

# THE LONDON HOSPITAL GAZETTE

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JULY, 1915

[SIXPENCE

## EDITORIAL

One of the effects of the War has been the promotion of our *Gazette* to the honourable position of a quarterly, a promotion which was rendered inevitable if we were to maintain it at anything like its original standard, so difficult has it become to collect suitable material.

It would be ungracious, however, not to acknowledge in the warmest possible terms the great help which we have received from our correspondents, and we live in hopes that the small rivulet which began to run in an earlier issue will soon become of such magnitude that it will form, as we think it should, the outstanding feature of our *Gazette*.

The changes which have taken place in the Hospital and College are singularly few and are almost entirely lacking in interest.

The high rate at which our students qualify is well maintained: it is computed that no less than 84 men from the London Hospital have been placed on the Register since August last. Despite this, however, it has become more and more difficult to fill the house-appointments, but an arrangement which has recently been reached with the Admiralty and War Office, whereby men may receive their commissions but be seconded during three months or so for service at the Hospital, should go far to solving this particular problem.

Although so many of our senior men are leaving, the entry of junior students is well maintained, and is even for the present year a little higher than it was at the same date in 1914.

Since our last issue we mourn the loss of Captain H. V. B. Byatt, of Lieutenant George Chapman, who was blown to pieces by a shell while attending to a wounded soldier, and of Private R. E. B. Denny, of the Canadian Scottish.

An obituary of them appears, with photographs, in another column.

Happily there have been no further deaths. A large number of our men have, however, been wounded or gassed:—Major F. J. Oxley, 17th London (T.F.); Lieutenants H. S. de Boer (who was wounded in the bombardment of the Dardanelles on April 25th), Brownson, Deane, Linton,

Marrack, Perry and Stewart, all of the R.A.M.C.; Lieutenant F. J. Good, of the Cheshire Regiment, and Lieutenant J. G. Will, of the Leinster Regiment. Captain E. C. Sprawson and Lieutenant Cohen have been invalided home, while Surgeons Quinton and Avarne have had the unpleasant experience of being torpedoed. All are, we believe, only slightly affected and are already well on the road to complete recovery.

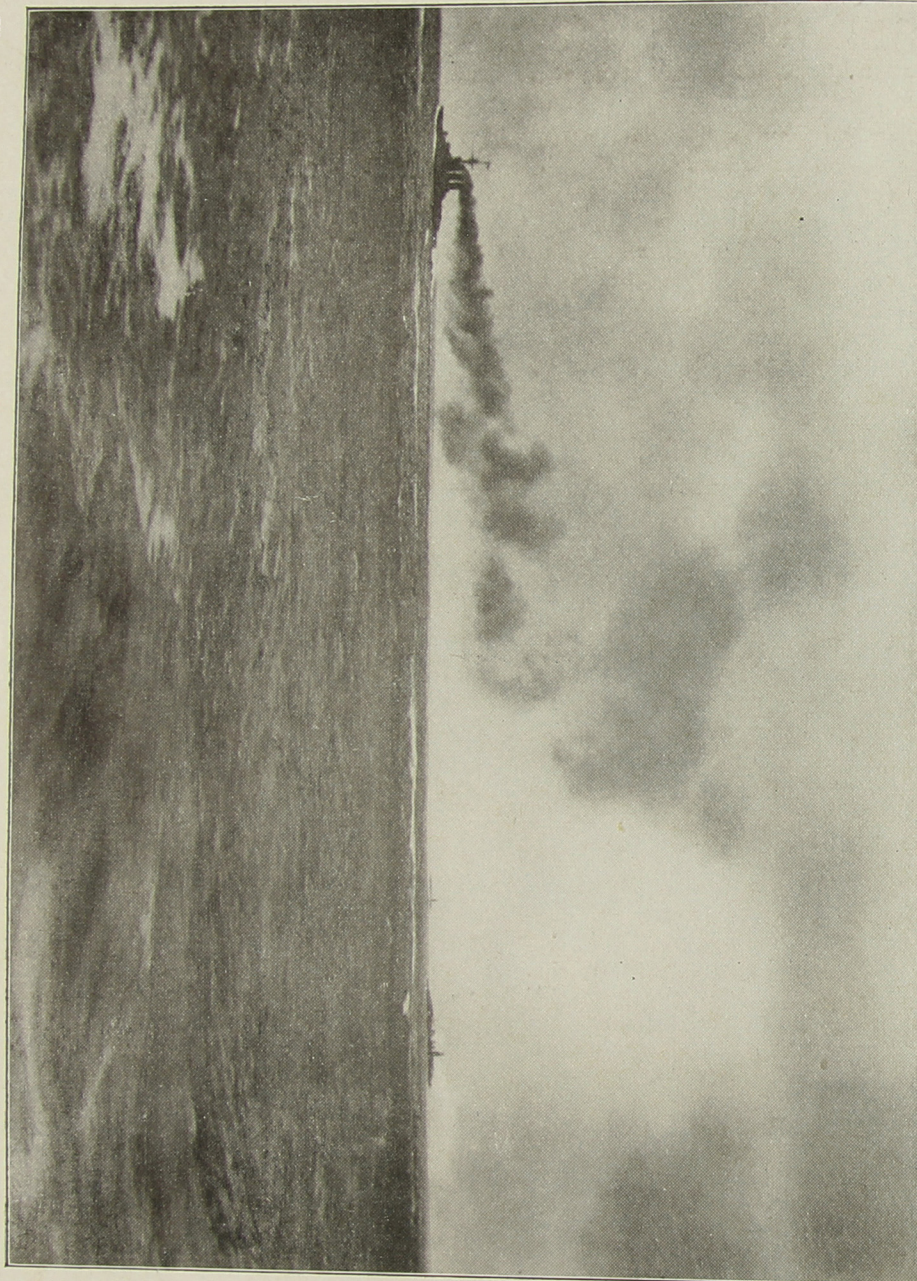
Lieutenants Linton, Stewart, Will and Good, who were each suffering from bullet wounds, have been seen at the Hospital recently, as have also Lieutenant Cohen and Surgeon Avarne.

As many "Londoners" will have understood from the account of the recent air raids, the ever-widening zone of warfare has at last extended so as to include our own neighbourhood.

It was with no small measure of pride and pleasure that we saw so many of our men were mentioned in the recent Dispatch:—Temporary Colonel Sir B. E. Dawson, K.C.V.O.; Temporary Colonel W. T. Lister; Major Sir E. S. Worthington, M.V.O.; Captain E. C. Sprawson; Captain H. F. Vellacott; Captain H. G. Winter: Lieutenants R. Burgess, A. J. Gilchrist, A. B. Lindsay, R. A. Preston, L. C. Somervell and H. F. Woolfenden. Major Sir E. S. Worthington, M.V.O., has received the Companionship of the Order of St. Michael and St. George, while Captains Vellacott and H. G. Winter, and Lieutenant R. A. Preston have been awarded the Military Cross. Misses Gertrude Richards and L. Wainwright have received the decoration of the Royal Red Cross. We are all conscious of sharing in the reflected glory, and our gratitude is both becoming and deep.

Peace, too, hath her victories and her honours, and we are glad of the present opportunity to offer our sincerest congratulations to the head of our Cardiac Department, Sir James Mackenzie, on the honours which have recently been conferred upon him—a Knighthood, and the Fellowship of the Royal Society—honours which we all hope he'll live long to enjoy.

