing station an hour later where a doctor powdered the hand with a sulfa drug and gave him a shot of morphine and an antitetanus injection. Two hours later he was back at the division field hospital.

By a coincidence I was on Henderson Airfield the next morning and saw the same boy climbing into a big transport plane. That afternoon he was on the operating table in this advance base hospital, In less than twenty-four hours he had been brought several hundred miles away from the front line where he was wounded and a preliminary surgery that eventually will restore the hand to some measure of usefulness had been performed.

BOUND FOR A BASE HOSPITAL

Yesterday he boarded a hospital ship for the trip back to a reserve base hospital, where he will have women nurses to care for him, magazines to read, cigars to smoke and candy to eat. The war will be thousands of miles away.

The experience of that young marine has been repeated hundreds of times since the Navy and Marines took the lower Solomons on August 7 and 8 and started giving the Japanese afloat and ashore the licking of their lives.

Captain Joel J. White, M. C., U. S. N.; his executive officer, Lieut. Comdr. Joseph A. Bowen, M. C., U. S. N., and the advanced guard of this advanced naval hospital came ashore here August 21. They picked out the site for their hospital in a grove of coco palms not far from the bluest sea you ever saw. With their own hands they set up their first tents, laid the first floors, stretched the first wire screens around the one operating theatre they had brought with them and the tents they intended to use for patients. days later they took in their first eighty-four patients.

Today the hospital is an orderly row of Quonset huts and floored, screened tents with three operating theatres and two more in process of construction. There are 200 white metal hospital beds, cots for as many as 400 more patients, X-ray machines, a laboratory and a big 100-foot warehouse

full of medical supplies. It is served by roads of packed coral sand.

STATION WAGONS FOR AMBULANCES

A thatched roof garage shelters three station wagons that were commandeered and turned into ambulances when the heavy-duty ambulances they brought with them proved too rough riding for the bumpy island roads. The ambulances carry wounded men from the airfield to the hospital and later from the hospital to the docks, where they embark on a hospital ship.

In the three months since the hospital was established it has handled 2,500 patients, including most of the wounded from Guadalcanal, the wounded survivors of the torpedoed aircraft carrier Wasp and the wounded from several other naval engagements in these waters. Not a man has been lost through an accident in transit, although one planeload spent two days on a coral reef when their ambulance plane had to make a forced landing.

"It is remarkable to see the rise in spirit of the boys during the first twenty-four hours here," said Dr. White. "They begin laughing and joking again, hobbling around their huts, shaving and bathing themselves in the sun out under the trees. It is a relatively safe place and they react to the atmosphere immediately. The patient's mental attitude is of considerable importance during a

convalescence and I never saw patients more cheerful than those we have here."

"We have a few mental cases," Dr. Bowen said, "and most of them have only a mild war neurosis that I am sure will wear away quickly. Most of them probably will get back into action."

Mental Case Percentage Low The percentage of such cases is less than 2, he said, which would make it less than 50, "and although I don't have the figures

though I don't have the figures here, I know that is far below what we had during the World War twenty-five years ago."

The wounded man today, both doctors agreed, has many times the chances for a complete recovery of the wounded of any other war in which Americans have fought. In the last World War, Dr. White said, it was his recollection that some of the wounded remained in a combat area eight to ten days after being wounded.

The principal reasons for the high ratio of recoveries, Dr. Bowen said, could be ascribed, first, to the rapidity of transportation out of the combat area; second, the use of the sulfa drugs in preventing infection and promoting healing and, third, adequate hospital facilities within a few hours of the front lines.

On the staff of this hospital Dr. White now has seventeen medical officers, including three surgeons, a neuropsychiatrist and specialists in other fields, 160 hospital corpsmen and more coming in. The field hospital at Guadalcanal

has seven doctors and forty-two corpsmen.

With Rear Admiral William Chambers, who is in charge of all naval doctors and hospital facilities in the Pacific, and Captain William W. Wickersham, who heads the staff of one of the rear base hospitals, I made an inspection trip of Dr. White's establishment.

AT THE OPERATING THEATRES

Several planes had just come in with wounded from Guadalcanal and the operating theatres all were busy.

In the Quonset huts, open and screened at both ends to let in the breezes from the sea, shaded by the coco palms and big ironwood trees, were 465 patients. That was 121 below the hospital's all-time high reached on November 14 when wounded survivors of the naval battle off Savo Island in which Rear Admirals Daniel J. Callaghan and Norman Scott were killed were brought down from Guadalcanal.

The more seriously wounded men were in the hospital beds such as are standard equipment for hospitals in the States. The less seriously injured, men who could take care of themselves in part, were on cots in other huts and tents. Several were out under the trees in wheel chairs or sitting on the grass. One man with a wounded leg was sitting on a log, shaving himself before a 'cracked mirror.

The days are warm here, especially when it rains, but there is a more or less constant sea breeze in the area where the hospital is located and blankets are needed for warmth nearly every night.

Out in the open in the smaller units the odors of antiseptics and drugs is less pervading than in any hospital I ever visited.

DOCTORS' ATTITUDE UNSELFISH

In the late afternoon, sitting in Dr. White's tent on a hill overlooking the hospital and the blue sea beyond that stretches more than 6,000 miles before it touches our native soil, I told Dr. White I thought he had a fine hospital and as tropics go an almost ideal place to live and work.

"Yes, that is true," he said, "but I am restless to be going on. With what I have learned here in establishing this hospital, I believe I could do an even better job on up the island nearer the fighting lines. That is where I want to go."

Dr. White's attitude is typical of the unselfish physicians and surgeons who are manning these hospitals and advanced bases and dressing stations on many a tropic island in the Pacific. Dr. White has made the Navy his life, entering its service on September 17, 1917. Most of the others, however, are men who left lucrative practices or teaching positions back in the States. Dr. Bowen, for instance, was a practicing physician in Louisville, Ky., and a lecturer at the university there.