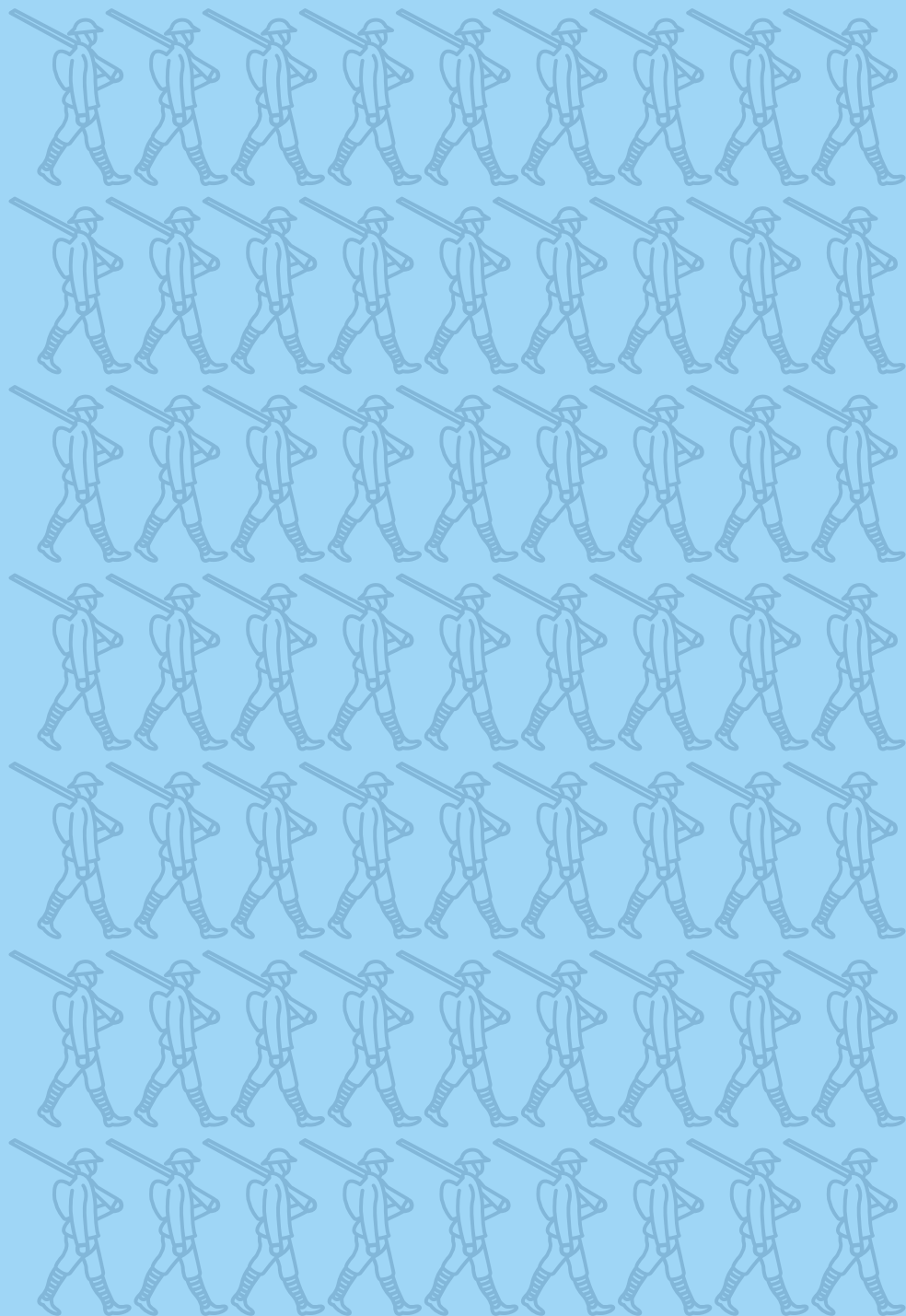


Worcestershire's Wounded

Medicine and Hospital Treatment in the First World War





The United Kingdom entered the First World War on 4th August 1914. Very soon the military and the Government realised that this would become an industrial war of unprecedented scale. New equipment was created and provided such as helmets, gas masks and body armour to try to protect the soldiers. However, the new industrialised war created terrible injuries and wounds. Facial wounds, blindness, bullet wounds, gas inhalation, paralysis and nervous shock were just a few conditions that could befall a soldier serving at the front. Medical men both at the front and at home had to find new ways of dealing with new problems on a larger scale than ever before. This booklet tells the story of how medicine developed to cope with the needs of these soldiers in the Worcestershire area and of the long term implications for disabled soldiers after the war.