Under ordinary circumstances we should be at the end of the academic year, and shortly we should all be taking our several ways for the long vacation; but this year all is changed, and the coming prospect has lost its accustomed power to



The above photograph was sent to us by Surgeon D. Ross who was on H.M.S. "Tiger." It was taken from H.M.S. "Indomitable," and it is the only one shewing both the "Tiger" and "Blücher." The "Tiger" in the photograph, has turned and is steaming to rejoin the Squadron. The "Blücher" is just about to sink, and is burning fiercely. Near the "Blücher," on the horizon, may be seen an English Destroyer which was responsible for saving a number of the officers and crew of the German vessel.



please. To those, and there must be many, who are out of tune with the gaieties and pleasures of the vacation, we should like to say that there is work in abundance within the hospital—work which, if performed, will be counted to them not only for righteousness, but also for part of the curriculum, which may in that way be considerably shortened. The strain of the medical curriculum is however far from light, and it is the duty of every medical student to see that he returns to the work of the Winter Session invigorated in mind and body.

We have just heard, on going to press, the very gratifying news that Captain H. G. Winter and Lieutenants A. J. Brown, R. V. Dolbey and A. B. Preston have been released, and are now back in the home country, where we hope they will find some compensations for the trials and afflictions through which they have passed.

### CHOSSES VUES

The traveller to France in the so-called year of grace 1915 must surely recapture something of the sensation which he experienced when first he visited a foreign land. He must feel that he is entering a new country, and instinctively every fibre and sense are alive to gather impressions and note incidents. Nor has this new country any defined frontier, for we pass into it long before we see the shores of France. No one who has watched the glow of excitement and pleasure which animates the travellers to the Continent at any of our great railway stations in peace time, and has contrasted with it the silence and gloom which enshroud them in these last sad days, but must feel that as he passes the barrier to the platform he leaves behind him the old familiar scenes and enters the confines of a new land.

The journey from Victoria to Folkestone quickly accomplished, we board the packet which seems strangely silent and deserted. Such travellers as there are consist of khaki-clad officers and men returning to the front after a few days' leave, with the merest sprinkling of civilians. Prominent on the lower deck is a large motor ambulance, "the gift of the women of South Australia," reminding one of the world-wide effect of the War, and the world-wide help which sustains us.

On the particular day in mind the weather was cold, wet and misty. The boat makes its customary turn outside Boulogne and then backs slowly into the harbour, passing below the Jeté d'Est, from which lofty eminence a few French soldiers look down upon us.

After tedious and uninteresting formalities have been gone through, one leaves the ship and steps on to French soil. Soldiers with fixed bayonets stand at the entrance to the Douane, and after the luggage has been perfunctorily examined by a few elderly officials, amongst whom could be noted a woman in black, we pass out into a confusion of trains, ambulances, motor-cars, trucks, railway lines, iron chains and stores of all descriptions, which emphasise at the outset the irreconcilable difference between the French and German systems.

It was in such a medley that a few days later might have been seen a simple coffin draped with the Union Jack, but otherwise unmarked. Around it stood a few young French boys holding their caps in their hands, exhibiting a reverence more deserving than they knew, for within the coffin lay the mortal remains of W. G. C. Gladstone.

To and fro, all day long, pass scattered elements of our Army: here an officer borne on a stretcher from ambulance to hospital ship; here a Canadian officer, who, with his spotless uniform, jaunty step and massive shoulders, seemed the very embodiment of youthful pride and vigour; and there a war-worn private fresh from the trenches, plastered with mud, sauntering to the ship on a few days' leave—from the kit bag on his back protruded the handle of a German sword.

In Boulogne itself the chief difference to be noted is naturally the presence of the soldiers. Of these, although the majority are British and of the R.A.M.C., there are not a few in the red and blue uniform of the French. The latter are nearly all approaching the extreme limit of the military age, and are evidently only for work at the base or on the lines of communication.

All the hotels of any pretension have been converted into Hospitals, and through their open windows the white coverlets of beds can be seen to have replaced the white cloths of the tables. Bandaged soldiers look down from the balconies, and R.A.M.C. orderlies disport themselves around the entrances and on the stairs.

A number of the women who pass are in deep mourning, but the French are possibly more ostentatious than we in the expression of their grief, and the losses of the French may very easily be exaggerated if the amount of crêpe is to be the sole criterion.

The only vehicles which pass are military motor cars and ambulances, with very occasionally a rickety and rumbling country cart. Otherwise the Boulogne people go about their business as usual, and the stream of bootless and half stockingless fisherwomen, bent under their baskets, may be seen at almost all hours making its way to the Fish Hall.

In France, the War, so far as it can be judged at the base, is characterised by the same unbroken silence with which we are so familiar in England, but there, as here, the silence must not be interpreted as due to any lack of feeling or appreciation, but most emphatically as the reverse. The barrier of language unfortunately precludes almost all fraternisation between the French and English soldiers, and the only communication possible to many is the salute, and even this is but seldom given, although when received it is apparently always deeply appreciated and warmly acknowledged.

In the centre of all this movement and bustle, clustered round the Cathedral, Hôtel-de-Ville and Castle, sleeps within its bastioned walls the old town of Boulogne, steeped in ancient memories of Godfroi de Bouillon and the Crusades, not to be aroused by the mere preparations or dispositions of War, but only should the cannon bring its walls clattering about its ears—if, indeed, even then.

High above the town, looking Westward to the sea, the figure of Napoleon looks down from his lofty column, but should ever any member of La Grande Armée revisit these heights he might well wonder at the change which a century can bring in international alliances—a reflexion which has, perhaps, a lesson for the Present and the Future.

Encampments form the Convalescent Dépôt and the Detail Camp, and while in winter it would have been difficult to find places more depressing from the vast ocean of mud in which they were situated, they are now, thanks to the effective drainage to which the sites have been subjected, transformed out of all knowledge; well metalled roads now run between smooth grassy banks, bedecked with flowers representing in many cases the National Arms and the Regimental Crests. Each of these encampments, with its workshops, stores, surgery, dispensary, baths, laundries, kitchens, dining halls and recreation rooms, is in fact a miniature garden city, inhabited by a floating population gathered from every corner of the British Isles, but all linked together by the common danger through which they have so recently passed, and the common task to which they are still committed.

A regimental day book which we were shewn here, dirty, stained and bullet-torn, containing the names of the men forming the company—here and there a name crossed through or ticked off as dead or missing—was extraordinarily effective in reproducing in a vague, mysterious fashion, the various scenes in which it had played its silent part.

Now and again, in the streets, one meets Indian soldiers or passes Indian transport waggons, but wherever they are met they fit into the picture with perfect dignity and propriety, although the experience of being asked for your passport in

France by an Indian soldier on guard over what was recently a Roman Catholic monastery and is now, so far as it exists at all, an Indian Hospital, is surely sufficiently strange to deserve mention.

In the late afternoon or evening the roads leading down to the town are alive with soldiers singly or in groups. The great rallying place is the harbour, for there they are almost in sight of England, and as they watch the sun setting over the waste of waters they can with but little effort imagine it at the same time sinking behind the hills and woods, the hayricks or chimney stacks, of their native land.

The shops possess no special feature, unless it be that they cater very largely for soldiers and mourning women. A card with the word "mobilisé" is frequently seen in the window above the door-plate of the professional man. The chief social institution is "afternoon tea," and from 4 to 5 o'clock the patisseries are crowded. The price of food is little, if at all, affected by the War.

All along the coast stretching Northward from Boulogne, the hotels have been converted into hospitals, while even where above the cliffs quiet sheep for centuries past have nibbled unmolested, the tents and wooden huts of field hospitals have begun very seriously to dispute the right of possession. Even into the placid life of the shepherd and his dogs, the War has broken with disruptive force.

Along the roads flows a constant stream of ambulances, transport waggons and motor-cars, occasionally a pair of despatch riders go by, or a country cart, usually driven and occupied by women, is pulled up at the barricade: after folded passports have been produced, and an enquiry of not too formal or serious a character, judged from the laughter in which it usually ends, has taken place, the old horse's head is jerked up and again he ambles on his jangling way. All the horses are old or white, the dark apparently have all been mobilised.

