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Other experiments referred to were those of Mr. H. Crouch upon the action of chloroform. Stress was laid on the fact that the really serious symptom in threatened death by chloroform was cardiac failure, not respiratory failure. The great fall in blood pressure caused by the inhalation of chloroform was shown by plethysmographic records to be due chiefly to cardiac enfeeblement. A further point, which may prove of great value, was that amyl nitrite appeared to act in some respects as an antidote to the cardiac action of chloroform. In an animal to which amyl nitrite had been previously administered, chloroform no longer gave the great fall in blood pressure.

SOUTH AFRICAN HOSPITALS COMMISSION.

At the first meeting of the Commission, held on July 24th, after the opening statement by the Chairman, Lord Justice Romer, which was published in the *BRITISH MEDICAL JOURNAL* of July 28th, the first evidence taken was that of the Director-General of the Army Medical Service, who gave particulars of the working of his department, and the arrangements made in time of peace for future wars. He said that every demand made for South Africa up to date had been met. There had been ample supplies of doctors, nurses, beds, and medical appliances; but he could not say whether the doctors and appliances sent out had been properly distributed. He had not in his official capacity received any complaints of any special hospital. Next came the Assistant-Director of the Army Medical Service, who stated that the medical service was in respect of transport at the mercy of the Army Service Corps, or rather of the General. After some further evidence from departmental officials, Lieutenant-Colonel G. Sterling Ryerson, of the Canadian Army Medical Staff, expressed the firm conviction that the best that was possible in the circumstances was done for the sick and wounded.

At the second sitting, on July 25th, the Rev. W. H. Orford, who was attached to a hospital in Bloemfontein, said there was no overcrowding. The nursing was all done by orderlies, who worked splendidly. He had never heard any complaint from the men, either at the hospital where he was for two months or at two others in which he was. With regard to vermin he said that if a new brick building was put up even upon new ground in South Africa it was immediately infested. Sir Howard Vincent, M.P., who visited several hospitals, said the arrangements were beyond all praise. He heard no complaints even from the men of his own regiment, who would have spoken freely to him. Mr. Watson Cheyne also spoke well of the medical arrangements. He was inclined to think the epidemic was not typhoid, or at least that a great deal of camp fever had been mixed up with typhoid. No neglect of the sick or wounded came under his notice. An immense amount of the energies of the medical staff was wasted in administrative and clerical work. Next came a trooper of the C.I.V. who had himself been in hospital, and who said that as far as he knew there was no want of attention either at Bloemfontein or at Wynberg. A full report of the evidence is given below.

Surgeon-General J. J. Jameson, Director-General of the Army Medical Service, said that with regard to the constitution of the department in reference to preparing for the care of sick and wounded, there was a *personnel* of officers and men for two army corps and a cavalry brigade. In case of war being threatened the Adjutant-General communicated with witness, stating where the war was to be and the strength likely to be engaged. He was then desired to submit a proposal, which would afterwards be discussed by the Army Board, as to the medical requirements, including the percentage of beds required. In unhealthy climates the estimate ranged from 10 per cent. to 25 per cent. of the total strength. Then he prepared a memorandum showing the probable diseases likely to be encountered, the kind of supplies and provisions to be obtained, and everything connected with the sanitary part of the campaign. He also furnished all the medical officers engaged with a memorandum showing them what diseases they would have to contend with and how to obviate them, and the necessary sanitary precautions. The memorandum which had been prepared for the present war dealt with temperature, rainfall, winds, precautions required on account of climate, and the following prevailing diseases: Enteric fever, dysentery, diarrhoea, malarial fevers, parasitic diseases, ophthalmia, and pneumonia. Immediately the war broke out it was found that the medical *personnel* for two army corps and a cavalry brigade were exhausted. The number of medical officers in South Africa on September 1st, 1899, was 32. During September 19 were sent out, in October 138, in November 102, in December 38, in January, 1900, 44, in February 48, in March 50, in April 10, in May 8, and in June 10, making a total of 508. This month 20 more were being sent out. The figures did not include the medical

