

Nursing the Wounded of Passchendaele

An Education Resource for Key Stage 3

©Christine E. Hallett



Interior of a Casualty Clearing Station ©The Eleanor Crowder Bjoring Center, The University of Virginia, USA

Introduction

During the First World War millions of men were killed or injured on the battlefields. Both sides used many different weapons, including rifles, machine guns, shrapnel shells (bombs filled with lead or steel balls); high explosive shells (bombs that created very large explosions) and poison gas. When they tried to cross 'no-man's-land' men were bombarded with these weapons. Some died instantly; others sustained horrific wounds that would have killed them if they had not been rescued and taken to hospitals. The aim of this booklet is to give you some information on what happened to the wounded men. It focuses, in particular, on how nurses kept them alive in small hospitals close to the battlefields. It also tells the stories of some of the nurses and patients who were in one particular part of the 'Western Front': a place called the 'Ypres Salient'.

The First World War began in 1914. Professional army nurses were a very well-organised group. They had trained in large hospitals in cities all over the world – in places like London (UK), Philadelphia (USA), Melbourne (Australia), Toronto (Canada) and Wellington (New Zealand). The training was very practical. Nurses comforted and cared for patients, gave medications and treatments and dressed wounds. They were in charge of their wards, and took pride in making sure that everything was clean and orderly and that patients got all the food, fluids and treatments they needed.

In Britain, in 1902, the Queen Alexandra's Imperial Military Nursing Service (QAIMNS) was founded. By 1914 there was also a Territorial Force Nursing Service (TFNS). Trained nurses were assisted by volunteers called Voluntary Aid Detachment Nurses (VADs). Other countries also had their own army nurses. In the USA, for example, there was the Army Nurse Corps, which had been created in 1901.

The First World War and the invasion of Belgium

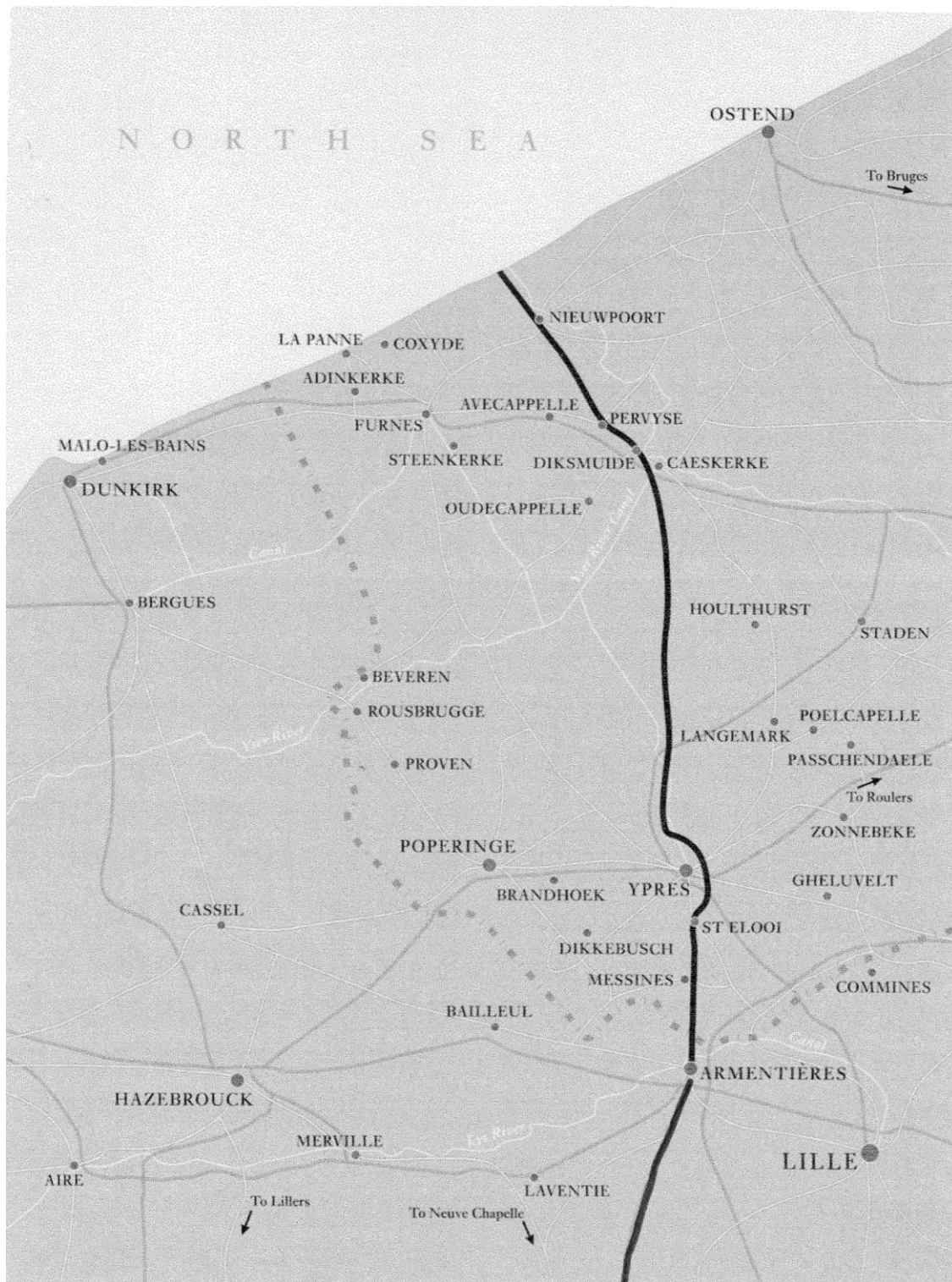
The First World War began in the summer of 1914. Its causes were very complex, but Britain became involved because of alliances it had made many years before. It had, along with many other European countries, signed the Treaty of London in 1839, to guarantee the neutrality of Belgium, a small but strategically-important country just across the North Sea. In August 1914, The German Army invaded Belgium, and the British Government declared war on Germany.

When the Germans invaded, hundreds of British nurses travelled to Belgian cities to help care for the wounded. The German advance was so rapid that many of them were taken prisoner.

Ypres: A city on the front lines

Ypres was a very important city in the Flanders region of Belgium. During the First World War it was right on the Allied front lines. Early in the war, the so-called 'Western Front' was formed. This consisted of a system of trenches and fortifications stretching from Switzerland to the North Sea. Close to its northern end, it ran just to the east of Ypres.

By the spring of 1915, no-one could survive in the city. It was being bombed constantly. Already, as the Germans had advanced across Belgium, refugees had streamed out of Ypres and other cities, boarded whatever boats they could find and escaped across the North Sea and the English Channel to England. The British welcomed and helped these frightened people, who had lost everything. The Belgian refugees were protected for more than four years, until they were able to return to their own homes after the war.