The First World War and Medicine: Coming Home for Treatment

Most patients who were only slightly wounded were dressed and looked after just behind the front lines, in France and elsewhere. However the most severe cases would be sent back to Britain for treatment after receiving medical aid at the front. Figure 1 identifies the process of how patients were brought back to Britain. Patients were transported by ambulance ships and trains to the big hospitals in Britain, before being relocated to smaller hospitals such as Worcester Infirmary. Prior to the First World War, there was a mix of state and military care for servicemen who required medical treatment. Military hospitals in the UK contained only 7,000 beds, and a large number of these were either unequipped or were being used for other purposes. However, there were 364,378 beds for the treatment of servicemen by the end of the war. This dramatic increase was accomplished in a number of ways. Large numbers of facilities were provided and run by voluntary charities and philanthropists, existing military hospitals were expanded, new military hospitals were built, and military hospitals and wards were created within public institutions such as schools, workhouses, and pre-existing hospitals and asylums.



Fig 1: The process of evacuation back to Britain

The 'Boys in Blue'

Patients receiving treatment in a hospital in Britain were given special uniforms to highlight the fact that they were wounded or sick soldiers, rather than civilians. The uniform was blue, and so the men were frequently referred to as 'the boys in blue'.

The War Office paid grants to hospitals for every patient they looked after, and the grant amount increased annually during the war. At the highest rate, the government paid £1 4s 6d per week, or £63 14s 0d per annum, for each patient. This covered full hospital treatment, food and other costs.¹

¹ <http://www.redcross.org.uk/About-us/Who-we-are/History-and-origin/First-World-War/Auxiliary-Hospitals>

Medicine in Worcester

Two weeks after the outbreak of the war, on 17th August 1914, the Chairman of Worcester Infirmary offered the use of two of its wards to the War Office. This included all of the equipment belonging to these two wards, a kitchen and sleeping accommodation. In total this amounted to 50 fully-equipped beds. Just as in the rest of the country this expanded to accommodate more and more soldiers by the end of the war. During the crisis point of the Battle of the Somme, the hospital was even asked by the Military to consider erecting a tent outside to accommodate more patients.

On the 21st September 1914, the Men's Voluntary Aid Detachment offered to transport sick and wounded men to the infirmary. These men gave up their spare time, using their own vehicles and their own petrol to transport wounded men in a convoy to the hospital. In many areas of the United Kingdom, including



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Soldiers convalescing in Battenhall VAD Hospital

Ambulance cars arriving at a hospital

Did you know...?

The men who came to Britain for treatment weren't just British soldiers. Hospitals in Britain looked after all men who were fighting on the Allies' side. These included many men from Belgium and later America and men who were wounded from all parts of the British Empire, including India, Canada, Australia, South Africa, New Zealand, and the British West Indies.

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in Worcester, large groups of people came out to cheer the wounded men on their arrival to hospital.

On 29th October 1914 Worcester Infirmary received its first group of wounded soldiers, as 50 wounded Belgian soldiers were transferred from the 1st Southern General Hospital in Birmingham. After this, new patients were received frequently, with recovered soldiers being sent to convalescent hospitals nearby, where they would stay until they were considered fit enough to re-enter an army unit or discharged as medically unfit.

Q. How would you go about organising where to send several million injured, sick and wounded patients, without a computer system?



Patients and their Wounds

Just under 1000 wounded soldiers were treated within Worcester Infirmary between October 1914 and April 1918, with many more patients being admitted to other Red Cross Auxiliary hospitals like Battenhall, Powick and Hartlebury Castle.