officers of colonial contingents. Every demand for South Africa up to date had been met. There had been ample supplies for the sick and wounded, of doctors, nurses, beds, and medical appliances. He could not say whether the doctors and appliances sent out were rightly distributed in South Africa. He then read the following note on the state of the sick and wounded at Bloemfontein on April 27th: "Mr. Burdett-Coutts described the condition of a field hospital at Bloemfontein, which he considered should have been equipped as a stationary hospital. His description relates to April 28th. On April 27th there were at Bloemfontein the following fully equipped hospitals—Nos. 8, 9, and 10 General Hospitals, the Langman, the Portland, the Irish, and No. 5 Stationary—about 2,000 beds in all, with considerable capacity for extension. There were altogether 2,201 patients in military hospitals at that date, 873 being cases of enteric. There were about six field hospitals, of which all but one had to be prepared for war at any time..... None of the returns describe any want of satisfaction with the arrangements." He had not received, in his official capacity, any complaints of any special hospital, and only an unofficial complaint with regard to the Woodstock Hospital.

Lieutenant Colonel Johnson, Assistant Director of the A.M.S., gave details as to sending out of hospitals and nurses, and pointed out the great distinction between military hospitals and civil hospitals. He added that the medical service had not its own transport, which was, perhaps, a weak point in its organisation. They were at the mercy of the Army Service Corps, or rather of the General.

Major W. G. Macpherson, Deputy Assistant Director A.M.S., gave statistics and returns with regard to sanitary matters, and also dealt with the actual extent of the outbreak of enteric and other diseases in the army and the preventive measures adopted in the present war. He said it was intended to supply Berkefeld filters in the proportion of 1 to every 100 men, but that had not been completely carried out, because the manufacturers were unable to fulfil their contract. The hospital system depended on its ability to constantly remove patients from the field hospitals to the base hospitals, and thence to the transports. There had been no delay in emptying the base hospitals. As many as 2,000 men a week had been landed in this country. Up to July 17th, 26,758 men had been invalided home. The deaths reported from enteric were now going back to the normal point. The deaths for the week ended July 14th would represent 3.8 per cent. per annum. The deaths reached their maximum on May 26th. The medical officer in charge of No. 9 General Hospital at Bloemfontein drew attention to 1,000 cases of enteric fever up to the date on which he wrote with a case-mortality of 12 per cent.

Lieutenant-Colonel J. S. Cowans, Deputy-Assistant-Quartermaster-General, gave details as to transport, and said every requisition for extra medical men had been complied with.

General Sir Henry Brackenbury, Director-General of Ordnance, stated that he was charged with supplying all arms and armaments necessary for the conduct of war, together with hospital equipment, including tents, beds, bedding, stretchers, and waggons, but not medical or surgical stores. He was not aware of any complaint having been received from South Africa as to either insufficiency or quality of the hospital equipment. In his opinion the reserve of hospital equipment previous to the outbreak of the war was totally inadequate. There was to his mind a great lesson to be learned at home as to the necessity of having in hand a very large reserve, so as to be able to meet all demands during the first six months of a campaign, so as to be independent of the "trades." He did not think, however, that the slightest suffering had been caused to the troops by such delays as had occurred. The witness then gave particulars as to the hospital arrangements prevailing at home in peace time. The army was organised into certain units, and each had its stores and hospital equipment at the centre of mobilisation. In addition there was the question of reserves; and, as a matter of fact, just before the war broke out they had a reserve of only one base hospital of 520 beds and two stationary hospitals of 110 beds each. That was on September 29th, when the Government gave orders for preparations to be made to send out additional equipment. There were at that time sufficient stores for field hospitals for three army corps, but they had no reserve equipment for stationary hospitals or base hospitals except those already mentioned.

Colonel J. Stevens, C.B., Principal Ordnance Officer, who was next called, said that he did not receive orders to proceed with the preparations until October 4th. Directly the order was given he set men to work day and night filling beds with horsehair that had to be purchased hurriedly, and in that way they were able to send the equipment by the transport on the date fixed. There was one delay in sending out base hospitals, from December 9th to January 6th. That was owing to their having sent out all the ambulance waggons they possessed. They received during March a message to send out 300 beds and bedding, and while that order was being carried out the War Office ordered 2,000 beds to be despatched to South Africa; both requests were complied with as quickly as possible. Delay had arisen in a case in which 500 beds of a particular pattern were requested; and it was found necessary to import them, which in his opinion was a mistake.