Map showing the northern part of the Western Front



The ruins of Ypres in 1919

The British Army took the lead in defending what was left of Ypres. It was supported by troops from a number of other countries (Belgium, France, Australia, New Zealand, Canada and South Africa). The Allies became determined to save Ypres, which was, for them, a symbol of freedom from oppression. Ypres was a beautiful city, with magnificent buildings, such as a 'Cloth Hall' and Cathedral; but by the end of 1914, it had become a scene of utter devastation.

"In November 1914 the Germans launched a powerful bombardment of the city of Ypres, perhaps to show its 'defenders' that, however determined they were to hold onto it, they could not prevent its demolition. On 22 November the famous Cloth Hall suffered several direct hits and was totally burned out. From the end of November onwards, the Ypres Salient protected not a living city but a desolate, bombed-out ruin, its Cloth Hall reduced to a series of gaunt fingers of stone reaching into a cordite-filled sky. Relentless artillery bombardment from both sides had destroyed the drainage systems of the fields surrounding the city, turning the entire Salient into a quagmire of mud and slush that froze in winter and dried out only temporarily during the hottest months of summer. The defence of that morass was to be the mission of British and Dominion soldiers for the next three and a half years. Saving the lives of those soldiers was to be the mission of Allied nurses."

[Extract from *Nurses of Passchendaele* – please see notes at the end of this section for an explanation of the more complicated words].

For the first two years of the war, the Allies 'hung on' to Ypres, determined to protect it. But by 1917, the leader of the British Army, Field Marshal Sir Douglas Haig had decided to launch an attack to attempt to 'break through' the Western Front. The campaign was known as the 'Third Battle of Ypres', but was, afterwards, remembered as the 'Battle of Passchendaele' – named after the small village the Allies eventually managed to capture.

The first main advance at Ypres was on 31st July. The campaign lasted until 10th November, and killed over 70,000 Allied men. Altogether about 275,000 men were wounded, killed or taken prisoner. The Germans suffered slightly fewer casualties overall. Well over 100,000 men of all nationalities died on the battlefields of the Ypres Salient, or in hospitals behind the lines. 'Passchendaele' has gone down in history as particularly horrific campaign for a number of reasons:

- the firepower used by both sides had never been used on this scale before, and included machine-guns, shrapnel shells and high explosives, all of which could cause huge damage to men's bodies;
- their minds were damaged too, by the horror of what they had been through; and many suffered from 'shell shock';
- the terrible mud on the battlefield meant that men got trapped in shell-holes and some drowned;
- both sides used horrible weapons of mass destruction – like mustard gas - which had been outlawed by the international community.

Notes:

'**Cordite**' was a powder that exploded to fire bombs from large guns.

The '**Ypres Salient**' was the small area just east of the City of Ypres that was controlled by the Allies. Here the Western Front bulged outwards, creating an area that was difficult to defend.

'**Dominions**' were those British Allies that had once been part of the British Empire but were now independent. Later, these countries became parts of the 'British Commonwealth'.

'**Quagmire**' and '**morass**' are both words that are used to describe a horrible, muddy bog.

Timeline: The First World War and the Ypres Campaigns

3 August 1914: Germany declares War on France and invades Neutral Belgium

4 August 1914: Britain declares war on Imperial Germany

October 1914: The First Battle of Ypres

April 1915: The Second Battle of Ypres

25 April 1915: The Gallipoli Campaign begins

23 May 1915: Italy enters the war

July-November, 1916: The Battle of the Somme

April-May 1917: The Battle of Arras

March-October 1917: The Russian Revolution forces Russia to withdraw from the war at the end of the year

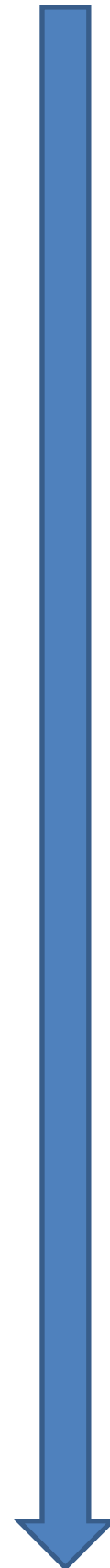
April 1917: The US Congress declares war on Imperial Germany. America joins the Allies

July-November 1917: The Third Battle of Ypres

March 1918: German breakthrough on the Western Front

August-November 1918: The Hundred Days Offensive

11 November 1918: The Armistice is signed, ending the war



The rescue of the wounded



Frank Hurley: 'The morning after the First Battle for Passchendaele'

Each Allied army regiment had its own medical officer and its own stretcher bearers. Every man had a 'first field dressing' stitched into the lining of his uniform: a piece of sterile padding, with a bandage attached to it. When the soldier was injured, he used his own dressing to stop the bleeding, as best he could, and then wrapped the bandage tightly around the wound. Then he was carried by stretcher-bearers to a regimental aid post. From here, he would be put into a motor-ambulance and taken to hospital.

Many men sustained multiple injuries in different parts of their bodies, making it difficult to stop the bleeding. Even worse, because they were injured in a place that was awash with mud, their wounds became contaminated with dirt. The mud of the battlefield contained bacteria called 'anaerobes'. When these got into wounds they caused horrible infectious diseases called 'gas gangrene' and 'tetanus', which could spread throughout the body and kill rapidly. The only way to prevent these infections was to get the men to hospital very quickly, operate on them and cut out the infection. The Army Medical Services established small field hospitals called casualty clearing stations (CCSs) about 6-8 miles from the front lines. These hospitals had operating theatres, and fully-trained nurses were posted to each hospital. After the patients had been operated on, they were put into narrow beds on ambulance trains and taken to base hospitals on the north coast of France. From here, they were loaded onto hospital ships and taken to other hospitals in Britain.

How the nurses cared for the wounded

Treating shock and wounds



Nurse and patient in Australian casualty clearing station (©Imperial War Museum, London)

'Wound shock', caused by trauma and bleeding, made patients very cold. Many of them came into the hospitals covered in mud from head to toe. Nurses washed them and warmed them up with blankets and gas heaters. Many of these men had been bleeding slowly for several hours before they reached the hospital. Nurses injected fluids into their bodies. Some were given blood transfusions, though the techniques for giving blood were still very primitive at this time.

"Professional nurses' training had given them ways of coping with emergency situations. Faced with a severely injured patient, the nurse began by carefully assessing his wounds, checking his pulse and blood pressure, watching and listening to his breathing. The first priorities were to stop any bleeding and improve the blood flow; without that, he would die very quickly. Many patients had been in poor condition – malnourished and dehydrated – even before they had been wounded... Once his condition was stable, a patient was taken as quickly as possible to the operating theatre where bullets, shell fragments, pieces of uniform and other debris were removed from his body and any infected tissue was sliced away. On his return to the ward, a nurse would check his wounds, assess his general condition at fifteen-minute intervals, and care for him through the sickness, vomiting and

disorientation that happened when he became conscious. As soon as it was safe to do so, she would begin to rebuild his strength with nutritious food and fluids". [text adapted from *Nurses of Passchendaele*]

Many of the patients had to have very serious operations, including the amputation of arms and legs, or the repair of very severe damage to the face. Many had large holes in their chests and abdomens caused by shrapnel shells. Nurses had to clean, dress and bandage these wounds every day, to prevent infection from taking hold. There were no antibiotics, so infections could kill very easily. The nurses used chemicals called 'antiseptics' to kill any bacteria in the wounds. One of the treatments was called 'Carrel Dakin Wound Irrigation': glass and rubber tubing was used to pour antiseptics into and through wounds at a steady rate, to keep them free of infection. The wounds caused severe pain, so the nurses gave patients injections of morphine. They had to be careful not to give too much, because the drug was addictive. They supported patients emotionally and helped them come to terms with the trauma of their experiences.