It is perhaps at the barricade that the civilian is first both literally and metaphorically pulled up, it is here perhaps that he first realises that what he is witnessing is something more than the customary movement of a garrison town, it is here that his fancy begins to play, for he is now indubitably in touch with the real thing.

As one passes inland from the coast over the few miles which we are permitted to traverse, the signs of War rapidly fade away. An occasional armoured aeroplane overhead or a military motor-car flying a small tricolour and disappearing rapidly in a cloud of dust are almost the only reminders of the great struggle proceeding just beyond the distant hills. The sight of a couple of French officers on horseback who had drawn rein in a country lane while they consulted a map was so rare as to appear



almost incongruous. The peace of the country is otherwise unbroken, at any rate on the surface, for the mobilisation orders on the walls of the estaminets, with the absence of men from the villages and the subdued attitude of the women, tell their own tale, the sadness of which is only accentuated by the free happy way in which the children run to greet you, asking for souvenirs and cigarettes.

The Church Services are endowed with more than their usual solemnity and sanctity, and though the congregations attending them consist largely of women, many of whom are in mourning, there is usually a sprinkling of French soldiers. A special feature in certain churches is the presence of the tricolour flag on the altar.

The railway stations again are of unusual interest, for some of the passing trains are transporting troops, and in the vans, lying on the straw-strewn floor or sitting on wooden forms, may be seen the chasseurs à pied, with their two-wheeled transport and ammunition-carts in open trucks at the back. Wearied though the soldiers were, they were never too tired to make a demonstration of affection if ever they caught sight of anyone representing, however humbly, their good ally.

The Hospitals, making allowances for the buildings and the purposes for which the latter were originally intended, are marvels of efficiency, and are in all essentials as good as those at home. The chief difficulty which has had to be overcome has been that of sanitation, but one would think that there has been by now sufficient practical demonstration of our English Kultur to satisfy the most impatient of sanitary reformers.

The deaths in hospital have been relatively few, and the dead are buried together in the French cemeteries: they lie in rows, as recently they lay in their hospital beds, as but a short time ago they stood together in the trenches. Over each is a wooden cross with the regimental rank or number, and at their feet are English posies planted by the nurses at the hospital—in April they were daffodils, and, as they bent to the wind blowing over them, they reminded one forcibly of that lesson in mortality which they taught Herrick so many years ago—

"First I shall incline my head,  
Secondly I shall be dead,  
Lastly safely buried."

At the side of the soldiers' graves is a small circular mound with a larger cross bearing the names of the officers who lie underneath, looking upward to the stars and over the Channel which they gave their lives to defend.

A few paces away, within the same sanctuary, are the graves of a few German dead, and they too are not without their flowers, for if many hard things can be said of death we may at least remember that he removes all enmity.

As we passed Cape Grisnez on our way home the thought came to mind that it was off there that the Spanish Armada lay at anchor 330 years ago, and that the German army might now have been there too had it not been for that small heroic British army which had so gloriously barred the way.

As the cliffs of England came into sight, a young Sub-Lieutenant returning from the trenches, the sort of boy whom one associates with flannels and school cricket elevens, turned to his companion and said "Well, I never thought to see *those* again!"

A few hours later and the train puts us down at Aldgate Station, and we enter Whitechapel with its bus—and other traffic, with its almost hourly editions of newspapers, and with the no less striking absence of mourning and of ambulances. For a short time these differences create an impression by no means pleasant, but soon we grow accustomed to them, and ceasing to notice, we drop back into the old routine.

W. W.

## RED CROSS WORK IN SERBIA

FEBRUARY-MAY, 1915

"Come along, Tolstoi, hurry up!" And the white-haired old man—Ivan Stefanovitch is his real name—laughs and shuffles round and opens windows and sweeps up the bath-house, for we have received notice that 120 patients are to arrive at 10 o'clock. The Austrian orderlies from the clearing hospital bring along stretchers and piles of pyjamas and dressing gowns, while we strip off our coats and get into the curious linen overalls which fit closely round the neck, wrists and ankles. The costume rather suggests that of a pantomime clown, but it serves its purpose of keeping out the lice, which transmit typhus. On one occasion, while thus attired, someone struck up a cheerful ditty, to the tune of "God Save the King":—

"There are no lice on us,  
There are no lice on us,  
No lice on us!  
There may be one or two  
Great big fat lice on you,  
But what we sing is true—  
No lice on us!"

"Is that your National Anthem?" asked a Serbian bystander who recognised the tune, and we replied that it was.

Presently the bullock-carts begin to arrive, and we proceed to unload the patients and take them into the large wooden shed which we have built as our receiving room. There is a big stove in one corner, and benches along the sides, where the men who are able to sit down are accommodated. A number of trestles are placed ready for the

stretcher-cases. The orderlies are soon busy clipping heads, for everyone must have his hair cut short. Each man is then undressed, and his clothes are sewn together with twine, labelled with a brass number-plate, and dropped forthwith into one of the large iron boilers standing by. Next comes the washing, and here we have the immense advantage of an unlimited supply of hot water, for the bath-house is built over the famous hot sulphur springs which enjoy such a wide reputation in Serbia. How thankful they are to be able once more to have a good wash! Clean pyjamas are handed out, wounds are dressed, and soon the Austrian orderlies are carrying the patients across to the clearing hospital, 50 yards away.

So they come in, usually batches of 50 to 100 at a time, and for a few days the staff of the clearing hospital is busy looking out for infectious cases. As soon as typhus is diagnosed the patient is removed to the big isolation hospital on the hill—a long wooden building which was erected in 10 days. It is just this sort of building which is so badly needed in Serbia; it can be rapidly and cheaply put up, and serves its purpose admirably. Our typhus hospital cost 3,100 francs, and provided accommodation for 80 patients.

Last March there was a conference of British doctors working in Serbia, held at Nisch, and two of us set out from our headquarters at Urnjatchka-Banja to travel the 70 miles which lay between us and the temporary capital.

There is a sort of scenic railway, with a gauge of two feet nine inches, by which one covers the first half of the journey, and we found the train crowded with soldiers and peasants. However, the small mail van provided excellent accommodation—it is wonderful how comfortable one can be on a pile of mail bags and parcels—and after about three hours we reached Krushevatz, twenty miles away.

"Hullo! Good evening, gents!" and a grimy face surmounted by verminous fringes of unkempt hair was thrust into the doorway of our van. "How are you, gents, quite well?" "Thoroughly fit, thanks, come along in, old friend, and tell us all about it. Where did you learn English?" for now we recognised the ragged remains of an Austrian uniform, and the rare sight of a lively, cheerful Austrian prisoner-of-war stirred our interest. He climbed into the carriage, whose atmosphere acquired forthwith a strange and penetrating perfume, and seated himself on a box. "I lived in London five years," he said, "Camden Town is my home, but when the war began I was recalled, and had to fight for Austria." "When were you taken prisoner?" "At Christmas; they sent us to Nisch, and we lived there for a little while. Then they sent a hundred of us here to Krushevatz to work on the railway." "How did

you get on?" "Oh, we had a bad time. There was a lot of snow, and we were very cold and wet, and our shed was so small that we could not all get in, so some of us used to sleep outside. Then we got typhus, and very many died. Now there are only four of us left, working here; and there are 28 in hospital, and all the rest are dead. But now, when there are only four, our shed is quite comfortable and we cook our dinner there, and all day we work in the station. Well, goodbye gents, I will see you one day, after the war, when I come back to my home in London." And, as the train moved slowly out of the big goods yard, our strange companion sprang out into the night.

That is a typical story of the fate of Austrian prisoners in Serbia last winter—in our own village we admitted 68 cases of typhus during our first fortnight, and there were 50 deaths. And so, all day long, they were digging graves on the hillside, and every morning the hospital bullock-cart would be kept busy. This vehicle used to come round every day and "call for the empties," as someone irreverently expressed it, and it was seldom that there was not one more victim of the terrible epidemic. Later on, when our clearing hospital scheme was established, and we opened our big fresh-air isolation buildings, the mortality came down from about 80% to about 5%. And among all our hundreds of cases there was scarcely one who contracted the infection after arrival, for, it seems, in the absence of lice the disease cannot be transmitted.