Sir Ralph Knox, Permanent Under-Secretary for War, said the Army Medical Department had no executive authority, but according to what was required in the field, had to go to one of the four high military officers of the War Office—either the Adjutant-General, the Quartermaster-General, the Inspector-General of Fortifications, or the Director-General of Ordnance; and while, speaking generally, all its applications were granted, they were usually referred to the Army Board. The preparations of all the responsible departments were based on the assumption that for a war of attack or of defence it was necessary to send out two army corps and a cavalry division giving an aggregate of about 90,000 men. At the same time, their preparations were framed in respect of a third army corps at home, but they were on a more moderate scale. Replying to a question respecting the delay in getting the base hospitals ready, the witness said that as a matter of fact the Government had not in July, or even in August, made up its mind as to what would have to be done. As to suggestions or complaints of delay, or insufficiency of hospital equipment and transport for hospital purposes, the fact was that the Army Medical Department desired that all medical matters in the field should be under their direct control, and in a large measure that was so in the present campaign. Of course the difficulties of transport had to be taken into account, and the main transport had to be maintained, even though the medical transport suf-

ferred in consequence. So far as he was aware, the War Office had not received any complaints respecting the management of the hospitals beyond those contained in Mr. Burdett-Coutts's letters.

Lieutenant-Colonel G. Sterling Ryerson, Canadian Army Medical Staff (Toronto) stated that he was in South Africa from February 15th to July 4th, in the capacity of Red Cross Commissioner, and his services ranged over a wide area, first commencing at the Orange River, and then including work in the hospitals at Kimberley, Bloemfontein, and Kroonstadt. At the first place, on February 20th, he found between 500 and 700 sick and wounded, chiefly in adjustable huts, but some were in tents. All appeared extremely comfortable as regards beds, bedding, and medical and general stores. There were 47 Canadians in the hospital, and if they had had anything to complain of they would have told him. From Orange River he went on to Kimberley, and remained there for four weeks, visiting the hospitals daily. The Modder Bridge had been destroyed, and it was therefore difficult to get supplies up, owing to the convoys having to traverse steep declivities which really resembled toboggan slides or shutes, and a whole day was occupied in covering the forty miles from Orange River. On one day 523 sick and wounded arrived at Kimberley. With so large a number of men suddenly thrown upon them it was impossible to provide them with such luxury as was obtainable at, say, the Hotel Cecil; but they had all that was necessary to render them as comfortable as was possible in the circumstances. He himself furnished 90 cots from the Red Cross funds, the cots being made by the De Beers Company. There was abundant medical and nursing strength, and the hospital stores were well supplied except in respect of fresh milk, which was very scarce. He next proceeded to Bloemfontein and Kroonstadt. At the former place there were between 3,000 and 4,000 sick, and nothing could have surpassed the arrangements made in Parliament Buildings for the comfort of the men after the first week or two, while in the Roman Catholic Convent and St. Michael's Home everything was perfection and the nuns made splendid nurses. It should be borne in mind that the communications had been cut, and that there was only a single line of railway to convey supplies for about 50,000 men, and that three days and three nights were occupied in the journeys, which were usually covered in forty hours. Notwithstanding all these difficulties, he saw nothing to complain of. There were plenty of stores, and the hospitals were at liberty to draw upon the Red Cross without restraint. The number of men arriving was extraordinary; one afternoon 564 arrived, and the next morning another 354. What would the London hospitals do if 10,000 patients were suddenly thrown upon them? He was firmly convinced that the best that was possible in the circumstances was done for the sick and wounded, although he had not read the letters referred to, he remembered seeing Mr. Burdett-Coutts in Bloemfontein, but did not hear of any complaints being made to him.