Nurses and doctors treating a patient's wound at L'Hôpital de l'Océan, Belgium

(© The Belgian Red Cross Archives)

Caring for patients poisoned by gas

Ypres was the place where poison gas was used for the first time. On 22nd April 1915 the Germans opened cylinders of chlorine gas on their own side of no-man's-land. The gas

drifted across to the Allied trenches, where it killed about a thousand French and Canadian soldiers, and severely injured many more. The British themselves used gas against German troops from September onwards.

The use of poison gas was illegal. It had been outlawed by the Hague Convention of 1907. Yet, in the course of the war, both sides developed more and more destructive forms of poison gas.

“One of the most horrifying elements of the Third Battle of Ypres was the use, for the first time, of mustard gas, or dichlorethyl sulphide... Stealthy in its action and terrifying in its effects, mustard gas burned any piece of skin or mucous membrane it touched – including the tissues of the airways and lungs, and the walls of the gut. Soldiers sheltering in shell holes on the battlefield... saw and heard strange shells, which landed close by but did not burst. They seemed to ‘plop’ into the ground, half burying themselves in the mud, and then they opened to release a substance that was half-oily, half-liquid – which mushroomed into a gaseous cloud as it touched the atmosphere. Its action was delayed, and even as the man was wondering what was happening, the sulphur mustard was burning his skin and lungs. After a short time, he would begin to sneeze, then choke and retch. Then burns would begin to appear on various parts of his body, especially the armpits, groins and neck. His eyes would sting, then swell and close as the gas burned their delicate tissues. The blindness that followed would last at least ten days.” [adapted from *Nurses of Passchendaele*]

When patients reached CCSs the nurses healed the damage that had been done. They positioned patients carefully on their sides, so that fluid could drain out of their lungs. This prevented them from drowning in the fluids created by the gas. They gave medications to keep the heart beating. They also swabbed the patients’ eyes with cotton wool balls soaked in a chemical called bicarbonate of soda. This protected the eyes and removed the poisonous substances left behind by the gas.

These patients were temporarily blind and terribly weak, so nurses had to look after all their needs including feeding and giving sips of water. The patients were too weak and poorly to even walk to the toilet, so the nurses brought bedpans to their beds.

The bombing of hospitals

Some of the earliest CCSs were established in, or close to, Poperinge, a small town just under eight miles from Ypres. All of the wards were large white or green canvas tents, each of which could accommodate about 30 patients. The nurses lived in small 'bell-tents' - two nurses to each tent. They slept in sleeping-bags on small camp-beds. Later, wooden huts were built to replace the tents. Soon it became clear that CCSs were in danger, because the Germans were shelling the railway line that ran through the town. The CCSs were moved to smaller places such as the villages of Proven, Westvleteren and Brandhoek, but soon these places were bombed too. A large group of CCSs was located in a place called 'Remy Siding', where there was only a farm and a railway station. The area soon became like a small 'city of tents'. The British Royal Engineers built a raised platform next to the rail track, so that wounded men could be loaded easily onto ambulance trains.

Sister Kate Luard and Sister Minnie Wood were in charge of 2 British CCSs (Numbers 32 and 44) at Brandhoek. These hospitals were joined by a third: The Number 3 Australian CCS. Together, these three CCSs formed an enormous hospital that was called an 'Advanced Abdominal Centre'. It got its name from the fact that it specialised in stomach and chest wounds – the most dangerous types of battlefield injury. It also took patients with another particularly dangerous type of injury – fractured femur (broken thigh-bone).

In the middle of August 1917, many CCSs close to Ypres were bombed by German aeroplanes known as 'Gothas'. These planes dropped bombs which exploded close to the ground, releasing 'shrapnel' – heavy metal balls – as well as scattering large, burning pieces of shell casing. British CCS No. 61 at Dozinghem was bombed and American nurse, Beatrice McDonald was injured in the eye by flying shrapnel. Her friend, Helen McClelland put a dressing on the wound to stop the bleeding and stayed with Beatrice until the bombers had passed. Air-raid shelters were dug for nurses, and those who were not on duty went into these whenever their hospitals were bombed. They were partially underground. Nurses who were on duty at the time stayed with their patients. Nurses also carried gas masks with them at all times, in case any gas drifted into their hospitals.

Kate Luard's story



Kate Luard as a young woman



Kate Luard when she was Sister-in-Charge at Brandhoek

Kate Luard was the Sister-in-Charge of No. 32 British Casualty Clearing Station, and the most senior nurse at the 'Advanced Abdominal Centre'.

When the First World War began Kate was a very experienced nurse, having already cared for wounded men in an earlier war: the Second Anglo-Boer War (1899-1902). She joined the Queen Alexandra's Imperial Military Nursing Service (QAIMNS) on 6th August 1914. On 9th August she travelled to the Western Front, where she remained until 1918. Throughout the war, she wrote long letters home to her family. Her brothers and sisters were fascinated by what she wrote, and persuaded her to publish the letters in two books, *Diary of a Nursing Sister on the Western Front*, and *Unknown Warriors*.

Kate Luard's letters to her family

The following excerpts are adapted from letters sent home by Kate Luard to her family when she was in charge of the 'Advanced Abdominal Centre' at Brandhoek, just three miles from the front lines during the Passchendaele Campaign. These letters were eventually included in Kate's book, *Unknown Warriors*:

Monday, July 30th ... Brandhoek

We have been working in the roar of battle every minute since I last wrote, and it has been rather too exciting... Soon after 10 o'clock this morning [the German Army] began putting over high explosives. Everyone had to put on tin-hats and carry on. [They] kept it up all the morning with vicious screams. [Shells] burst on two sides of us, not 50 yards away – no direct hits on us but streams of shrapnel, which were quite hot when you picked them up. No one was hurt, which was lucky, and they came everywhere even through our Canvas Huts in our quarters. Luckily we were so frantically busy that it was easier to pay less attention to it... They were not gas shells, thank Heaven. Bursting shells are an ugly sight – black or yellow smoke and streams of jagged steel flying violently in all directions. It doesn't look as if we should ever sleep again. Apparently gunners and soldiers never do: it is difficult to see who can in this area...

Tuesday August 7th

A [Scots] boy lying next a young German introduced him to me with, "This is Johnny Fritz. He'd like a fag if you've got one". A boy called Reggie... said, "You're the best Sister in the world – I know I'm a nuisance, but I can't help it – I've been out there so long and I'm so young – Will you give me a sleeping draught *and* a drop o'champagne to make me strong?" He had both and slept like a lamb, but he died to-day. A dear old dying soldier always would shake hands and say, "How are you to-day?" He died last night. One boy.. implored me to stay by him till he had his operation... he never came out of it. The ones who recover are tremendously proud of having done it, as they are always being told what marvels they are!

