

The Medical Aspects Of The War. XXIII

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missioned officers and men was 436, 136 being in cots, 300 in hammocks, which with 42 beds for officers made 478, or very nearly the accommodation of a general hospital at the base (500 beds).

It was, however, found that the convalescent wards were a mistake, as it was difficult to send the proper kind of cases for hammocks from the numerous hospitals up-country. It was then decided to convert the convalescent wards of all the hospital ships into wards with fixed cots, and to put additional cots into the wards previously fitted with cots. The wards then held the following numbers all in cots—A 30, B 38, C 50, D 55, E 40, F 39, and G 20, total 272, which with 42 officers made 314 beds. It should be mentioned that the beautiful little yacht, *Golden Eagle*, owned by Sir S. Scott, Bt., was attached to the *Nubia*, and accommodated 3 or 4 officers, who were kindly looked after by Lady Sophie Scott and her maid, a trained nurse. When Colonel Gallwey, C.B., the able Principal Medical Officer of the Natal Army, formed the idea of fitting up hospital ships, he hit on the only way out of the tremendous difficulty which had to be faced by the rapid development of what was thought would be a short campaign into a very serious and big war. There was great difficulty in establishing land hospitals not only by reason of the impossibility of getting buildings, cooks, etc., but also the feeding and supply, which could much more readily be arranged on board transports with full establishments than lying idle in the roads. The rush of wounded and sick was so great at times that it was absolutely necessary to find means of evacuating the field and base hospitals further up.

The *Nubia* received wounded direct from the battlefields on several occasions—from Spion Kop, Potgieters, Pieters, and from the fighting into Ladysmith. After relief she received many of the sick from that town, and took some home. She was at the Durban base from January 5th to March 31st, when she left for England with a full load of wounded and sick. Some idea of the work done can be gathered when it is mentioned that during the above period about 1,500 non-commissioned officers, men, and officers passed through the ship. Of these, one officer and six or seven men only died, chiefly from enteric fever and dysentery contracted in the field. Large numbers of both sick and wounded passed up to the front again, having recovered rapidly; a considerable number were invalided, being shattered by the hardships of the campaign. Nothing could have exceeded the cleanliness of this magnificent ship, and it is a pleasure to feel that from first to last everyone pulled together with the greatest concord. Dr. Bensusan, in addition to a full share of ward work, manipulated the x-rays apparatus with signal success, numerous bullets, pieces of shell, etc., having by this means been detected and removed.

The following hospital ships were fitted up in Durban: *Lismore Castle*, *Nubia*, *Avoca*, *Orcana*, *Dunera*, all in a very short time. The *Maine* was here, the *Spartan* and *Trojan*, and numerous transports have constantly been despatched home with invalids more or less convalescent, showing the important part taken in this campaign by hospitals afloat.

## THE MEDICAL ASPECTS OF THE WAR.

BY A SOUTH AFRICAN CAMPAIGNER.

### XXIII.

#### THE WINTER CLIMATE OF THE TRANSVAAL.

THE climate of the Transvaal is at the present season cool and bracing, although on the high veld, which our forces now occupy, the cold at night is often severe. That the present season is winter and not summer in the Transvaal is still more fortunate for the health of the Boer forces and those British prisoners whom they have removed into the low country north of Pretoria. From Pretoria northwards the country falls away to the valley of the Limpopo or Crocodile, which forms the northern boundary of the Transvaal. The country is broken by spurs of mountain and deep valleys, and is largely covered by bush of a semi-tropical character. Through the winter this district is healthy, and the climate mild and delightful. It is the low veld of the Boers, and is resorted to every winter by farmers dwelling on the high veld, who, with their flocks and herds, their families and waggons, periodically migrate to the low veld during the

winter months. In moving to this district at the present time of the year the Boers are therefore merely following their usual practice, although the conditions are materially altered.

#### THE LYDENBURG DISTRICT.

In the early days of the settlement of the Transvaal, Lydenburg was made the headquarters of the emigrant Boers, and the Lydenburg Republic was one of the first Governments which existed in these territories. Fastnesses to the north end of the Drakensberg in the immediate vicinity of Lydenburg offered ideal natural fortresses to which the Boers could retire after engagements with the surrounding Bantu tribes. I once spent a few months in these mountains at the end of the winter and the beginning of the summer. My tent was pitched on high ground, and the entire camp of settlers around me were healthy, but I can well recollect, even so early as September, seeing many virulent cases of malaria among men who had been prospecting for gold in the surrounding deep valleys on either side of the mountain range. As a matter of fact, during the summer under existing circumstances the large portion of the country intervening between Pretoria and Lydenburg is unhealthy to Europeans, and the amount of malaria which occurs is considerable. It is the fever of the summer months which has made the exploitation of the gold fields of the Zoutpansberg, a north-western spur of the Drakensberg, both hazardous and costly. Among these mountains is to be found one notorious laager known from the earliest days as the Ohrigstad laager. This interesting and fertile valley, shut in in the mountains, was described a few weeks ago by a correspondent of the *Times of Natal*, who predicts that the old Bechuanaland freebooters, Adrian De la Rey, Van Pittin, and others, will eventually retire there to join Abel Erasmus, the Transvaal native commissioner in that district. Here, it is anticipated by this correspondent, the last stand will be made. On the merits of this programme from a strategical point of view it is not our province to comment, but it must be borne in mind that such situations as these are surrounded during the summer months by large belts of terribly unhealthy country. The Boers will thus be cut off from the outer world unless they are prepared to face malaria whenever they sally forth.

#### WATER SUPPLY AND SANITATION ON THE RAND.

Typhoid, which has played such havoc among our troops in the various camps, is unfortunately only too common under what have hitherto been normal conditions in Johannesburg, and at the various mines along the course of the main reef. As the deep level mines are opened up, and the population of Johannesburg increases, the question of an abundant and pure water supply, not only for Johannesburg, but for the whole course of the reef, will have to be faced. One of the commonest causes of typhoid fever has hitherto been the continuous use of water from wells and other small local supplies, as springs, liable to pollution by surrounding surface drainage and by dust. There can be little doubt that an abundant water supply from one end of the mines to the other would very materially reduce the high death-rate from typhoid fever. The sanitary system in vogue in Johannesburg itself does not differ materially from that employed in Kimberley and the majority of other South African towns. It is what is known as the pail system, and one of the chief objections to it is the nuisance of the night service. The huge waggons which are driven through the streets with an attendant train of natives during the small hours of the morning are foul things to encounter. The other and perhaps the more serious objection is the question of the disposal of slops, which are too often distributed indiscriminately over the back yard if there be one, or the adjoining street if there be not. Theoretically this system is held to be safe, but it is undoubtedly disagreeable, and for those who object to a waterborne system of sewage, Johannesburg and Kimberley offer enterprising communities and new scenes for the sanitary experts' devices.

#### CASUALTIES.

Among the deaths from enteric fever reported from Bloemfontein are Lieutenant C. H. B. Adams-Wylie, I.M.S., who died on June 2nd, and Civil Surgeon H. Bryant, who died on June 7th. Lieutenant Adams-Wylie received a commission in the Indian Medical Service in January, 1899. Surgeon-Captain Dun, of the 5th Imperial Yeomanry, was slightly wounded at Kheis.