At the second sitting of the Commission held on July 25th, the Rev. W. H. Orford said he was born in South Africa, and was in Bloemfontein from the entrance of the British troops until Lord Roberts went north. He was mainly attached to the hospital which was established in his old college of St. Andrews. It was undoubtedly one of the worst in the district, because it was an old building and was one of those chiefly criticised. It was quite true that patients were lying on stretchers and mattresses, and in some cases it was impossible to undress them for a fortnight. There was no overcrowding. There were about 60 patients in the hospital, but there were no nurses. The nursing work was all done by orderlies, who did their work splendidly. The greatest difficulty they had was in getting fresh milk. The food was of good quality. They had sufficient blankets. He had never heard a word of complaint from the men, though he had constantly asked them if there was anything they wanted.

In reply to the Chairman, the witness said there was only one particular in which they missed the nurses, and that was that the men did not obey the orderlies so well as they did the nurses. He was nearly two months in the hospital but the condition of things he had described lasted only about a fortnight; within that time they got everything they wanted. He was in two other hospitals. There was very little difference between these two hospitals and the one he first mentioned. He had never heard any complaint about these two hospitals. He was not connected officially with any hospital but he was acting chaplain, and in that capacity was a person the men were likely to confide in. He had never seen any men lying in the mud, and had no reason to believe that soldiers refrained from complaining lest they should get into trouble. In reply to Mr. Frederick Harrison, the witness said the wounded came crowding in from Paardeberg. He did not see men lying about when they first came in, though he heard that men were lying about for thirty-six hours up the Glen, but fighting was actually going on. He believed the removal could not be managed for military reasons. He had often slept on the ground himself without a mattress. In answer to further questions the witness referred to the question of vermin and insects in South Africa, and said that if a new brick building was put up even upon new ground it might immediately be infested. He went on to point out that the Bloemfontein Waterworks had never yet been completed. The filter beds had never been finished, and they did not depend upon them for their water supply. In a very short time after the occupation the engineers had bored all round the town, and good water was found at a depth of 50 feet and taken to the hospitals.

Sir Howard Vincent, M.P., who was the next witness, stated that he arrived in South Africa on January 23rd, and visited in the first place the Portland Hospital, in the suburbs of Capetown, on the 25th. He thought it was admirably arranged in every way. He passed on to No. 3 General Hospital, one of the large general hospitals, which had accommodation for about 500 or 600 patients. He went thoroughly through that hospital and saw the cooking operations, and conversed with many of the patients. In no hospital marquee were there more than 16 patients. As to the general cleanliness, order, and comfort of the hospital, it was beyond all praise, and he heard absolutely of no complaints. He subsequently made a full examination of No. 1 General Hospital at Wynberg. He saw the reception of the patients. He was struck with the extraordinary method Colonel Grier had established in order to trace out not only the medical but the private history of each man. Although he might seem to speak in terms of exaggeration, he could only say that the arrangements were beyond all praise. He did not hesitate to say that from the layman's point of view overcrowding was much less than he had seen in any London hospital. He went into the Boer hospital ward, and

there he received the only complaint made, and that was Commandant Pretorius. He also visited No. 2 Hospital close by on the same day, and again on March 5th when he was quite alone. He said there were two men of his own regiment in the hospital, and he conversed with them, and they would no doubt have spoken to him if they had had complaints to make. On February 14th he had an opportunity of going round the whole of Sir Redvers Buller's army, and seeing the provision made for taking away the wounded from the fighting line. Everything was done that could possibly be done, and it was remarkable to see with what skill the medical department took up their dressing stations. There was, however, always a tendency on the part of bearers to linger a little when they got tired. As to the red cross on the waggons he did not think it was sufficient indication, as it was difficult to see it at a long range. The Boers painted their ambulance trains white. He was at Chieveley the best part of a week, and he went amongst the officers and men, and it would be impossible on anything he heard to found any substantial complaint. Then he visited Sir William Gatacre's column at Sterkstroom. There typhoid was very prevalent, and there were three or four wards of bad enteric cases. He did not ascertain that there was any real cause of complaint that could be avoided. He arrived at Paardeberg on February 27th. He was able to see the hospitals there, and also the arrangements for carrying the wounded from Paardeberg to Modder River, and he was bound to say that it was to be regretted that the number of ambulances in the bearer company were reduced in order to obtain extra mobility. The complement of the bearer company was ten ambulances, and these were reduced by the exigencies of the moment to two. That was a very bad time, because a convoy had just been captured by the Boers, and there was great pressure. He visited the general hospital at Kimberley, and it was as good as any hospital in London. After leaving Kimberley he again visited the hospitals in Capetown, and he heard no complaints from any of the men in his own regiment or the members of the C.I.V., who all perfectly well knew that he went out to see if he could do anything to improve their condition. Taking all the exigencies of the case into consideration he could not speak too highly as to the general arrangements.