Friday, August 10th

The Attack began on the two corners of the Salient to-day – successful in one, and to be settled on the other to-night. A lot of abdominals and some femurs are still coming in. Some very dear boys have died to-day and are dying to-night (I've just finished a late round, 12pm), but we've had an Evacuation by Train this afternoon... A bashed-to-pieces Officer with both legs, both arms, face and back wounded, gassed, and nearly blind, saluted with one bandaged arm as I came up to his stretcher and said, "I've been in the Wars". He doesn't look as if he'd do (Died at 8am). Good-night. Pray for Peace.

August 22nd 6pm [it was actually August 21st]

This has been a very bad day. Big shells began coming over about 10am – one burst between one of our wards and the Sisters' Quarters of No. 44 C.C.S., and killed a Night Sister asleep in bed in her tent and knocked three others out with concussion and shell-shock...

Nellie Spindler: The nurse who died



Portrait of Nellie Spindler
(Lijssenthoek Visitor Centre)

On 21st August 1917, Nellie Spindler, a twenty-six year-old nurse from Wakefield, Yorkshire, was killed in her tent at No. 44 British CCS by a piece of flying shrapnel.

Nellie was born on 10 August 1891, the daughter of a police sergeant in Wakefield. She went to school at the Eastmoor Council School. When she was 21, she decided to begin work as a nurse at the City of Wakefield Fever Hospital. Next, she worked at Barnes Nursing Home in Scarborough, before starting her nursing training at the Township Infirmary at Leeds. While she was there the war began, and she joined the Queen Alexandra's Imperial Military Nursing Service Reserve.

At first, Nellie worked in England, at the Whittington Military Hospital in Lichfield. Then, on 23rd May 1917, she was sent to France, working first at No. 2 British General Hospital, Le Havre. Nellie must have been a good and reliable nurse, because, very soon, her matron decided she could be sent to No. 44 Casualty Clearing Station at Brandhoek. Nellie died from a shrapnel wound on 21st August, 1917, while lying in her own tent. She had just come off night duty on one of the wards, when the hospital was bombed

"The overnight raids had been particularly bad. It seemed as though the CCSs really were being targeted by the Germans. At No. 3 Australian CCS, a shell had landed on the quartermaster stores, completely destroying it. That morning the night staff came off duty exhausted by the heavy work of caring for acutely ill men in the middle of almost constant bombing raids. They had been severely short-staffed. The three CCS head sisters were unwilling to put more than a skeleton staff on night duty, knowing that the wards were much more likely to be bombed at night than during the day, and wanting to keep as many

of their staff safe as was possible. One sister had already been sent away from the danger-zone, apparently suffering from nervous exhaustion and shell-shock. Nellie had been sharing a bell tent with her – but on this morning she walked the short distance from her ward to her tent alone, and settled down for a much-needed sleep. Another nurse, whose tent was next to Nellie's, had decided to go out for a walk...

“Around 10 a.m. a squadron of German planes came over Brandhoek. Two bombs exploded close to the hospital compound; the third landed within it, exploding between the sisters' quarters at No. 44 and an acute surgical ward at No. 32, where staff nurse Elizabeth Jane Eckett, who was in charge of the ward, was doing her morning round. An empty ward next to Elizabeth's was 'blown to bits', and so was the absent sister's sleeping tent. Shrapnel balls and pieces of shell casing flew in all directions, some landing at the feet of head sisters Kate Luard and Minnie Wood as they ran to the scene. A piece of shrapnel just missed a night sister getting into bed, and several shards ripped through the canvas walls of Elizabeth Eckett's ward. Fearing the worst, Kate rushed into the tent to see Elizabeth 'as white as paper but smiling happily and comforting the terrified patients'. For her courage that day Elizabeth Eckett was awarded the Military Medal. Her citation described how: 'although the ward was twice riddled by enemy aircraft, she continued attending the patients, and by her example prevented many of them from injuring themselves'. In No. 3 Australian CCS Alice Kelly ran to her ward sluice, grabbed a supply of enamel washbasins, placed one over the head of each patient to protect them from flying shrapnel and then stood in the middle of the ward encouraging and reassuring them. She, too, was awarded the Military Medal, along with the Royal Red Cross.

“Minnie Wood, ran to her own sisters' bell tents, to find Nellie Spindler still lying where she had fallen asleep an hour earlier - now awake, shocked and bleeding profusely. Several medical officers arrived, but even as matron and doctors struggled to stem Nellie's bleeding, they knew she had no chance of survival. A piece of shell casing had ripped through her body from back to front, just below the level of her heart, tearing at least one major blood vessel, and releasing a catastrophic haemorrhage [heavy bleeding]. All Minnie could do was hold Nellie in her arms as the young nurse lost consciousness. Twenty minutes later the twenty-six-year-old staff nurse, who had struggled all night to save the lives of her patients

only to become, herself, a target for enemy shellfire, was dead. Her body was taken to Lijssenthoek, near Remy Siding, where it was later interred". [extract from *Nurses of Passchendaele*]

The Sister-in-Charge of No. 44 British CCs, Minnie Wood, wrote later to Nellie Spindler's parents:

'Before you receive this letter I expect you have heard of your great loss. I don't know what to say to you, for I cannot express my feelings in writing, and no words of mine can soften the blow. There is one consolation for you; your daughter became unconscious immediately after she was hit, and she passed away perfectly peacefully at 11.20am – just twenty minutes afterwards. I was with her at the time, but [after] the first minute or two she did not know me. It was a great mercy she was oblivious to her surroundings, for the shells continued to fall in for the rest of the day'.



Nellie Spindler's grave at Lijssenthoek

May Tilton: An Australian nurse in a European war



Portrait photograph from May Tilton's book, 'The Grey Battalion'

May Tilton was an Australian nurse from Melbourne. She volunteered as a war-nurse very soon after the war was declared. Her brother was only 17, but he had joined the Australian Army and was to fight in Gallipoli. May's cousin and many of her friends also went to war. May wrote in her memoir that she could not stay at home while so many of the 'boys' she knew were likely to be in need of care.

May worked in Egypt, Palestine and England, before being posted to France and then Belgium. She was sent to No. 3 Australian CCS at Brandhoek, and was there when the hospital was bombed. Several of her friends, including a man she had planned to marry, were killed during the Third Ypres Campaign. In the Spring of 1918, May returned to Australia on board the hospital ship, *Kenilworth Castle*, taking disabled war-veterans home to Australia. She wrote afterwards that 'the best part of me will always remain in [the] Passchendaele area where lie many of the friends I loved best'.

Extracts from May Tilton's Memoir

May was at No. 3 Australian CCS during the bombing in August 1917. She wrote about the experience in her diary, and, later, she published an edited version of her diary as *The Grey Battalion*.