We had five hospitals with some 300 beds, so that our staff of 26—five doctors, two dressers, four orderlies and fifteen nurses—was kept fairly busy.

Serbia is described as a land of priests, pigs and peasants; and as priests and peasants are mostly under arms just now, the pigs—and women—predominate. We were very glad of our six months' tinned provisions, brought out from England, for one soon gets tired of pork. Goat-steaks provided an occasional diversion, but were rather tough; chickens and turkeys were also very acceptable. There seemed to be plenty of food for the people, and, after all, one's tastes are simple when one is in that stage of civilisation where a wooden spike is the usual form of plough, the bullock-cart is the ordinary means of transport, and every housewife weaves the cloth for her family's garments.

## REVERIE

The red sun sinks slowly down into the sea,  
With the long waves rolling ceaselessly,  
While the great round earth whirls on.  
The red blood sinks slowly down into the ground,  
Where the long lines battle ceaselessly,  
As the great fierce war rolls on.



There is scarcely a home  
In this pleasant land  
But has paid its part  
In the nation's price;  
There are few to-day  
But have felt the wind  
Of the sweep of the wings of the Angel of Death.

The measured tread of the marching troops  
And the long-drawn roll of the guns—  
They echo in many a heart afar  
From the hard-fought field.

So the sun sinks low, and the stars look down  
Where the cold dead lie so still;  
Then the dream-forms beckon and wave,  
And they live again, as shadows live,  
And their comrades see it and hope anew,  
While those in the far-off home  
Look up and pray  
As if at the sound of an Angelus.

But East and West  
The red blood sinks slowly down into the ground,  
As the great fierce war rolls on,—  
And the shadows fade and are gone.

D. C. N.

FRANCE.

December, 1914.

### SOME CONSIDERATIONS OF EARLY HINDU SURGERY

Surgery or *salya* (or *shalá*, which means to remove rapidly), or the art of removing foreign substances from the body, particularly the arrow.

That the science of medicine was known to ancient Indians to a great extent is elucidated by many facts, of which the following may be enumerated:—

(1) That even now there are numerous medical practitioners in India who are more or less independent of Western or modern scientific achievements in medicine, and who are well versed in ancient Hindu medicine inherited from their forefathers.

(2) That the books and manuscripts written in classical Sanskrit, relating healing of human agony, abandon Hindu literature.

Even the history of medicine, written by Neuburger, mentions the development of medical science amongst ancient Hindus.\*

\* Neuburger mentions in the chapter of "The Medicine of the Indians" at the very outset as follows:—

"Thanks to the inexhaustible fount of Sanskrit literature, its development can be traced, in outline at any rate, from the primeval origins in empiricism and theurgy to its height as a completed system of learning. This development is doubly interesting; on the one hand there are shown many parallels to the medical art of the Greeks, corresponding to the great scientific attainments of the Indians (in philosophy, mathematics, geometry, philology) and to their poetic art. . . . On the other hand is seen the determining influence which the East, with the general condition of culture springing from the soil, exercised upon the trend of medical thought."

Among the sacred works of the Hindus there are four immortal Vedas (from Ved—to know), *e.g.*, Rig, Yajur, Shama and Atharva. From these were produced second class of sacred books called *Upavedas* (*upa*—joined to), one of which is called "Ayur-Veda" (*Ayur*—the period of life, and *Ved*—to know), and was intended to teach how to live in a proper manner in the world by preventing and curing diseases.

This work is known to consist of one thousand sections of a hundred stanzas each of verses (*slokas*).

Little of the original has escaped the destructive ravages of time, and even now can be elucidated by proper Sanskrit pundits, or scholars of India, as well as of Europe.

The original consisted of a full, true account of every branch of the healing art. Through the fragments which have been preserved by the commentators we are enabled to judge the arrangements of the great original into the following divisions:—

(a) *Salya* or surgery included the methods to remove external substances introduced into the body by accident, *e.g.*, grass, wood, stone, iron, earth, bones, hair and nails. Pus which has not been evacuated, and also the means of removing dead child from its mother. Healing sharp instrument wounds, applying bandages, and using surgical instruments in operations, and of the treatment of different kinds of inflammation, abscesses and other surgical diseases.

(b) *Salakya*.—Treatment of external and organic diseases of the ear, eye, nose, and other which are above the clavicle.

(c) *Kayachikitsa* (means treatment of body).—It describes the diseases which affect the whole body, *e.g.*, *jara* (fever), *otesara* (dysentery), *raktapata* (hematemesis), *sosha* (consumption).

(d) *Bhutavidya*.—Restoration of deranged faculties of mind supposed to be produced by demoniacal possessions.

(e) *Kumraabhritya*.—Comprising infant treatment.

(f) *Aqadantantra*.—Antidotes for poison.

(g) *Rasayantantra*.—Tonics, etc., which restore youth, beauty and happiness.

(h) *Vajkaran-tantra*.—Consists of treatise as to the best means of increasing human race.

Out of the above it will be seen that only (a) and (b) fall into surgical scope of modern days.

Dhanwantri, or the divine physician, was born to teach the above eight branches of medical science. He declares that surgery cannot be practised with success unless the practitioner is

familiar with the practice of medicine of which it is only a branch.

Susruta was the first Hindu surgeon, and hence the father of Hindu surgery. He was known to be a pupil of Dhanwantri.

The following remarks may be considered in surgery:—

(1) Structure of the body, and their natural and relative position, so as to enable surgeons to successfully perform the operations. The body consists of humours (*dossah*) and essential parts (*dhatu*). Humours, *e.g.*, *vayu* (the air), *pitta* (bile) and *kofa* (phlegm). If they are deranged they cause disease. Essential parts, *e.g.*, *chyle* (*rasa*), blood (*rakta*), flesh (*mansa*), fat (*meda*), bone (*osthi*), marrow (*majje*), semen (*sakra*). When these are diminished or diseased the person dies.

(2) Nature of diseases cured surgically—inflammation, two kinds:—

(a) Produced by external injuries, *e.g.*, accidents.

(b) Produced by internal causes.

Stages of inflammation:—

*Ama* (unripe).

*Pachamana* (ripening stage).

*Pakwa* (ripe).

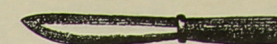
Cure:—Use of sedative, local bleeding, poultices, opening the abscess, cleansing it, healing the breach of continuity, and lastly, restoring the natural colour to the part.

According to Susruta, the opening of an abscess should be made when the swelling is soft, without pain, and is undefined. A lancet should be used which is to be withdrawn when the pus is seen. Care should be taken to avoid vital parts, *e.g.*, tendons, large vessels. The surgeon should possess the following qualities:—boldness, steadiness, presence of mind, quickness, and should possess a good instrument. After the evacuation of the abscess, prayers are to be repeated over the patient; then he is to be removed to a well ventilated room and is to be surrounded by cheerful friends. It should be dressed twice a day in dangerous cases.

Description of surgical instruments and bandages:—The hand is considered the first, the best and most important of all surgical instruments, as it is with this assistance that all operations are performed.

Classes of instruments:—

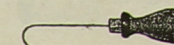
Blunt or *jontras*, 105 in number. These include forceps, hooks, tubes, catheters, bougies and the hand. Sharp cutting edges or *sotros*, 20 in number. These include knives, saws, trocars, scissors and needles (as shown in the following figures).



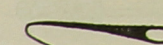
1. Ardhadhara shastra.



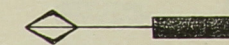
2. Atimukha shastra.



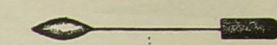
3. Ara shastra.



