

INTRODUCTION

THIS volume begins with a detailed study of four of the outstanding problems or "conundrums", technical and professional, that faced the medical service and profession in the war. This is followed by a general survey of the scientific foundations of medical work in the First World War, illustrated by one of its highlights—the "discovery" of trench fever—and by a bird's-eye view over the "scientific" work done by the A.A.M.C. After this, complementary to the considerable study made in *Volume II* of the immediate pathology and surgery of war wounds, come several brief studies, by experts, of certain aspects of the reparative surgery.

Certain clinical studies

Section II contains an account of certain other medical services. From material provided there has been compiled a historical and technical survey of the evolution and work in the war of the medical service with the Royal Australian Navy and a summary of the beginnings of medical service in the Australian Flying Corps. *Section III* gives an account of the work of certain specialist services—dental, pharmaceutical, nursing, massage—whose contribution, personal and scientific, to the main stream of medical service was, though subsidiary, of great practical and human interest and importance, but has hitherto received only general and incidental notice in these pages.

Navy and Air Force

Specialist services

Section IV picks up from previous volumes the story of the "invalid". From the technical side the ageing and death—in 1921—of the A.I.F. as a "Force" presented the medical profession in Australia with problems not less but from the professional and technical standpoint *more* difficult than those of its lifetime. It is said that death begins with birth, and so for the A.I.F. the *end of the war begins in 1914*, when H.M.A.T. *Kyarra* "repatriated" to Australia 201

The aftermath

officers and other ranks whose services were not of further use to the A.I.F. command, and of whom 169 constituted "medical problems". By the plan of *Volume II* the problem of the invalid was "passed for action" to this volume. When, in tracing the course of a casualty on the Western Front through the vicissitudes of evacuation from the front lines, we reached the Australian Intermediate Base in England, we pictured the convalescent soldier as passing through the toll-gate of the Medical Board, to be directed by the *ipse dixit* of the boarding officer hither, or thither: either to the training depots to re-train for the front, or (under the "six months' policy") to No. 2 Command Depot for return to Australia as an invalid. The first stream we then followed through the Overseas Training Brigade back to the front; the experiences and medical problems of the second belong to the present volume. Accordingly we pick up both the narrative and the technical study concerning the "invalid", following him from the "rough and tumble" of interim treatment overseas, through the vicissitudes of sea transport to Australia (the medical problems of which are a subject of detailed study); through provision—good and "not so good"—made in Australia to implement the intention of the six months' policy; and so to the "last scene of all"—the poignant social and service history, and the terrible—we may not diminish the word—technical problems of pensioning.

Section V furnishes, first, an historical background of figures relating to the whole war, beginning with the total casualties sustained by the belligerents, and passing to progressively more particular statement of the losses sustained by the Allies, by Great Britain and the dominions, and by Australia, and showing some experience of the aftermath. Finally, a *detailed clinical analysis* is made of the figures of mortality and morbidity comprising what may be termed the life-history of the A.I.F. This analysis is based on a nosological scheme not (so far as is known to the writer) heretofore attempted for any large body of morbidity statistics. All non-battle casualties are classified according to their aetiological association and (where possible) their immediate and direct *cause*. This is carried out with special reference to their "attribution to" or "aggravation by" war service—the basis of Australian pensioning. Tables showing the *recruiting* and *camp experience* in Australia are followed by a

complete analysis of *all non-battle casualties* sustained by the A.I.F. on the Western Front. Next come similar figures for *invalids returned* to Australia, and finally an analysis (on the same nosological basis and tabulation) of the clinical and pathological conditions for which *pensions* were paid in a selected year of post-war experience.

The *Epilogue* asks "quo vadimus?" and endeavours to answer this. It has been said in the introduction to *Section II* of **Quo Vadimus?** *Volume II* that the fundamental responsibilities of the medical service are threefold—to the army, to the nation as a peaceful society, and to humanity. Because of the relative importance of these three mandates *within the war*, the third has so far received only incidental reference. But—in view of the fact that it alone, as a *permanent* element in human progress, links the history of medical service in this particular war directly with the immediate spiritual, cultural, and in some part the social, future of man—the last word is reserved for it. The question what is to be the future of the medical service, how will the three conflicting allegiances be served, especially in view of the "total" repudiation of the humane allegiance by the philosophy with which we are now at war, is examined as a problem in medical sociology. "The Red Cross: An End or a Beginning?" is the arresting title to an article in *The Lancet* on 8th January 1938. To this question in relation to the history of the Australian Red Cross Society in the First World War, and that of the future of medical service as a whole, we devote the last section of this last volume of this history.