'Sunday 5th August

This was our first bombing experience. It was more terrible than anything we had yet known. The explosion was terrific in its unexpectedness, like a frightful peal of thunder, and was followed by a rain of shots from our archies [anti-aircraft guns]. Hardly had we recovered from the shock than there was another ear-splitting explosion nearer. They came again at 10pm, and all through the night peppered us with bombs, though none fell directly on our camp... There seemed no place big enough to hide us. We were completely at their mercy. It was terrifying lying in bed, expecting every minute to be blown to pieces. If I could have been up and doing something I knew I would have felt different. As it was, I could not control the violent trembling of my legs. My knees positively knocked together. I could laugh at myself, but I could not stop the trembling...

Tuesday 14th August

At 11.30pm the wounded began to arrive. The three C.C.S.s took it in turn to admit batches of fifty each. I was in charge of the Resuscitation ward, with two splendid orderlies. Torrents of rain were falling, and poor fellows were carried in, saturated and covered with mud, stone cold and pulseless. Three primus stoves provided our hot water supply. Many of our patients died as we lifted them from the stretchers. By midnight, the ward was full of moaning, groaning wrecks. I was appalled by the immensity and hopelessness of the task before us. At the faintest sign of a pulse beat we were injecting salines, and working like mad to restore life sufficiently to get the patient to the operating table... All the time, the bombardment sounded louder than ever; shells were bursting quite close, and "Big Bob" set our tents rocking and vibrating with his fierce and mighty roar.

Friday, 17th August

The hospital was fuller than ever of dying men. All day and night they poured in. Troops came up in thousands, past the hospital, singing with brave gaiety as they marched to death, disappearing amid the never-ending thunder and lightning of the guns. As fast as they went up, they – or what was left of them – would be brought back in all sorts of

frightful conditions. We worked night after night, in the din of raging battles; dressed and bandaged the wounded; comforted them; praised their courage, their grit and strength of will. The atmosphere reeked with the mingled odours of blood and humanity, antiseptic and gas. I felt dazed, going from one moaning bed to another.

"I don't want to die, sister," said one nice-looking Englishman. "I've got a wife and two little girls." He had a tourniquet above a frightfully smashed up leg that fell to bits as we lifted him from the stretcher. He never saw the daylight again.

Tuesday, 21st August

Almost dropping with fatigue, my tent companion, Sister Slater, and I went to bed at 9am, and fell asleep at once. At 10.30am, we were wakened by a terrific explosion, and rushed to the tent door to see what happened. A [Scotsman], working in our compound said:

"They've got us this time; it was a shell. I'll go and find out where it fell."

Almost at once, a second shell followed and burst much closer, getting our Q.M. stores.

A very agitated M.O. pushed his head into our tent and said: "Come on, you girls. Put on your coats and slippers. The C.O. says you have to get into a dugout at once. They are shelling us." We were incensed because he would not allow us to wait long enough to get into our clothes. We wanted to go to the wards, not into a burrow in the ground. "Good God! That first shell killed a night sister in 44 in bed asleep. Come on!" he said... we scuttled across no man's land to some trenches occupied by Scotch Canadians who were out of the line resting. Before I reached them, another long-drawn-out crescendo followed me closely. "I'm gone," flashed through my mind. The men shouted, "Run!" Others called, "Drop quickly!" My slipper tripped me, and I fell just as the shell fell in the cemetery behind. I looked back to see a huge mass of black smoke and debris flying in all directions; felt myself lifted and dragged into a huge dugout where all the day staff had gathered. Every one of them was upset at the C.O.'s orders and distressed to leave the patients.'

Notes:

'**Big Bob**' was the name given by the Allies to a very large type of anti-aircraft gun used to shoot down German planes.

A '**tourniquet**' was a piece of elastic bandage that was wrapped tightly around a limb above a wound to block an artery and stop bleeding.

The '**Q.M. Stores**' was the 'Quartermaster's Stores' where all the food and supplies for the hospital were kept.

M.O.: Medical Officer

C.O.: Commanding Officer

Helen Fairchild: American Nurse



Plaque at Dozinghem, Belgium, commemorating Nurse Helen Fairchild

Helen Fairchild was just one of many American nurses who went to Europe to nurse the wounded of the First World War. She had been born in Turbot Township, Milton, Pennsylvania, and had spent most of her childhood at Griffey Farm near Allenwood. She joined the U.S. Army Nurse Corps Reserve in 1916.

On 6 April the United States Congress declared war on Imperial Germany. Helen became a nurse with 'US Base Hospital No. 10' (also known as 'The Pennsylvania Hospital Unit'). She was suffering from a stomach ulcer, although at the time, she did not realise how seriously ill she was. On Sunday 14 May, she wrote to her brother, Ned:

I am glad to be one of the ones to go, but feel sorry for mother. If she would only not worry so much ... I'll be a long way from home so write me often and tell me all you are doing. And don't feel uneasy about me ever, for the folks at home will be

notified immediately if anything should happen and will let you know, so even tho' you may not hear from me for a long time you'll know I'm all right. And try and write mother often, for she worries when she doesn't hear from you often.

On 18 May, Helen started on her long journey to Europe. Her unit crossed the Atlantic Ocean on the steamer *St Paul*. Everyone onboard had to wear their life jackets throughout the journey. Helen was seasick the whole way. When she landed safely in Liverpool, she wrote to her mother again:

We were on the water just eight days, went on the boat at noon Sat., and by 6 o'clock p.m. I felt as if the floors were coming up to meet me, and the whole universe was whirling so you see I didn't waste much time getting sea sick, and like to die all day Sunday and Monday, but Tues. morn had to have para-typhoid vaccine, everybody had to take it, and everybody had quite a severe reaction, but it sure made me sick until Fri. eve I began to feel a little better. I could sit up in my chair and by Sat., was on my feet again, and yesterday felt fine, and do today although pesky tired.

For several months, she nursed wounded Allied soldiers at a base hospital on top of the cliffs near to Le Treport in Northern France, but, in August, she was posted to No. 4 British CCS on a field next to Saint-Sixtus Abbey, Westvleteren, close to Ypres. On 13 August, Helen wrote a letter to her mother. She decided not to tell her mum how bad things were at No. 4 CCS, instead writing about waiting for her uniforms to arrive:

I am out with an operating team. We are about 100 miles away from our own hospital, close to the fighting lines, and I surely will have lots to tell you about this experience when I get home. We have been up here three weeks and see no signs of going back yet, although when we came we only expected to be here a few days; so, of course, we didn't bring much with us. I had two white dresses and two aprons and two combinations [underwear]. Now can you imagine trying to keep decent looking for three weeks with that much clothing, in a place where it rains nearly every day, and we live in tents, and wade through mud to and from the operating room. It was

some task, but finally dear old Major Harte, who I am up here with, got a car and a man to go down to our own hospital and get us some things ... This has been a very novel experience, but I will be glad when we get orders to go back ... Oh, I shall have books to tell you all when I get home ... Heaps and heaps of love to you one and all,
Your very own Helen.