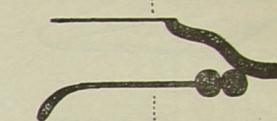
4. Badisha shastra.



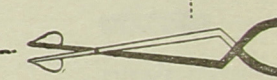
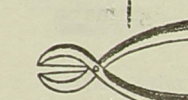
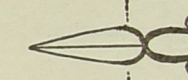
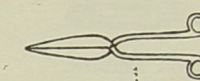
5. Dantashanku shastra.



7. Karapatra shastra.



6. Eshani shastra.

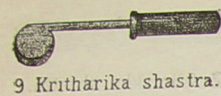


8. Antarmukha kartarika.

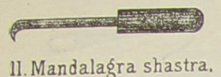
Bandages are divided into 14 different parts, *e.g.*:—

- (1) *Kosa*.—Hollow cylindrical for fingers, etc.
- (2) *Dama*.—Large bandage to support parts.
- (3) *Sustoko*.—A circular bandage to apply to joints, foreheads, chest, and under the ears.
- (4) *Unbulata*.—A roller to encircle the extremities, etc.
- (5) *Protobe*.—A broad bandage for the neck and the external organs of generation.
- (6) *Sloghuka*.—A bandage enclosing a splint, to keep the parts firm, as in fingers, etc.
- (7) *Mondona*.—Circular bandage for head.
- (8) *Gonoka*.—A double bandage which is applied to ulcers.
- (9) *Kota*.—Four-tailed bandage for the cheeks, temples, lower jaw, etc.





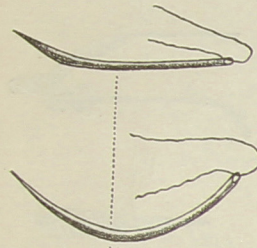
9 Kritharika shastra.



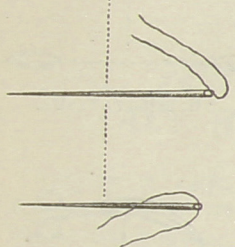
11. Mandalaḡra shastra.



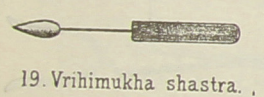
13. Nakha shastra.



16. Trikurchaka shastra



15. Suchi shastra.



(10) Cheena.—A bandage for the angles of the eyes.

(11) Bebanda.—A bandage for the back, abdomen and chest.

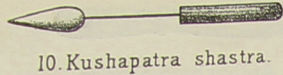
(12) Butana.—A large bandage for head.

(13) Gopana.—A concave bandage to the chin, eyes, lips, shoulders, scrotum and penis.

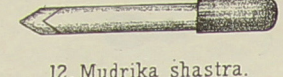
(14) Panchanghu.—A bandage for clavicle, with five tails.

The also had the knowledge of the means of removing blood from the body when therapeutic conditions necessitated it. Methods employed are cupping, venesection and the use of leeches. The following are used for arresting hæmorrhages:—

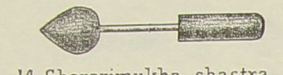
- (a) Astringents.
- (b) Use of ice (hima).
- (c) Caustic.
- (d) Actual cautery by red hot iron rod should the other means be not sufficient.



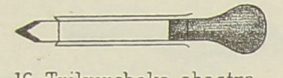
10. Kushapatra shastra.



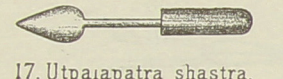
12. Mudrika shastra.



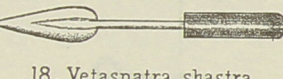
14. Shararimukha shastra.



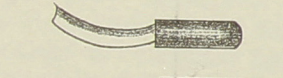
16. Trikurchaka shastra



17. Utpaipatra shastra.



18. Vetasptra shastra.



20. Vridhipatra shastra.

Burns were recognised in four degrees, *e.g.*:—

- (1) Plusta.—Change of colour of the skin, with pain.
- (2) Durdogdha.—Blisters, with much pain and redness.
- (3) Samadogdha.—Black, not much pain.
- (4) Atidogdha.—When the part is separated with the destruction of the vessels, etc., with fever, thirst, faintness, and the wound heals slowly.

It will be seen that these stages compare favourably with those described in modern surgery.

Directions to performing operations:—

When an operation is decided on, a fortunate moment is to be selected, and the Brahmin and surgeon are to be propitiated with gifts. A clean and well lighted room is to be chosen, strong and steady persons are to be in readiness to hold him, while care is taken not to frighten the patient.

Means of removing foreign substance from the body. Two main varieties exist, *e.g.*:—

- (a) One firmly fixed in the body.
- (b) The other is loose.

There are 14 ways of removing extraneous substances, each of which receives its name according to the way it is removed, *e.g.*, by pressure, incision, emetics, suction and loadstone, etc.

Wounds are divided into six varieties and are produced by accidents, and are of various shapes and forms, *e.g.*:—

- (1) Chhinna.—Or incised wounds, with a large open surface.
- (2) Bhinna (or penetrating wounds).—Is by pointed instruments, as the horn of a cow, etc., followed by fever, thirst, loss of appetite, difficult breathing, and stoppage of secretions as urine and sweat. When the stomach is wounded it is accompanied with a vomiting of blood and a swelling of the abdomen, with severe pain.
- (3) Biddha (or punctured wound).—Sharp pointed and narrow instrument.
- (4) Khata.—This is composed of two forms, second being accompanied with destruction of the superficial parts, and it is a contused wound.
- (5) Pichita.—When by pressure or the weight of a heavy substance fracturing the bones or injuring soft parts—the wounds filled with marrow and blood.
- (6) Ghrista.—Or bruised by coming in contact with a hard body.

Accidents may also produce fractures and dislocations. Six varieties of fractures are recognised:—

- (1) Utpista.—When the dislocated joint is crushed and swelled both above and below, with much pain, which increases at night.
- (2) Bislistia (or separated).—Less swelling, pain is continued, movements of the joints are continually lost.
- (3) Bibatita.—When the joint is twisted.
- (4) Tirjakhepta.—When one part of the joint is turned outward, with severe pain.
- (5) Otkhipta.—When one of the bones of a joint are dislocated, while the other remains in the usual place.
- (6) Abakhepta.—When a bone is forced downward, with much pain.

Fractures are of 12 varieties:—

- (1) Korkotaka.—When the fracture is in the middle of the bone with swelling.
- (2) Aswakurna.—In which the bone protrudes like the ear of a horse.
- (3) Churuta.—When accompanied by bruises and the bone is crushed.
- (4) Pichchita.—When depressed by a heavy weight without swelling.
- (5) Astheechullita.—When a small part of the bone is elevated.
- (6) Kandabhagna.—When a larger bone is disabled and fractured.
- (7) Majamugoda.—When the broken part of the bone enters the same bone.
- (8) Atipatta.—When the fractured bone is separated.
- (9) Bokora.—Partial fracture.
- (10) Cheena.—When only a small part remains undivided.
- (11) Palta.—When comminuted without pain.
- (12) Sphuita.—When the bone is swelled with small openings.

After the above descriptions it will be noticed little remains of this branch which does not come up to modern surgery. Treatment is also mentioned in elaborate scales. They also knew the use of a kind of pulley, called chakra, when the hip joint or knee joint were dislocated. Reduction by pulling was also practised, and also by fomentations, warm oleaginous applications and massage, etc. Splints and bandages were also applied.

The effect of Hindu Medical Science upon the Arabs, after about 700 A.D., was considerable, for the khalifs of Bagdad caused several books on the subject to be translated. The works of Charaka and Susruta were rendered into Arabic at the close of the eighth century A.D. (probably not later than the fourth century), and are quoted as authorities by the celebrated Arabic physician, Al-Razi, who died in 932 A.D. Arabic medicine, in its turn, became the chief authority, down to the seventeenth century, of European physicians. By the latter, Indian medical authors must have been thought highly of, for Charaka is repeatedly

mentioned in the Latin translation of the Arab writers, Avicenna (Abu-Sena), Rhazes (Al-Razi), and Serapion (Ibu-Sarafyan).