Gunshot wounds

Gunshot, shrapnel and shell wounds, alongside gangrene and septic wounds that hadn't been treated quickly enough, were the most common wounds among patients arriving at Worcester Infirmary. These wounds could be anywhere on a patient's body, but exposed areas such as arms, hands, back and legs were the most vulnerable areas to these types of wounds. Occasionally patients were injured in other areas too; the patient case-notes include patients who had facial wounds, however the most severe of these were generally treated in Queen Mary's Hospital, Sidcup. For patients suffering from these types of wounds, x-ray machines were used to locate hidden fragments, which would then be removed by surgical operation. The x-ray machine was a relatively new piece of technology: the one at Worcester Infirmary had been purchased in 1912 for over £280. During the year 1918 alone the machine had been used 488 times! In addition to this, the Red Cross Auxiliary Hospital at Battenhall also paid to use this machine for treating its wounded patients. However, most life-saving surgery was done at the 1st Southern General Hospital in Birmingham and the majority of patients receiving treatment at Worcester had long been out of immediate danger.

Gas

The First World War was the first conflict in which poison gas was employed as a weapon. Cases of gas poisoning were common among patients in the hospital. Gas attacks were particularly feared by soldiers and were very difficult to treat. Prevention was much easier than cure and gas masks were developed with increasing sophistication. Nevertheless, it was impossible to prevent every casualty, and unlucky soldiers could face a painful and frightening death. Different gases were used throughout the war however, and some, in small doses, were less lethal. Patients were managed in hospitals by treating the outward symptoms – by dressing their burnt and blistered bodies and eyes with baths and dressings. There was little that could be done for men's lungs; rest, fresh air and a generous diet was encouraged for these patients.

Many counter-measures were devised against gas, of which this "Remedy for Poison Gas" is one. It is evidently a commercially made product, which soldiers could purchase privately. It is not known what its active ingredients are, but it would appear that it was intended that the contents of the glass ampoules should be inhaled, probably to counteract the effects of Chlorine gas.



Remedy for poison gas

© IWM (SR 527)

Trench Foot

The next most common wounds treated at Worcester Infirmary were frostbite of the feet and trench foot. These ailments occurred because of conditions in the trenches, and although it could happen at any time, it was particularly common during the winter months. For instance, of one convoy of just 17 patients admitted to hospital on 7th – 8th January 1915, ten of them were suffering from frostbitten feet due to conditions in the trenches. Such numbers were not uncommon in the winter months. Whilst trench foot and frost bite were unlikely to be fatal, they were often extremely painful. Most patients were only treated to a brief spell of hospitalisation, between two weeks and a month, before they were discharged as recovered. In the most severe of circumstances however, both conditions could lead to toes dropping off and even amputation of the foot.

Kathleen Yarwood, a VAD wrote about her experience of nursing such men:

'We had to rub their feet every morning with warm olive oil for about a quarter of an hour or so, massage it in well and wrap their feet in cotton wool and oiled silk... Their feet were absolutely white, frozen and dead. Some of their toes dropped off with it and their feet looked dreadful. They couldn't walk at all because they simply couldn't feel their feet.'



The British Army on the Western Front, 1914 – 1918

Trench foot was such a serious condition that prevention became very important. In the photograph above the Medical Officer of the 12th Battalion, East Yorkshire Regiment conducts a foot inspection in a support trench near Roclincourt, 9 January 1918.

Paralegic cases

In September 1916, the war office asked Worcester Infirmary if three beds could be used for paraplegic wounded servicemen. These beds were for discharged servicemen from the Worcestershire region who had suffered from paralysis of the legs and lower body. Many of these men had become permanently disabled due to their wartime service and had to learn to adapt and try to regain some independence. In the interwar years, Worcester Infirmary treated many local men with similar injuries. Some men were fitted with artificial limbs to help them to move around, whereas others were given wheelchairs. As the artificial limbs could take a long time to be made and were often very uncomfortable to wear, many men continued to try their best to make do with crutches and other aids.

Mental injuries

In addition to physical illness and wounds there were also some cases of mental disturbance admitted to the hospital. In the last few months of 1918, the hospital treated a case of shell-shock and six cases of neurasthenia, which was a condition similarly linked to mental trauma and breakdown on account of war stress. Other patients suffering from shell-shock or neurasthenia were dealt with in specialist hospitals across the country. On many occasions, after the war, the patients who had not recovered from their trauma found themselves admitted to local Lunatic Asylums, as they were then called, such as Worcester County and City Lunatic Asylum (later called Powick Hospital). In many instances the public were scandalised by ex-servicemen being sent to asylums, and the Government set up a scheme where ex-servicemen were entitled to a small pension and a separate uniform to mark them out from 'pauper lunatics' within these hospitals.