Helen became ill because of her stomach ulcer. She was nursing patients with gas poisoning and was inhaling and swallowing the gas on their uniforms and bodies. She was moved back to Le Treport, but soon began to suffer from tonsillitis. She had to stay in bed for many days, and had a long time to think about her life. She received a letter from her sister, Christine, who was 15 at the time. Christine was worrying about the pressures at school. Helen wrote back to her

Chris, let me give you some good advice. Don't worry yourself sick over those lessons, either you or Don, for you are both very young and if you don't pass this year you will next, and don't kill yourself trying to keep at the head of the class, just plug away and get what you can and if you don't get it all today, just remember there is another day coming, so now just get over the idea that you have to get everything perfect. Do your best and let it go hang, and take it from me, Chris, I some-times wonder if it really pays to always work too hard, for the older I get, the more I find that the more you do, the more people expect of you, and the more they demand of you ... Being sick this far from home is no fun, but everyone has been fine to me, my room is filled with flowers they bring me, and fruit galore.

In December 1917, Helen became very ill. The ulcer in her stomach had grown bigger and was very swollen, stopping food from passing through her stomach. She was being sick after every meal. She needed surgery, and she asked one of the surgeons she had worked closely with in Westvleteren to perform the operation.

At first Helen seemed to recover. But then, suddenly, she went into a coma. She died at 11.20 a.m. on 18 January. Her liver had been badly damaged. The doctors thought that this

was a reaction to the chemical, chloroform, that had been used during her operation, but it is possible that it was also due to the mustard gas at the CCS.

Helen was buried in the Huon Cemetery at Le Treport. After the War, her body was moved to the American war graves cemetery at Bony on the Somme.

Charles Mitchell, the surgeon who had performed the unsuccessful operation wrote to her mother:

My dear Mrs. Fairchild, It is the hardest task to write you the sad news of your daughter. I hardly know how to do it. We all loved her as our own, and feeling as we do toward her we can in but a small way realize what it must mean to you, and if it can comfort any to know that she was the best beloved of our nurses and the most esteemed of the Medical Officers... Miss Fairchild has been to me like a daughter ... We cannot express enough how deeply we all feel with you.

“Helen’s sister, Christine, always remembered that, after the war, a man came to her parents’ house to tell them about Helen’s illness. He said that one night, during her time at British CCS No. 4, Helen had given her gas mask to a soldier, thus exposing herself to drifting toxins from gas shells landing close to the unit. He believed that this deliberate act of self-sacrifice had meant that the stomach ulcer, which was already making her very ill, had become more acute. The story was passed down within the Fairchild family: for descendants who never knew her, Helen was both a war hero and a compassionate humanitarian”.

[extract from *Nurses of Passchendaele*].

The letters in this section are quoted from a book, written by Helen Fairchild’s niece: Nelle Rote, *Nurse Helen Fairchild*.

Violetta Thurstan's Story



Portrait photograph of Violetta Thurstan

Violetta Thurstan was born in 1879 in Hastings on the south coast of England. She became a student nurse at the London Hospital School of Nursing in December 1900. By the time the First World War began she was a very experienced nurse. She travelled to Brussels as the matron in charge of forty British nurses. She and her group were taken prisoner when the Germans entered the city. The Mayor of Charleroi asked the German military commander for nurses to care for both French and German wounded in his town. Violetta and another

nurse were allowed to go. Soon after this, all the British medical and nursing personnel in Belgium were rounded-up, put on a train and taken to neutral Denmark.

After this, Violetta travelled to Russia, where she cared for Allied soldiers in hospitals on the war's 'Eastern Front'. In 1917, though, she returned to Belgium, as the matron in charge of a huge Belgian hospital called L'Hôpital de l'Océan, in the seaside town of La Panne. In mid-July she was posted to a British 'dressing station' located very close to the front lines of the war at Coxyde.

On Monday 27 August, Violetta wrote in her diary:

Our dressing station was shelled and the padre killed, 3 wounded – the huts hit, the farm and two tents set on fire. I got knocked on the head. We all had to evacuate, Mardie and I to the Canadian CCS where the matron gave me her own bedroom.

Although she had made light of her experiences in her own diary, Violetta had acted very bravely. She was awarded the Military Medal, and her 'citation' (the reason given for awarding the medal) stated that:

she dragged a wounded man into a shelter at great personal risk and afterwards she assisted at an operation and in dressing the wounded though at the time the shelling was very heavy and part of the hut in which the dressings were being performed was struck by a shell. She was herself hit on the head and dazed by a piece of falling timber. Nevertheless, she continued to work and assist in the evacuation of the helpless wounded – a most stimulating example to all. When removed to the Casualty Clearing Station she protested at being detained there and expressed an urgent desire to return to the Corps Main Dressing Station.

Violetta was very badly wounded. In her diary, she said that for about a week, she felt like a 'worm of the earth'. On 18th September she was taken back to Britain by hospital ship.

Catherine Black's story

Catherine Black was an Irish nurse from County Donegal, who trained at The London Hospital. When the war began she went to work at the Cambridge Hospital in Aldershot, caring for men whose faces had been injured. Some of the earliest 'plastic surgery' (operations to repair people's faces) was done at this hospital. The men could not eat or talk and they had almost unbearable pain. Catherine found it hard to prevent infections from taking hold in these wounds. She and other nurses learned the best ways to feed the patients through tubes, and the best ways to support them emotionally through the pain and trauma of facial injury and operation.

Later, she worked on a ward for emotionally-damaged men with 'shell-shock' at a hospital in St Omer, France. She discovered that the men could begin to recover if they were allowed to have plenty of rest. They were given sedatives and good food, and many got over their trauma.

In the middle of August, Catherine Black was posted to No. 17 British CCS at Remy Siding. Six months later, in March 1918, during the German breakthrough on the Western Front, she was nearly left behind, as she was trying to get a splint onto a patient's leg. A German prisoner saved both their lives by carrying the man to an ambulance, and Catherine later wrote about the experience: 'I wanted to thank him as he turned away, but I could not for he knew no English and I no German. But I waved to him as he stood there, smiling shyly. And suddenly I knew that there was no such person as the enemy ... only the people of one nation obeying orders to fight the people of another.'

Catherine Black's Memoir

Catherine Black kept a diary of her experiences in the First World War. Many years later, she published it as a book, *King's Nurse. Beggar's Nurse*. Here is an extract from her book:

I had nearly a year in the comparative peace of St. Omer, and was beginning to look upon myself as a fixture there when a bomb dropped on the casualty clearing station at Poperinghe, killed one sister and injured several others, and there was an urgent call from headquarters for substitutes to replace them. My name was on the list, so, in company with three other Sisters, I set out in an ambulance that rocked and rolled like a ship at sea in avoiding the shell-craters...