Mr. Watson Cheyne said that he had visited several military hospitals in South Africa. There was no real trouble about the sick and wounded. Of course there was overcrowding in the field hospitals, and they were short of equipment. The sick were attended to, and were being sent back to the base hospital. Being out in the open did not affect the patients a bit, for it was a beautiful time of the year. They ran rather short of dressings, but the medical comforts were all right. The only hardship was the long distance the men had to be sent back in ox waggons. They could not expect a large proportion of army medical men to be good surgeons any more than among civilian surgeons. As to the orderlies, it was generally remarked that the St. John Ambulance men were not good owing to their want of training, but the surgeons and non-commissioned officers were very good. The witness went on to say that at Driefontein they had proof that the ambulances were insufficient in numbers. Ambulances had been left behind partly in consequence of the exigencies of the advance and partly in the hope that they would not be required. He was at Bloemfontein till April 20th or 21st. During the greater part of that time the enteric epidemic was at its worst, but he believed there were more cases in May. Within five days of reaching Bloemfontein Colonel Stevenson had arranged accommodation for 500 or 600 sick. He called in once or twice to see cases in the tents. They were as crowded as they could be. About April 20th they had had over 300 deaths in a 50-bed hospital. He went away then for a few weeks, and when he returned there had been 100. There was a point which he thought the medical members of the Commission might consider, and that was how far this epidemic was one of typhoid fever. The great majority of cases recovered in ten days or a fortnight, and there were other characteristics which made him think it was not typhoid. As soon as Bloemfontein was left there were hardly any cases, but at Kroonstadt it broke out again. The great bulk of the cases occurred about ten days after Paardeberg, but he thought a great deal of camp fever had been mixed up with typhoid. There were two or three nights when it poured with rain, with the result that tents were flooded. The Portland Hospital was certainly flooded, but he did not think there were any men in it at the time. He had seen men lying on the ground, but never in the mud. He had never heard of a man who did not get the rations prescribed for him. He had heard the story of orderlies selling the food to the patients, but no soldier had ever complained to him of such a thing. He thought they would certainly have complained if they had such a grievance. He thought all the men knew who he was. He started without a uniform, but he found it was very inconvenient, as he was constantly being arrested for going to places where it was thought he ought not to have gone. The soldiers out there all understood the difficulties of the situation, and he did not think anything was left undone. He thought everyone tried to do his best; in fact, they were very enthusiastic in their endeavours to maintain the reputation which they believed the Army Medical Service had acquired. The orderlies did their best. Many of them were untrained men, and if their best was not good that was another matter. There was a great deal of sickness among the orderlies themselves. No neglect of the sick and wounded came under his notice in any way. In answer to Dr. Church the witness added that in his opinion an unnecessary amount of the time of the medical staff was taken up in administrative and clerical work which clerks ought to be employed to do. It took something like two hours every day to clear off the medical reports and returns. An immense amount of energy was wasted in this way.

Mr. Moran, a trooper of the City Imperial Volunteer Mounted Infantry, lately returned from South Africa, said he fell sick at Sanna's Post. He was treated with every possible kindness at Bloemfontein. The medical staff did the best they could for the men when they got into No. 9 General Hospital. So far as he knew there was no want of attention. During the eight days he was there the doctor visited him twice a day and there were nurses and orderlies. He was also in hospital at Wynberg about four or five days. He was very much astonished at the amount of attention given to them. He never heard anyone complaining out there. Everyone had spoken well of the medical men who attended them, and he had heard no complaint of the want of medical comforts.