THE MEDICAL SERVICES IN THE RUSSIAN ARMY.
(PEACE.)

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THE Russian Empire comprises thirteen military commands. This includes the Cossack territorial districts, which number eleven (six in Europe, five in Asia), and which are regulated by a special code.

The Army Corps, the military establishments, and every detail of the forces, are placed under the authority of the General Officer Commanding the district; in nearly every case he is also the Governor-General exercising the supreme civil control.

As the strength of the Russian Army varies from year to year, only an estimate of the number east of Lake Baikal at the outbreak of the hostilities is appended.

_The Times_ estimate put the composition of the Russian forces as follows:—

Infantry, 107,000; Cavalry and Cossacks, 22,500 (since heavily reinforced); Artillery, 10,500 men, with 174 guns, 24 horse artillery guns, 22 mountain guns, 36 quick-firing field guns (now probably about 150 of this pattern), 8 heavy guns.

Deducting the men required for garrison purposes and for the guarding of the line, the Russian field army should consist of about 80,000 infantry, 20,000 to 30,000 cavalry, 8,000 artillery, with 250 guns, and engineers and technical troops.

Reinforcements have been steadily moving east, at the rate of about 2,000 men per week, or rather more.

The Russian reports that Russia has 500,000 men in the Far East are not to be taken seriously. The difficulty would lie in the feeding of so large a force during the winter. But undoubtedly a powerful army will be concentrated in the zone near Lake Baikal, and will move east as soon as stores can be accumulated.

Russia can dispose of 5,000,000 trained men, so that her efforts will be limited solely by the question of supplies and communications. These have to be carried on along a single line of rails, not well laid.

The garrison of Port Arthur is put at something less than 30,000 men, though it was given out by the Russians as 70,000 men.

Since this estimate the Russian Army in the Far East, at the end of March, has been varied to 230,000 men.

Since 1874 Russia has enforced universal service. Every young
man who has reached twenty-one years of age in the month of
October draws lots in the December following; the requisite number
having been drawn, they are submitted to medical examination, the
rejections being filled up by those next on the list. The recruits,
it may be added, appear before a local board, and later on before
a special government board.

The resources of recruiting are so considerable in this enormous
Empire, in which the population is 138,000,000, that not even one-
third of the conscripts have to present themselves for medical
examination. In 1901, 1,139,151 conscripts were liable for service,
and about one-fourth of this number were taken into the regular
army. The minimum height of a recruit is fixed at 1'534 metre,
about 59 in. It would seem that the ordinary estimate of the height
of the average Russian must be erroneous. The obligatory service
lasts till forty-three, five years in the regular army, thirteen years in
the reserve, and four years in the territorial militia. Except in
Turkestan and Siberia, the active service really lasts only four
years, and, as in other foreign armies, in special cases, passing
examinations, &c., this period is further reduced.

Personnel. — The Army Medical Services consist of—
(1) Medical officers, apothecaries.¹
(2) Pay and other clerks.
(3) The sanitary corps includes feldschers, hospital attendants
and stretcher bearers, Sisters of Charity and officials of Red Cross
Societies.

The division between combatant and non-combatant officers in
the Russian Army is marked; the medical officers come under the
latter class. All, however, have a special rank in the roll of pre-
cedence in the Empire (tchin). The four senior grades are nobles
and are entitled to be called "Excellence." The place of rank in the
tchin is always given in official documents. An Inspector-General
is in the third grade, and would be addressed as "His Excellency
Inspector-General of the nth Division, Privy Counsellor, Doctor X."

Nearly all the medical officers and apothecaries are recruited from
the pupils of the Military Academy of Medicine at St. Petersburg;
some, however, are educated at other medical schools. They enter
the Academy at 17 and pass five years there, and are then drafted
into the Army as subaltern medical officers. The Academy is an

¹ In accordance with a prikase of November, 1902. From 1904 the Veterinary
Department has become a separate unit and is no longer a part of the medical
organisation.
important faculty; besides medical degrees it confers dental diplomas and certificates to midwives, and about one half of the students become army medical officers.

All the students undergo military training: they go into camp for three months the first year of their course and form a special company comparable to our University volunteers. To meet the requirements of the Army the number of those entering is not sufficient, even admitting the small relative proportion of medical officers to the total forces. In time of peace about 2,000 medical officers are considered ample for this enormous army. In war time the civil population is so sparsely supplied with doctors that it will be difficult to draw on this reserve.\(^1\) This want of skilled medical attendance is known well in the Russian army: to endeavour to meet it the authorities have carefully organised schools for the education of hospital attendants and so-called assistant surgeons; a good many women are included in these classes. Medical officers are not mounted except in war; they draw the pay of their relative rank. Apothecaries occupy much the same position as this class formerly did in our Army; all the drugs, dressings, &c., are manufactured at a special army institution at St. Petersburg.

The section corresponding to our army clerks have more to do with the internal administration and finance; they are classed as clerks, pay clerks, secretaries and stewards (smotritel).

Sisters.—The recruiting and instruction of Sisters is undertaken by the Red Cross Society. They follow a course of two years, and are then attached to a military hospital for further training. On completing their studies they take up their duties as Sisters of Charity. Their number is not so great as in our Army; for example, in the large hospital at Warsaw there are only twenty. They are, and perhaps rightly, employed as nurses only in serious cases; they supervise the cooking and are entrusted with the care of the linen and hospital clothing, and in some hospitals they

\(^1\) In normal times, ever since the 'eighties, no Jewish doctor ever receives an appointment in either the Army or in the Navy. But during the war, when lives and fortunes are at stake, Jews are pushed forward. In the large cities many Jews occupy distinguished positions in the medical profession. They have all been enrolled and sent forthwith to the front. The proportion of doctors of the orthodox faith called out is very small; the Government avails itself of the most skilled medical assistance and at the same time deals a blow to the Jewish community. Likewise in every regiment furnishing detachments for active service Jews are included, so that Jews form 10 or 11 per cent. of every detachment sent to Manchuria.
manage the laundry. In fact, their nursing duties resemble those of a matron of a small hospital or home.