You could not go through the things we went through, see the things we saw, and remain the same. You went into it young and light-hearted. You came out older than any span of years could make you. But at the time you did not reflect on it much, or on anything else. You did not dare to. Instead you filled your mind with concrete facts – pulses and temperatures, dressings and treatments – because you soon learned that if you concentrated hard enough on them it stopped you remembering other things. You were an experienced nurse; you had been chosen to serve at a C.C.S. because of that, and you were supposed to be used to grim sights and sounds and smells. But even so, there was so much that no nursing experience in the world could have prepared you for. You could familiarize yourself with the havoc that shrapnel could work in a human body – the operating theatre had trained you to look at flesh and blood without wincing. You could cleanse wounds that were crawling with vermin by reminding yourself how much worse it was for the men who had to bear them. You could make yourself walk calmly down a ward while the Taubes [planes] were bombing the station and the shells were falling only fifty yards away, because however frightened you were some poor fellow in delirium would be sure to start tearing off his bandages and trying to get out of bed... and you would have to go and give him a shot of morphia.

Notes:

'Vermin', refers to the maggots that got into wounds that were left exposed on the battlefield. Other 'vermin', that got into men's clothes, included lice and fleas.

'Morphia', is the word nurses used for the drug 'morphine', which is a strong pain-killer still used today, in the form of 'diamorphine' or 'heroin'.

Glynne Morris – a soldier's story

"On 13 September twenty-two-year-old Second Lieutenant Glynne Morris, of the Sherwood Foresters, had been hit by shrapnel in a trench at Shrewsbury Forest and severely wounded. He was taken by stretcher-bearers to an Advanced Operating Centre belonging to No. 140 Field Ambulance. Sister Annie Wright wrote to his mother:

Dear Mrs Morris, I do hope you will have this note before learning from the War Office. Your son Lieutenant J. G. Morris was admitted to our Ambulance about 9 o/c this morning suffering from abdominal wounds, and is very dangerously ill. He was operated on shortly after admission [and] is just as well as we can expect. He is young and strong and we hope with God's help to pull him round for you. I will write again tomorrow and tell you how he is. Need I say how deeply we sympathise with you in your anxiety for your brave lad.

"A day later, Annie wrote again to say that Glynne had had a 'fair night' and was 'holding his own'. She added that he was 'very bright and very hopeful and [making] a good fight for recovery'. But two days later it was becoming clear that Glynne's condition had worsened. A deep wound infection was probably taking hold. He had suffered a restless night and was 'tired out'. Annie assured Mrs Morris that the staff would 'do all in our power to send him back well again to you'.

"On the 19th, the day before the Menin Road assault, Annie was writing to Glynn's father:

Dear Mr Morris, I promised to write again telling you of your son's condition. He is still alive but his condition is not as satisfactory as we could wish. He slept well last night and if anything this morning he is a little stronger. He has every attention and comfort possible and we pray we may yet be able to send him down to you ... I will write again in a day or two. You have our deepest sympathy in your anxiety and rest assured no one will spare themselves if it is to save his life.

“Two days later, Glynne’s condition was clearly hopeless. Annie tried to soften the blow, writing to his father that Glynne had had a restless night and took ‘no interest in life’, adding ‘we give him all possible care’. The next day she wrote again, preparing Glynne’s parents for the worst: ‘I regret to tell you that the surgeon holds out very little hope of his recovery. He has no pain, lies today as if asleep taking no interest in anything.’ Finally, on 23 September, ten days after Glynne’s wounding, Annie wrote:

Dear Mr Morris, Your wire came this morning just an hour too late, your dear boy having passed peacefully away at 9 o/c. Sister Rickard was with him and took this little piece of hair for you. She also put some white flowers in his hands in your name, she was very, very good to him and he seemed to prefer her looking after him. It may be of some comfort to you to know he didn’t suffer, only from the very first seemed tired out. His wound which was an abdominal one did very well indeed. I cannot tell you how sorry we are not to have been able to save him for you, but really if you had only seen how wearied he looked you would not grudge him to rest. With deepest sympathy with all his friends, Yours Sincerely, Annie Wright

“By the time Annie wrote her last letter to Mr Morris, the Battle of the Menin Road had been raging for three days and 140 Field Ambulance must have been inundated with casualties. The fact that she took the time – probably after every shift, as she came off duty – to write such carefully personal letters is a testament to her commitment not only to her patients but also to their relatives. John Glynne Morris is buried in Reninghelst New Military Cemetery”. [extract from *Nurses of Passchendaele*]

Sidney Beldam: One of the survivors

“Even after the cessation of operations on the Ypres Front, men were still being wounded in the wasteland of the Salient. Sidney Beldam, a young Cambridge man, aged 18, sustained severe facial injuries in late November. Sidney had been torn from his peaceful life as a commercial traveller in 1916, when the Military Service Acts had enforced the conscription of all men between the ages of 18 and 41. He had joined the Army Service Corps and had spent his first weeks as a soldier driving a lorry in southern England. But in April he had been transferred to the Machine Gun Corps and shipped

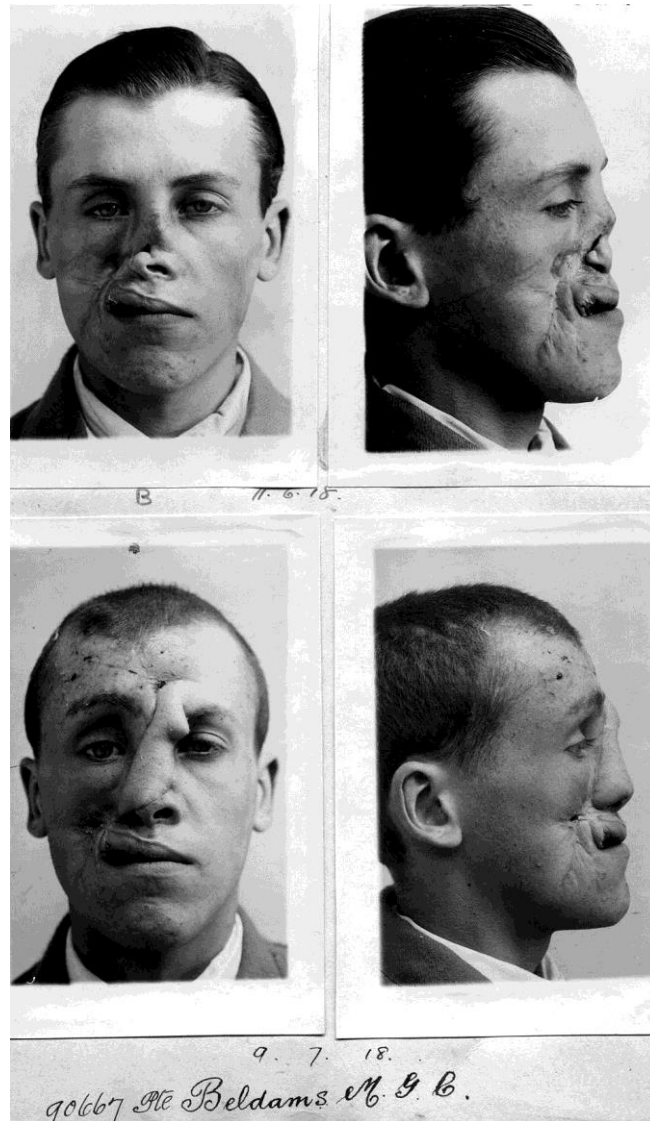


to the continent. During the last actions of the Battle of Passchendaele, Sidney was peppered by shrapnel in a shell-hole next to a brick barn; his face was blown apart by flying splinters of metal. He was left for dead, face down. It was a matter of pure luck that the blood from his wounds dripped downwards into the mud, rather than into his throat. As the blood began to clot, he became conscious, but was unable to move. Three days later, he became aware of stretcher-bearers approaching. He felt himself being rolled over and then heard the words, ‘Blimey! This one’s still alive!’ He was transferred to a CCS, where he received shock therapy and emergency surgery. Several days later, he was taken down the line to a base hospital. Somehow, the surgeons, nurses and orderlies in the lines of evacuation managed to keep him alive until he reached an auxiliary hospital at Rawtenstall in Lancashire, where he underwent further surgery.