In modern days European Surgery has borrowed the operation of Rhinoplasty or the formation of artificial noses from Indians. It was without doubt that through the Arabs of southern Europe (who heard it from the Indians), that Tagliacozzi, about 1590, introduced his operation of fashioning a new nose from skin taken off the patient's own arm.

Conflicting views regarding the age of Hindu medicine exist. Dr. Hessler, author of a Latin version of "Susruta," refers the composition of Susruta's standard work to the period of about 800 B.C. Dr. Haas has refuted this, but his theories have been refuted in their turn by Weber, and, particularly, by the late lamented Professor Muller, by whose elaborate investigations the influence of the Indian writers on medicine, on the medical literature of Arabia, has been finally established.

Relations of Indian and Greek medical science:—

The priority of the above two cannot be answered yet, as they have not been compared sufficiently. Recently, some close parallels have been discovered between the works of Hippocrates and Charaka (according to the Chinese authority, the official physician of King Kanishka), which render Greek influence before the beginning of Christian era.

The literature on the Hindu surgery requires much knowledge of Sanskrit to form an adequate idea. Hence it requires much spade work.

The above lines are written only to give a most abridged idea of it from various books.

N. M. SEN-GUPTA.

## LIST OF NURSES SERVING THE ARMY AND NAVY

### Ambulance Train

Crooks, Miss Annie	...	No. 12.
Dodd, Miss Ethel	...	No. 9.
Firman, Miss Helen	...	" "

### Hospital Ships

Haines, Miss Alice	...	"Carisbrooke Castle."
Honeywood, Miss Alice..	...	" "
Macleod, Miss Catherine	...	" "
Marshall, Miss Edith	...	" "
Webb, Miss Maud	...	"Oxfordshire."
Hutchinson, Miss Ethel	...	"St. David."
Fairbrother, Miss Mabel	...	"St. Andrew."
Godwin, Miss Muriel	...	" "
Edwards, Miss Caroline..	...	"Dina."
Elvins, Miss Ella	...	" "
Cave-Browne-Cave, Miss	...	"Queen Alexandra."
Webb, Miss Chester	...	" "



*Nurses who left for Haslar*

Adams, Miss Nellie  
Cox, Miss Muriel  
Edwards, Miss Evelyn  
Fox, Miss Gertrude  
Fox-Harvey, Miss

Leaver, Miss Mabel  
Newton, Miss Helen  
Rudall, Miss Margaret  
Sandison, Miss Margaret

*Nurses in France*

Amos, Miss Winifred  
Ashford, Miss Mary  
Ball, Miss Nellie  
Barns, Miss Annie  
Bond, Miss Katherine  
Brothwell, Miss Kate  
Buckingham, Miss

Hawkins, Miss Millicent  
Hawkins, Miss Sarah  
Hefferman, Miss Mary  
Hissey, Miss Marion  
Holmes, Miss Eleanor  
Kempthorne, Miss  
Kathleen

Burrell, Miss Stella  
Carthew, Miss  
Caven, Miss Jessie  
Clancy, Miss Julie  
Clements, Miss Nellie  
Cooke, Miss Edith  
Cooper, Miss Frances  
Crooks, Miss Annie  
Daly, Miss Henrietta  
Davy, Miss Valentine  
Deakin, Miss Lucy  
Dickson, Miss Bessie  
Dodd, Miss Ethel  
Dunk, Miss Edith  
Garnett, Miss Frances  
Goldthorpe, Miss Mary  
Gosset, Miss Violet  
Grayson, Miss Dora

Kathleen  
Kewley, Miss Frances  
Lambert, Miss Edith  
Leacy, Miss Mary  
Loder, Miss Martha  
Martini, Miss Nellie  
Nickalls, Miss Edith  
Paulin, Miss Dorothy  
Phillips, Miss Rosa  
Pritchard, Miss Florence  
Spicer, Miss Ethel  
Turner, Miss Lilian  
Wainwright, Miss Alice  
Walker, Miss Constance  
Wallbank, Miss Kate  
Wheatley, Miss Lilian  
White, Miss Kate  
Williams, Miss Mabel  
Witherington, Miss  
Wolsey, Miss Margaret

*Chatham*

Baillie, Miss Constance

*Royal Naval Hospital, Malta*

Hardcastle, Miss Evelyn

*Dublin*

Berry, Miss Gertrude  
Flynn, Miss Mary

Rowlands, Miss Elizabeth  
Sharpe, Miss Katherine

*Colchester*

James, Miss Ethel

*York*

Veitch, Miss Gladys

*Indian Military Hospital, Brighton*

Klamborowski, Miss Margaret

*Military Hospital, Grosvenor Road*

Farquharson, Miss Wilhelmina

*Aldershot*

Black, Miss Catherine  
Finch, Miss Dorothy  
Hall, Miss Marion  
Houlson, Miss Coral

Humphries, Miss Evelyn  
Prettyman, Miss Margaret  
Roberts, Miss Caroline  
Wood, Miss Theodora

*Netley*

Deverell, Miss Helena  
Hobson, Miss Edith

Stearn, Miss Isabel

THE LONDON HOSPITAL  
MEDICAL CLUB*The Medical Agency for Appointments*

The Medical Agency was started in 1907 by the London Hospital Medical Club, for the benefit of "Londoners" past and present, and since then a large number of men have availed themselves of its services. The Agency is superintended by the Registrars, with the advice of a Sub-Committee of the Club.

At a Meeting of the Council of the Club on March 15th, 1910, it was decided that certain fees should be charged. A list of these can be obtained from the Registrars. For appointments as *locum tenens* they are as follows:—

## (a) If for a longer period than a week—

Members of the Club, 2½ per cent. on amount earned, with a minimum fee of 5/—.

Non-members, 5 per cent., minimum fee 7/6.

## (b) If for one week or less—

A fee of 5/— to be paid by the Principal.

For appointments of less than one week no fee is charged to the *locum tenens*.

For appointments of more than one week no fee is charged to the Principal.

The proceeds of the Agency, after the deduction of expenses, will be paid to the London Hospital Medical Club to be used for benevolent purposes.

The new regulations came into force on July 1st, 1910.

(a) Any Practitioner requiring a *locum tenens*, etc., is requested to send full particulars to:—

THE MEDICAL AGENCY REGISTRAR,  
LONDON HOSPITAL, E.

The use of the telephone saves much delay. Messages will be received at any time between 9.30 a.m. and 5 p.m., at the Registrars' Office, No. 5020 Avenue (10 lines). Telegrams should be addressed "Registrar, London Hospital, White-chapel."

(b) Anyone seeking an appointment as *locum tenens* or otherwise, should add his name to the list kept in the Registrars' Office. Information will be sent by post or telegraph, as soon as a suitable position is heard of.

Men who are entering their names for the first time must do so personally to the Registrar in charge of the Agency.

## (c) Particulars of practices, partnerships, Hospital appointments, etc., can be obtained from the Registrar in charge of the Agency, who can be seen daily at 12 o'clock in the Registrars' Office.



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## Surgeon-General

Where serving.

Eames, W. ... Portsmouth.