Wounded women

In May 1917 the War Office asked the hospital if it could spare some beds specifically for women who worked in the army and needed treatment. Worcester Infirmary was in an ideal position to accommodate women, since it was predominantly set up for civilians, which meant that it had female wards as well as male wards. The fact that Worcester Infirmary was able to accept women army patients makes it fairly unique amongst other hospital provision. Many of the hospitals which were set up temporarily during the war, were only created to accommodate male patients.

The Nurses Who Served

There were several Red Cross Auxiliary Hospitals which worked alongside Worcester Infirmary, to look after sick and convalescent soldiers during the war years. Auxiliary Hospitals were hospitals where patients did not have life-threatening illnesses or injuries and just needed some time to convalesce or recover fully from their injuries and illnesses. Over 3000 of these hospitals had been set up by the end of the war. The main hospitals in the Worcestershire area were created and set up at Hartlebury, Powick and Battenhall. The Voluntary Aid Scheme of the British Red Cross was introduced in 1909 and it set up Voluntary Aid Detachments (VADs) in every county in England. By the end of the First World War, some 90,000 volunteers, both men and women, had offered their help to the injured both at home and abroad.

The British Red Cross has preserved the records of many of these women who worked in these hospitals, which allows us to get an

Did you know...?

Women who served in the army or as nurses during the First World War were entitled to pensions after the war if they had been injured.



Staff from Battenhall VAD Hospital

understanding of their lives during their service in the British Red Cross. These women were all VAD (Voluntary Aid Detachment) nurses, and most of them gave up their time for free, to look after injured servicemen. These women worked in a variety of jobs, not just nursing. Whilst many were nurses, others worked as cooks, cleaners and attendants doing general ward and kitchen duties. Many women from the local neighbourhood volunteered to work in these hospitals on a part-time basis. Those who volunteered at the Auxillary Hospitals were usually either too young or too old to work in a military hospital. The hospitals asked women whether they could sign a three month or six month contract to work for them. This gave the women some flexibility in their work, which many had to juggle around family commitments. Many women worked in these hospitals for the duration of the war, but others only served for a couple of years.

Patients' Experiences of Treatment

It is very difficult to know what patients thought about their stay in Worcestershire's hospitals. However there are some clues. Some of the nurses carried around autograph books, and they asked the soldiers who were well enough to write something in them. There are surviving autograph books for both Battenhall VAD Hospital and Hartlebury. The recovering soldiers who wrote messages in these books were clearly very happy with their treatment within the hospital and expressed their appreciation to the doctors and nurses in the form of poems and short notes.

There is some evidence that at least one group of patients staying at Worcester Infirmary weren't very happy with their treatment there. On 31st May 1915 the hospital received a complaint from 19 of the wounded soldiers,

complaining about the actions of the matron and sister on the soldiers' wards. The soldiers were complaining about the restrictive rules of the infirmary and they wanted to be allowed out more often. After a very short investigation however, the hospital noted that their complaints were found to be of a 'trivial nature' which were 'affecting the discipline of the wards' and the soldiers were told that the regulations had to be obeyed.

These reactions of frustration towards hospital curfews were common in other institutions too, and the soldiers often responded humorously to such regulations.

A sketch by one patient for a Hospital Magazine showing how many patients felt restricted by hospital curfews and military discipline



In the collections of George Marshall Medical Museum

—Battenhall! —Battenhall!
 where all find of Battenhall,
 Take me there when I am ill,
 The V. A. D. beneath Red Hill.
 —Battenhall! oh Battenhall!
 where the sisters are so kind,
 Oh! Oh! Oh! Oh! Battenhall
 by this we are all of one same mind.
 (composed by W. Lowley 20.V.H.) copied by:-
 S.H. Evans. (Sgt.)
 31st. Rifle Brigade
 Wounded Hooge 31-7-15.
 as a small mark of appreciation of
 the many kindnesses shown us.

Legacies of War

Over the course of the war, around 2 million British men suffered from disabling wounds, but survived to go back to civilian life. In 1917 a specialist body was set up to look after all the disabled and seriously wounded servicemen. This body was called the Ministry of Pensions. One of their jobs was to pay for the treatment and the pensions of men who had received long-term injuries because of their war service. In its peak, in 1920, there were 1,600,000 ex-servicemen receiving pensions or other forms of aid. Support was offered for those deemed to be 'totally disabled' who needed life-long nursing and those who were 'partially' disabled, who were capable of living a semi-independent life.

