A NOTE ON THE EVACUATION OF SERVICE CASUALTIES BY AIR.

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The article on "Aerial Transport of Service Casualties," by Wing Commander H. A. Treadgold, R.A.F.M.S., in the November issue of the Journal, must have been read with great interest by those officers of the Corps who had occasion to deal with the transport of casualties on the frontiers of Iraq.

To anyone with a knowledge of the difficulties encountered by punitive columns in the mountains of Kurdistan the record of the evacuation by aeroplane of 198 casualties from the remote and rugged valleys round Rowanduz to Kirkuk and then to Baghdad in 128 hours 45 minutes flying time, must evoke a feeling of admiration for the skill and resource of the pilots.

In contrast to this feat of rapid evacuation is the experience of a column in the Kurdistan Rebellion of 1919 when, entering Southern Kurdistan from the Persian border, we had to carry our sick for a period of fourteen days, most of the marches being over the mountain tracks of the Avroman Range. The methods of transport used were baggage mules, mule cacolots, and in one seriously ill case a mule litter and, as it was during the worst of the hot weather, the sick suffered considerable discomfort before they reached a field ambulance at Suleimanie. From this place the sick and wounded had a two-day journey over a bad road to a field ambulance at Kirkuk. The next stage was by motor ambulance, a distance of fifty miles across the "blue" to the Tigris at Fatah to reach the casualty clearing station at the railhead at Baiji, about twenty miles above Tekrit. As an example of the bad state of the road between the river and railhead it may be mentioned that another officer and myself being evacuated as stretcher cases had to turn out and help to push our ambulance car, an experience—performed as it was in the heat of a July morning—we could well have dispensed with. One can therefore more readily appreciate the remarks of Wing Commander Treadgold regarding the evacuation by air of the sick from the 1923 Kurdistan column that "none of the patients carried seemed to mind the method of transport, and the majority stated that they had enjoyed the experience."

In January, 1920, while up on the Syrian-Iraq frontier, I obtained a striking demonstration of the value of a Service aeroplane in evacuating a casualty. A section of the combined field ambulance to which I was attached was stationed at Ramadie and was responsible for the medical arrangements of the long and difficult lines of communication from Feloudja up to Deir-es-Zor, a distance of 300 miles.
The town of Deir-es-Zor, which is now in French mandated territory, was occupied by a small force of our troops after the Armistice. The continued occupation of this town was resented by the Arab nationalists in Syria, and in December, 1919, a noted irreconcilable—he is again very active in the present Syrian revolt against the French—Ramadan al Shallash of the Aquaidat tribe, made a sudden raid on the town and captured the garrison, which consisted of a half battery of L.A.M.B. cars and some local levies. No attempt was made to recapture the town but a force was sent to hold the small fort in the village of Abu Kemal, sixty miles lower down the Euphrates. The Aquaidat, however, were so emboldened with their success that they attempted to repeat a similar coup at Abu Kemal. The day on which the small convoy with which the writer was travelling reached Abu Kemal was the day selected by the tribesmen for their attack, a fact of which we were made aware by running into a very effective ambush in the sandhills a couple of miles from the fort. The prompt arrival of an armoured car enabled us to collect our casualties and reach the fort.

Here we found ourselves in a position which must have been similar to that experienced by the French outposts in Morocco during the Rif revolt. One of our earliest casualties was a young British officer with a bullet...
wound in the liver. There was difficulty at first in finding suitable accommodation for the wounded, for the fort was small and had to provide for a company and a half of Indian infantry, a battery of armoured cars, and other details, such as motor transport drivers, pack wireless unit and the Political Officer and his staff. The outer courtyard had to serve for entrenchments, sanitary area and cemetery, while the few living rooms had machine-guns posted at the windows. A store-room and the office on the ground floor were taken over for the British and Indian other ranks wounded, but the wounded officer had to remain perforce in the only available room in which eight of us were crowded together.

The tribesmen, by nightfall, had closely invested the fort and broken into the village, so that to the clatter of machine-guns, rifle fire and hand grenades, was added the pandemonium of pillage and murder from the bazaar. This state of affairs lasted three days when a flight of aeroplanes from Baghdad came over and bombed the enemy so effectively that the latter scurried off helter skelter some miles up river.

Among the officers in the fort were two R.A.F. pilots and an observer and there were two aeroplanes, one out of action with a bullet through the petrol tank, but the other was in flying order. These planes had been brought close up to the walls of the fort before the tribesmen had completed the investment. When it was seen that the Arabs had withdrawn, the pilot of the serviceable machine decided to try and fly through to Baghdad as it was more than likely that the Arabs would return at night and the nearest reinforcements—a regiment of Indian cavalry at Ramadie—would not reach us for ten days.

Learning of this I decided to evacuate the wounded officer by aeroplane and the pilot readily agreed, though the flight was not without risk. The patient's condition was such that he could stand the three or four hours' flight, but his retention in the fort was most undesirable, for, although no effort was spared to make him comfortable, the difficulty of nursing such a case in a crowded room was only too obvious. The usual landing ground was some distance from the village, but there was a level strip about the size of a polo ground just beyond the walls of the fort. Two armoured cars patrolled the broken ground beyond this in case of sniping, and the aeroplane was put in order as quickly as possible for the reception of the patient. The plane was a two-seater reconnaissance type known as R.E. 8. These machines are rather ancient and slow, usually referred to as "Harry Tates." We unshipped the observer's seat, but owing to lack of time and tools, could not remove the gun mounting or the tripod that supported the seat. A cushion from a Ford car was pushed into the cockpit so as to make an inclined plane for the patient to rest against, but his legs had to be thrust through between the bracing wires in the interior of the fuselage. The loading of the patient was difficult. The stretcher was lifted on to the top of the machine and tilted so that the patient was slid down on to the motor cushion. The adjusting of his legs in the cramped space caused...
him pain, but he bore it well. Soft native quilts and blankets were packed round him. We watched rather anxiously as the machine raced across the ground, but the engine started misfiring, so the pilot had to taxi back to rectify the trouble. The second attempt was successful, and it was a cheer of relief that rang out as the plane took off and headed for Baghdad. The departure was "wirelessed" to Baghdad, and an ambulance car was in readiness in the aerodrome when the pilot landed, having flown the 260 miles in three and a half hours. It is obvious after reading Wing Commander Treadgold's article, how much trouble and discomfort to the patient would have been saved had the modified Neill Robertson stretcher, which he describes, been available.

Even as it was, this patient stood the journey well, having slept most of the way.

Here again it is interesting to contrast this flight with the evacuation by road of the rest of the wounded in Abu Kemal. There was a journey by Ford ambulance cars of 220 miles over the worst road in Mesopotamia to Ramadie post hospital, and from there a further twenty-five miles journey to railhead at Feloudja. To add to the troubles over this route were the frequent attacks on convoys by raiding bands of Arabs.

It is reasonable to suppose that such trials and tribulations of casualties in present-day Iraq have been removed entirely by the advent of the huge troop-carrying aeroplanes, where, in the words of the poet in Punch:

"In Iraq's sheik infested spaces
Bold Bedouins, camped by green oasis,
Hear through the insect haunted night
The droning murmur of their flight."