## Fleet-Surgeons

Bankart, A. R. ... "Agincourt" (b.)  
Cameron, M. ... "Cornwall" (c.)  
Dartnell, L. E. ... "Africa" (b.)  
Daw, W. H. ... "Astroea" (c.)  
Dickinson, R. L. ... "Temeraire" (b.)  
Eames, E. T. P. ... "Prince of Wales" (c.)  
Jackson, P. Vaughan ... "Mantua" (m.f.a.)  
Mathew, W. E. ... "Cochrane" (c.)  
Nix, P. K. (killed) ... "Bulwark" (b.)  
Pearse, H. H. ... "Blenheim" (c.)  
Penny, H. L. ... "President."  
Sequeira, W. S. H. ... "Tyne" (d.s.)  
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Blunt, T. E. ... "Crescent" (h.s.)  
Cox, E. ... "Pembroke" (g.)  
Dudding, J. S. ... Haslar (n.h.)  
Hearn, E. M. W. ... "Reliance."  
Jeffery, T. W. ... "Vulcan" (sp. t.v.)  
Langdale, H. M. ... Haslar (n.h.)  
Phipps, C. A. G. ... "Pyramus."  
Schofield, A. R. ... "Centurion" (b.)  
Spalding, A. D. ... "Agamemnon" (b.)  
Treves, Sir F. (Hon. V.R.) London Division.  
Wallis, J. G. ... "Cyclops" (c.)  
Walsh, G. D. ... "Dominion" (b.)  
Warren, L. ... "Azachi" (h.s.)

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Ash, W. M. (temp.) ... "Columbine" (sl.)  
Avarne, C. H. B. (temp.) ... "Goliath" (b.)  
Aveling, C. J. ... Haulbowline (n.h.)  
Billings, H. C. (temp.) ... "Hebe" (t.g.)  
Bostock, J. (temp.) ... "Victory" (d.s.)  
Brotchie, R. T. (V.R.) (killed) "Bulwark" (b.)  
Burrell, C. M. (temp.) ... "Southampton" (c.)  
Carey, R. S. (temp.) ... "Melbourne."  
Carr, W. J. ...  
Castle, W. F. R. (prob. V.R.) "Panther."  
Fawcett, R. W. (prob.) "Ferret" (t.b.d.)  
Frossard, P. E. F. (prob. V.R.) "Redpole" (t.b.d.)  
Gabe, I. S. ... "Devonshire" (c.)  
Glass, R. L. (temp.) ... "Dreadnought" (b.)  
Gwynne-Jones, T. ... "Marlborough" (b.)  
Harty, A. H. (temp.) ... "Africa" (b.)  
Heiron, G. M. ... "Crown of Arragon" (m.f.a.)  
Herman, A. E. (temp.)  
Hitch, F. G. ... Portland (n.h.)

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Holman, A. G. (temp.) "Victory" (d.s.)  
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Loughlin, D. ... "Clio" (sl.)  
MacEwan, E. ... "Invincible" (b.c.)  
McKerrow, W. A. (temp.) Plymouth (n.h.)  
MacMullen, A. R. (temp.) "Pembroke" (g.)  
Martin, G. N. (temp.) ... "Emperor of India" (b.)  
Martin, J. H. B. ... "Inflexible" (b.c.)  
Matthews, V. L. (killed) R.M.A.  
Maynard, E. (temp.) ... Gibraltar (n.h.)  
Milne, W. A. (V.R.) ... "Soudan" (h.s.)  
Molesworth, H. W. L. (prob. V.R.) "Moorsom" (t.b.d.)  
Padwick, H. B. (prob.) "Attack" (t.b.d.)  
Parker, H. B. ... "Grafton" (c.)  
Priston, J. L. ... "Theseus" (c.)  
Quinton, R. F. ... "Victory" (d.s.)  
Ridge, E. M. (V.R.) (killed)  
Ross, D. (temp.) ... "Tiger" (b.c.)  
Scott, H. M. (temp.) ... "Revenge" (b.)  
Sharp, G. R. (prob. V.R.) "Christopher" (t.b.d.)  
Sharrod, A. R. ... "Hibernia" (b.)  
Taylor, C. J. G. (V.R.) "Soudan" (h.s.)  
Tonkinson, A. J. (killed) "Monmouth" (c.)  
Townend, R. O. (prob. V.R.) "Acheron" (t.b.d.)  
Walker, G. A. (temp.) Cromarty.  
Warburton, R. ...  
Watson, J. A. (temp.) "Pembroke" (g.)  
Watson, J. H. D. (temp.) (killed) "Hawke"  
Wetherbee, H. (temp.) Plymouth (n.h.)  
Whelan, H. M. ... "Essex" (c.)  
Wollaston, A. F. R. (temp.) "Agincourt" (b.)

(v.r.) = R. N. Volunteer Reserve.  
(temp.) = Temporary Surgeon.  
(prob.) = Surgeon Probationer.  
(n.h.) = Naval Hospital.  
(h.s.) = Hospital Ship.  
(b.) = Battleship.  
(b.c.) = Battle Cruiser.  
(c.) = Cruiser.  
(t.b.d.) = Torpedo Boat Destroyer.  
(g.) = Gun-boat.  
(sl.) = Sloop.  
(d.s.) = Depot Ship.  
(m.f.a.) = Merchant Fleet Auxiliary.

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Kenwood, H. R. Mould, W. T.  
(temp. hon.)



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 Bramhall, C. O'Flaherty, A. R.  
 Dudding, T. S. Watts, B.  
 Butler, S. G. (D.S.O.) Worthington, Sir E. S.  
 Fox, A. C. (D.S.O.)

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 Gibson, H. Robinson, F. H.  
 Higgins, S. J. Rudkin, G. F.  
 Ingoldby, C. M. Sealy, H. N.  
 Monteith, H. G. Sherren, H. G.  
 Mallam, R. K. Treves, W. W.  
 Painton, G. R. Varvill, B.  
 Phillips, E. Winter, H. G. (prisoner).  
 Rigby, C. M.

*Lieutenant*

Heale, A. S.

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*Temporary Lieut.-Colonel*

Eve, Sir F. S.

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*Captains*

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 Habgood, A. H. Vellacott, H. F.  
 Macnab, A. (killed). Leake, A. M. (temp).

*Lieutenants*

Bannerman, R. G. Hartgill, W. C.  
 Biggs, K. Linnell, R. M. C.  
 Brown, A. J. (prisoner) Linton, E. C. (wounded).  
 Brownson, R. D. D. D. Pendered, J. H.  
 (wounded). Perry, A. C. (wounded).  
 Burton, C. F. Phillips, E.  
 Chambers, E. R. Preston, A. B. (prisoner).  
 Chapman, G. M. Preston, R. A.  
 (killed). Quinlan, W. T.  
 Cornelius, W. H. Read, G. D.  
 Deighton, J. Sanders, F.  
 Evans, D. G. Thompson, R. R.  
 Frean, H. G. Tothill, W. V.  
 Gilchrist, A. J. Young, W. A.  
 Gwynne-Jones, H.

*Lieutenants on probation*

Crouch, H. A. Woods, R. S.  
 Morton, H. J. S.

## R.A.M.C.

*Temporary Lieutenants*

Alexander, W. A. Baines, M. B.  
 Andrew, J. V. O. Bakewell, G. V.  
 Angus, W. B. G. Batchelor, H. W.  
 Armstrong, G. W. Batchelor, T. B.  
 Aveling, K. J. Batteson, V. J.  
 Bahr, P. H. Bayley, J. H.

Beale, S. J. A.  
 Beatty, C. C.  
 Billington, S. G.  
 Bluett, C.  
 Booth, C. H. B.  
 Bourne-Price, T. B.  
 Brown, I. M.  
 Brown, L. G.  
 Brown, R. G.  
 Carr, G. D.  
 Chamberlain, D. A.  
 Chandler, F. G.  
 Chisnall, G. H. (killed)  
 Coad, C. N.  
 Cohen, L. D.  
 Collins, H. M.  
 Costabadie, L. P.  
 Cronin, M. J.  
 Culpin, M.  
 Danaher, H. W. B.  
 Davidson, G. E.  
 Davis, J. H. E.  
 Deane, G. S.  
 Debenham, R. B.  
 de Boer, H. S.