**Army Medical Corps.**

*Feldschers.—* This is a German term; it signifies a hospital attendant to whom a very careful training has been given. In Russia there are five schools for feldschers. The first two years the pupils are given a general education, and later on they go through a medical course; in education they are comparable to apothecaries in our Indian Army and, like them, are very useful auxiliaries. For a large army in the field it is estimated that at least 10,000 feldschers would be required. Not half that number is available. The ordinary hospital attendants are recruits transferred from regiments, as in the early days of the R.A.M.C. Usually they are men inefficient in the ranks, but considered suitable for attendance on the sick. They are carefully instructed, and under the strict discipline of a continental army become trained orderlies. The stretcher bearers are purely regimental, comprising the band, &c.; on paper they seem to be sufficient in number.

**Administration at Headquarters.**

The medical services are directed by two authorities perfectly distinct—one is purely medical, the other is military and administrative. The duties of the Surgeon-General-in-Chief are in medical details the same as our Director-General; he is responsible for the *personnel* and *matériel* of everything connected with medical and sanitary arrangements. An advisory board also assists the Inspector-General, who sits as President: the permanent members are the President of the Medical Council, the Chief Medical Officer at the Home Office, the Director-General of the Navy, and the Principal Medical Officer of the Army Corps of St. Petersburg. As consultants, medical officers of the Service, either on the active or retired list, who are specially distinguished by their scientific or administrative qualities, can be chosen as members. The second administrative council is part of the supreme council of war (hospital committee). Its sphere is to organise and direct the purely administrative part of the medical services. It is composed of military members, but the Inspector-General has a seat in its deliberations. It deals with the discipline, pay of the *personnel*, the distribution of the hospitals, their stores, feeding and equipment, and their general working. It is apparent that the functions of these two Boards must frequently overlap each other; the second
Board is, however, the superior authority and accepts or not the conclusions of the first.

**Territorial Divisions.**

This is organised on the same lines as the headquarter staff mentioned above: the Surgeon-General exercises the same disciplinary power over medical officers and subordinates, and, amongst other functions, he can give permission to marry and can grant as much as four months' leave. The officer commanding possesses all the attributes of the hospital committee and uses them frequently. He supervises in general the administration, the clerks and other employes, and interferes actively in every detail of the working. The chief Army Service Corps officer manages, with scarcely any reference to the medical officers, the supplies and transport; the arrangements for sick convoys are also confided to him.

**Army Corps.**—The principal medical officer is endowed with similar powers. In the regimental units the distribution is as follows:

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There are three classes of hospital—detained wards in the barracks, accommodation in a small regimental hospital, and the permanent hospitals. The last eventually admit any serious cases: they are divided into four classes according to their size, the largest containing over 1,000 beds for N.C.O's. and men, and sixty for officers. The chiefs of these hospitals are military officers of the headquarter staff, and under them directly are placed the principal Medical Officer and a steward. It may again be repeated that the Principal Medical Officer exercises his command simply in professional matters; the medical officers junior to him, the feldschers, and the apothecaries, are under his orders. Consulting surgeons and physicians are attached to all the large hospitals to assist with their advice in all serious cases. To give one example, a hospital of 207
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beds would have the following staff: a Colonel Commandant and an Assistant Commandant, three Medical Officers, two apothecaries, two book-keepers, six feldschers, six clerks, twenty non-commissioned officers, fifty hospital attendants. One Sister is attached to each division of the sick. Most of the hospitals have a bacteriological laboratory, and portable cabinets for all sorts of analysis are sent out to the smaller hospitals. The steward or manager, though not of commissioned rank, is a very important official; his analogue is to be found in all civil hospitals where the professional staff is occupied only in the treatment of the sick. In contradistinction to our ideas, the large hospitals are diminishing in number and the smaller well-equipped ones are being established everywhere; the tendency is to treat the sick in the station hospitals and to avoid their transfer to the larger institutions. There are two large convalescent homes, one at St. Petersburg, the other at Moscow.

The Cossacks have special hospital arrangements; their wives and children sometimes accompany them to hospital: there are twenty-eight establishments at present in the voiskos of the Don, of the Ural and in Siberia. As in the French army, there are also, for chronic invalids and convalescents, numerous other hospitals situated in the different health resorts and in the places where water cures by hydrotherapy and mineral springs are carried out. It may be mentioned that, as recently adopted in our army, a postgraduate course at the St. Petersburg Academy is followed by each medical officer. There they are attached to hospitals and attend classes in all subjects of medico-military interest, which course must render them more useful as army surgeons. The details of army medical practice and administration are not presumed to be possessed by anyone holding a medical diploma.

In point of fact, especially in the training of the feldschers, nothing is spared to render the medical services effective. It will be seen that there is nothing new in this organisation; the manufacture of all the drugs, compressed tabloids, &c., dressings, &c., by an establishment exclusively military is perhaps the only novelty. The military arrangements of all the great European Powers are framed on much the same lines, but not in similar proportions. This present war will demonstrate how limited are the medical resources of the Russian Empire, and how impossible it is at a short notice to remedy this want.

(The arrangements in war time will appear in the next number.)