In Worcestershire, the Ministry of Pensions paid for an orthopaedic out-patient clinic to be set up at the Worcester Infirmary. The clinic was run by Dr Norman Duggan. In 1918, 283 patients had been treated in the institution, and collectively, these patients had received over 20,000 treatments! Treatments usually consisted of massage and electrical treatment, for the most severe of injuries. This clinic continued to operate into the 1930s. As late as 1932 there were still three ex-servicemen being treated within the clinic, and they were still being paid by the Ministry of Pensions, which gives some indication of the long term effect of war on the health of servicemen. Patients were treated for a vast assortment of ailments at the outpatient clinic. They included local men such as 22 year old Robert G from Droitwich, who was being treated for an old gunshot wound to his arm. His first attendance at this clinic was on 2nd February 1918. He had previously been discharged from military duties on account of his wounds, and his treatment was being paid for by the Ministry of Pensions. Similarly,

discharged 22 year old William D started to attend the clinic in June 1918, where he received massages to help treat the gunshot wounds in his legs. Forty year old Charles S from Bromsgrove also began treatment of massage for a war-induced fracture to his left leg on 21st August 1918. A number of patients were being treated for paralysis, such as 21 year old Eric D from Callow End. Others were being treated for Lumbago – a type of lower back pain. The outpatient clinic also continued to give support for the ongoing symptoms surrounding the most severe cases of trench foot. These patients included 30 year old Ernest H, who started attending the clinic in April 1919.

During the interwar years, the improvements developed to enhance the treatment for soldiers were used to help civilians. As fewer soldiers needed to use the service, it was taken over by civilians, especially children, and doctors were clearly proud of the progress that they were making in this field.



The two images above feature in the Annual Reports of the hospital with the following caption:

Case of 'Case of Rickety deformities in legs in girl aged 5. On the left condition 3 years ago. On the right after correction of deformities.' It is clear that expertise and equipment developed to help ex-servicemen, were used in times of peace to help civilian children.

Memorials for the Wounded

The First World War had a massive impact and in the aftermath of war almost every community in Britain established memorials to both the dead and the living, to serve as a lasting reminder of the War. In Worcestershire, it was decided to create a living War Memorial, which had a dual-purpose of looking after a number of disabled soldiers and seamen who returned from the war.

It was proposed that a park should be opened as a lasting memorial for the community. The park was to be named Gheluvelt Park in memory of the Battle of Gheluvelt, an important early battle in the First World War, where the 2nd Battalion of the Worcestershire Regiment pushed back the German force of more than a thousand men. In the Battle, the Worcestershire Regiment lost 34 men with a further 158 injured. The land for the park was bought in January 1918 for the price of £2,300 and the Mayor offered to subsidise the purchase. The decision was taken to build twelve homes within the grounds of the park for disabled soldiers and sailors who had been injured in the war. These homes were designed by Alfred Hall Parke, a local architect, and they were built along the northern side of the park in 1919-1920.

Disabled ex-servicemen could live in these houses, supported by a pension from the Ministry of Pensions. Some of these servicemen obtained help from the Orthopaedic Outpatient clinic at Worcester Infirmary as well. It was intended that by living in these homes these men would be able to live semi-independent lives, supported by their families. However, it is unclear just how practical these two storey homes really were for some of the men who lived in them. Nevertheless, the park is a lasting reminder to local people of the price paid by soldiers during the First World War.



Soldiers convalescing outside Battenhall VAD Hospital, detail

Did you know...?

Homes for disabled servicemen were first built from public money in the Second Boer War (1899-1902). Before this time, some disabled soldiers relied on institutions such as the Royal Hospital Chelsea. These institutions did not offer enough room and the men who lived there were not allowed to live with their families.



An artist's impression of the Park, which was printed in the booklet produced to commemorate laying the foundation stone in 1919.

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Acknowledgements and Key References

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Websites: medicalmuseum.org.uk/www100; www.redcross.org; historicengland.org.uk and www.iwm.org.uk/collections. For more information on the women who served in the Red Cross Auxiliary Hospitals in Worcestershire see: <http://www.redcross.org.uk/About-us/Who-we-are/History-and-origin/First-World-War/Card?hosp=worcesterr&id=1670&forwards=true>

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