(wounded).

de Glanville, H. R. G.  
 Denny, C. R.  
 Dew, J. W.  
 Dolbey, R. V.  
 (prisoner).  
 Driberg, J. D.  
 Duke, W. D.  
 Dunkerley, H.  
 Dwyer, W. J. I.  
 Farmer, F. M. (Hon.)  
 Fletcher, F. R.  
 Ford, A. P.  
 Friedlander, A. J.  
 Gayton, W. J. G.  
 Graham, N. F.  
 Grange, F. A.  
 Grant, G. L.  
 Hallam, M.  
 Hancock, H. A.  
 Hardwick, A. G.  
 Hodges, A. N.  
 Holroyde, G. B.  
 Hooper, H. S. C.  
 Hunter, R. N.  
 Hutchence, B. L.  
 Hutcheson, D. A.  
 Ingram, T. L.  
 Jenner, C. W.  
 Johnson, F. E.  
 Jones, D. W.  
 Jones, J. D.  
 Jones, T. A.  
 Kennedy, C. M.  
 Lane, H. D.  
 Latham, T. J.  
 Lawry, J. L.

Lewis, D. L.  
 Lilly, G. A.  
 Lindsay, A. B.  
 Lindsay, E. C.  
 Linnell, J. W.  
 Linzee, N. H.  
 Little, J. P.  
 Luker, S. G.  
 McLean, H.  
 Maitland-Jones, A. G.  
 Marrack, J. R. (wounded).  
 Marsh, O. de B.  
 Matthew, A. W.  
 Moore, A. E.  
 Moore, E. H. (wounded).  
 Morgan, W. F.  
 Morris, W.  
 Mortimer, L. W.  
 Moxon, F. H.  
 Muecke, F. F.  
 Mullan, H. F.  
 Muspratt, P. K.  
 Neame, H.  
 Neligan, G. E.  
 Noel, H. L. C.  
 Noyes, H. F. G.  
 Oliver, H. G.  
 Owens, H. B.  
 Palmer, A. C.  
 Parkinson, J.  
 Pearson, C. H.  
 Perry, D. G.  
 Phillips, C. H.  
 Porter, C. R.  
 Porter, R. E. (killed).  
 Potter, J.  
 Purchase, W. B.  
 Raffle, W.  
 Raiment, P. C.  
 Rankin, N. M.  
 Rawson, N. R.  
 Rawson, P. H.  
 Rees, A. A.  
 Retallack-Moloney, H. T.  
 Roberts, A. E.  
 Robinson, H. H.  
 Sainsbury, J.  
 Saint, A. P.  
 Salaman, R. N.  
 Scott, E. P.  
 Sinclair, N. F.  
 Smith, I. R.  
 Smith, L. C.  
 Sneath, W. A.  
 Snelling, T. R.  
 Somervell, L. C.  
 Somerville, T. V.  
 Steel, O. W. D.  
 Stenhouse, J. M.  
 Stewart, W. A.  
 (wounded).  
 Stones, R. Y.

Strange, C. F. Upward, H. A.  
 Symonds, C. P. Vilvandré, G. E.  
 Thackeray, J. R. Williams, S.  
 Thompson, R. R. Woolf, A. E. M.  
 Tozer, E. A. Wyler, E. J. (wounded).  
 Treadgold, C. H. Yeo, K. J.

## R.A.M.C. (TERRITORIAL FORCE)

## FIELD AMBULANCES

*Hon. Colonel*

Treves, Sir Frederick .. Wessex Division.

*Lieutenant-Colonels*

Challis, H. T. ... 3rd E. Anglian.  
 Soltan, A. B. ... 2nd Wessex.

*Majors*

Montgomery-Smith, E. C. 2nd London.  
 Oxley, F. J. ... 17th Battn. Co. of Lond.  
 T.F. (wounded).  
 Rutherford, N. C. ... No. 6 London Field  
 Ambulance.  
 Stedman, H. ... 1st Lond. Brigade, R.F.A.  
 Wright, O. K. (temp.) Notts and Derby  
 Mounted Brigade.

*Captains*

Billings, B. R. ... 2nd Home Counties.  
 Bulstrode, C. V. (temp.) Shropshire R.H.A.  
 Fiddes, J. D. ... 1st Highlanders.  
 Fisher, W. H. ... Notts and Derby.  
 Rice-Oxley, D. G. ... Inns of Court O.T.C.  
 Wright, O. K. ... Notts and Derby.

*Lieutenants*

Brown, A. J. ... 3rd Lowlands.  
 Bull, W. E. H. ... 2nd S. Midland.  
 Curry, M. A. ... 3rd Home Counties  
 Field Ambulance.  
 Hamilton, J. L. (Hon.) 2nd Home Counties.  
 Harty, J. P. I. ... 3rd S. Midland.  
 Hodges, W. C. ... 1st S. Western.  
 Sandiland, E. L. ... S. Wales.  
 Standish, F. ... Notts and Derby.  
 Turtle, W. R. M. ... 3rd E. Anglian.  
 Watson, G. H. ... 3rd Northumbrian.

## GENERAL HOSPITALS

*Lieutenant-Colonels*

Bruce-Porter, H. E. B. 3rd London  
 Dawson, Sir Bertrand 2nd "  
 Eve, Sir Frederic ... 2nd "  
 Fenwick, E. H. ... 2nd "  
 Hume, W. E. ... 1st Northern.  
 Kyffin, J. ... 5th Southern.  
 Mansell-Moullin, C. W. 2nd London.  
 Warner, F. ... 2nd "

*Majors*

Lucy, R. H. ... 4th Southern.  
 Smith, F. J. ... 2nd London.

*Captains*

Bain, E. W. ... 2nd Northern.  
 Barclay, A. E. ... 2nd Western.  
 Bearn, A. R. ... 1st Southern.  
 Daly, A. S. ...  
 Hadley, W. J. ... 2nd London.  
 Head, H. ... 2nd "  
 Hutchinson, F. A. S. ... 2nd Eastern.  
 Hutchinson, J. ... 2nd London.  
 Kaye, H. W. ...  
 Macalpine, J. B. ... 2nd Western.  
 Probyn-Williams, R. J. 2nd London.  
 Rainforth, J. J. ... 4th Northern.  
 Rigby, H. M. ... 2nd London.  
 Smith, H. B. W. ... 4th Northern.

## SANITARY SERVICE

## (a) SANITARY COMPANIES

*Captain*

Sprawson, E. C. ... 1st London.

*Lieutenant*

Norman, V. P. ... 1st London.

## (b) SANITARY OFFICERS

*Majors*

Beringer, F. J. A. Thresh, J. C.  
 Kenwood, H. R.

*Lieutenant*

Daukes, S. H.

## INDIAN MEDICAL SERVICE

Bhalla, R. S. (temp.) Perera, J. A. (temp.)  
 Candy, R. H. (Lieut.) Puri, J. N. (temp.)  
 Dadachanji, K. K. Sen Gupta, N. (temp.)  
 Gouda, S. (temp.) Shaffi, M. (temp.)  
 Mehta, N. M. (temp.) Tennekoon, J. P. R.  
 Muttiah, S. (temp.) (temp.)  
 Nalliah, N. R. Treston, M. L. (Lieut.)  
 Peiris, W. S. J.

Sequeira, J. H., Hon. Consultant Dermatologist to the Military Hospitals in London.

Scott, S. G., Medical Radiologist to the Princess Henry of Battenberg's Hospital for Officers, and to the Yarrow Home, Broadstairs.

Rice-Oxley, A. J., Medical Director and Acting Physician, Princess Henry of Battenberg's Hospital for Wounded Officers, 30, Hill Street, Berkeley Square, W.

Sherren, J., Consulting Surgeon, King Edward VII's Hospital for Officers.

Dawson, Sir Bertrand, Consulting Physician, Princess Henry of Battenberg's Hospital for Officers.

Farmer, F. M., Temp. Hon. Lieutenant, R.A.M.C.