“In June 1918, Sidney was transferred to the Queen’s Hospital in Sidcup, where, Harold Gillies, the New Zealand surgeon, whose patients had been nursed by Catherine Black at Aldershot in 1915, performed plastic surgery. Sidney was ‘Case Number 598’. He was to have over forty operations – and his treatment would last well into the 1930s”.

[extract from *Nurses of Passchendaele*]

The photographs below show what Sidney looked like about half-way through his treatment. The top two photos show how he looked after his wounds had healed, but before his nose was repaired. The bottom two show what he looked like after a piece of skin from his chest had been grafted onto his face to make a new nose.



Images of Sidney Beldam from the Collection of the Royal College of Surgeons

“Sidney... spent most of the last ten months of the war at the Queen’s Hospital, Sidcup, undergoing operation after operation to repair his devastated face. While he was there, he met Winifred Winkworth, a professional pianist who had been asked to come into the hospital to play for the patients. She was later to declare that, she fell in love with Sidney ‘at first sight’ – because his smile ‘lit up the room’”.

[extract from *Nurses of Passchendaele*]



Portrait of Winifred Winkworth

“Sidney’s ordeal was not over: he was to undergo more than forty further operations and every time he caught a cold he would experience an agonizing inflammation of his scarred nasal passages [pain and damage to the inside of his new nose]. His seventy-two hours in a shell hole at Passchendaele had left him with a phobia of rats and cockroaches that lasted for the rest of his life. Yet, Sidney considered himself lucky. Many of the patients who were discharged from the Queen’s Hospital were unable to find their way back into ‘normal’ life. Some died of illnesses associated with their injuries. Others committed suicide. Sidney and Winifred had a happy marriage. Their granddaughter, Marilyn, was later to write: ‘I thought all granddads looked like mine, and honestly never thought twice about it’.”

[extract from *Nurses of Passchendaele*]

Final Thoughts: 'The Great War for Civilization'?

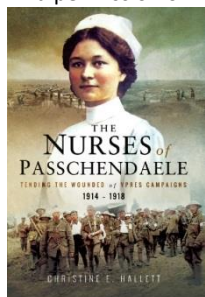
It is worth thinking about how easily governments can make the wrong decision, and whole nations can stand by and watch. Sometimes we are too eager to go to war; at others, we fail to help those who are being attacked. How can we manage to make the right decisions? When we think about the First World War, we are using 'hindsight' because we know what happened in the end. In March 1918, the Germans launched a dramatic offensive on the Western Front. But in the summer, the Allies counter-attacked, winning a series of decisive victories. On 11th November, 1918, the Armistice was signed and the First World War was over.

From 1914 to 1918, millions of men died fighting on the battlefields of the First World War. Many of those who wrote about their experiences in letters or diaries called their fight 'The Great War for Civilization'. But within 50 years it would be written about as a meaningless slaughter. Over the last hundred years, people have argued a lot about the First World War – particularly about why so many millions died. In Britain, some historians have suggested that their own country's involvement could have been avoided. Others have argued that British involvement was unavoidable: it was impossible to stand aside and watch the invasion of Belgium. Very few historians have written about the nurses: women who saved the lives of wounded men. Some of these nurses travelled many thousands of miles to care for men from countries other than their own.

Now, one hundred years after the First World War, we can remember what happened by going to beautiful ceremonies or visiting peaceful cemeteries. It is right that we should respect the dead. But we should not allow all that beauty and peace to distract us from the fact that people are dying in the world right now because of warfare. We can be shocked by the fact that hospitals were bombed near Ypres in 1917, and that nurses and patients died. But hospitals were bombed in 2016 too – in Aleppo, Syria. And thousands of refugees streamed out of that city to save their lives, just as Belgians had streamed out of Ypres in 1914. Do you think you would have gone into the 'zone of the armies' in 1914/18 – as a stretcher-bearer, a doctor, or a nurse? Would you have risked your life like that, as nurses are doing now, to save people damaged by war and humanitarian crisis?

Credits:

Several extracts were taken from Hallett, Christine E., *Nurses of Passchendaele* (Barnsley, Pen and Sword Books, 2017) (by kind permission of Pen and Sword Books)



Extracts were also taken from:

Black, Catherine, *King's Nurse – Beggar's Nurse* (London, Hurst & Blackett Ltd, 1939)

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Photographs:

Nurses and patients in a casualty clearing station during the First World War (photograph appears by permission of The Eleanor Crowder Bjoring Center, The University of Virginia, USA)

The ruins of Ypres in 1919: US Library of Congress (Public Domain)

Frank Hurley: 'The Morning after the First Battle for Passchendaele': a composite image. National Library of Australia (Public Domain)

Nurse and patient in Australian casualty clearing station (photograph appears by permission of the Imperial War Museum, London)

Nurses and doctors treating a patient's wound at L'Hôpital de l'Océan, Belgium (© The Belgian Red Cross Archives)

Kate Luard as a young girl and when she was Sister-in-Charge at Brandhoek (photographs appear by permission of Caroline Stevens)

Nellie Spindler (photograph appears by permission of the Lijssenthoek Military Cemetery Visitor Centre)

Nellie Spindler's grave (Author's Collection)

Photograph of May Tilton, frontispiece of her memoir: Tilton, May, *The Grey Battalion* (Sydney, Angus and Robertson Ltd., 1933)

The plaque at Dozinghem commemorating Helen Fairchild (Photograph by Luc Inion; Image of Helen Fairchild appears by permission of Nelle Rote and the Women in Military Service for America Memorial Foundation, Inc.)

Portrait of Violetta Thurstan (photograph appears by permission of Richard Thurstan, Jill Hunt, Melissa Hardie-Budden, and the Hypatia Trust, Penzance, Cornwall, UK)

Portraits of Sidney Beldam and Winifred Winkworth (photographs appear by permission of Marilyn McInnes)

Portrait photographs of Sidney Beldam during his facial surgery (photographs appear by permission of the Royal College of Surgeons, London and by kind courtesy of Marilyn McInnes)

Lijssenthoek Cemetery (Author's Collection)



Lijssenthoek Cemetery near Poperinge in Belgium, where Nellie Spindler is buried. There are almost 11,000 graves.