Echoes from the Past.

PERSONAL RECOLLECTIONS OF THE AFGHAN CAMPAIGNS OF 1878-79-80.

THE "DEATH MARCH" THROUGH THE KHYBER PASS IN THE AFGHAN CAMPAIGN, 1878-79.

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CHAPTER I.

INTRODUCTORY.

IT is proposed in the following pages to place on record some experiences along the Khyber line and in Kabul during the Afghan campaigns of 1878-79-80, as it is probable that even the most trivial personal record may be of use to the future historian of that important campaign, for so far as one is aware the historian of that period has not as yet appeared.

Marking, as that campaign did, a great turning point in our relations to Central Asian questions, and in many ways forming a distinct starting point of Indian Army reforms, it would be a great pity if no such history was written, as it would be full of interest and instruction in many ways.

One is not concerned to-day to enter in any way into the political causes of the campaign. The time has not yet arrived to deal in full with such questions. It is sufficient to say that throughout the year 1878 our relations with Afghanistan were evidently strained, and the reception by the then Amir, Shere Ali, of a Russian mission, and his refusal at the same time to receive an English one, precipitated a crisis, and by the beginning of October the imminence of the campaign was generally recognised. The final refusal of a passage way to the mission under Sir Neville Chamberlain at Ali Musjid by the Amir's officials, led to an ultimatum and a direct declaration of war.

In October, 1878, the Army Medical Service was passing through that transition period between the regimental system of...
hospital organisation and the newly introduced unification system, and at this date, although the hospitals were still regimental, the actual commissioning of medical officers in regiments had ceased, and one was in the indefinite and unsatisfactory condition of being a departmental officer attached to a Corps.

In October, 1878, when the troops were ordered to concentrate on the Afghan frontier, the 25th King's Own Borderers were detailed for the Peshawar garrison, and on October 21st, 1878, they moved by rail via Lucknow, Bareilly, Meerut, Umballa and Mian Mir to Jhelum, which was then the rail head of the Punjab State Railway system, since merged into the North-Western line.

It is impossible to describe the condition of Jhelum and its neighbourhood at this time. The railway was pouring in supplies from down country in great quantity, and there were scores of railway waggons crowding the small station, and piles of grain, rations, and every kind of supplies stored and packed all about the place.

The grand trunk road from Jhelum to Rawal Pindi, and on to Peshawar, seemed to be simply one long line of bullock-carts and camels carrying loads, and troops were at all the camping grounds moving on to Peshawar. The ordinary postal carriage dakks were almost impossible to obtain, officers ordered up on special duty found it most difficult to join their appointments, and it will be impossible ever to estimate what enormous sums of money were lost to the State, and what great delays occurred in obtaining supplies and reinforcements at the front, by the want of the all important railway line from Jhelum to the Khyber mouth.

A lady, wife of an officer in a European regiment, tells her personal experience at this time. By great luck she managed to secure a dak gharrie from Jhelum to Pindi, but the pressure of passengers being very great, the Jhelum Postmaster asked her to permit a native officer on urgent duty to travel on the top of her carriage, a common method of carrying servants in those days. She assented, and the native officer, full of gratitude at her kindness, came forward holding out his sword in both hands for her to touch in the usual manner as a mark of his thanks. She, quite unused to meeting native officers, failed to understand what he meant, and thinking he wanted her to keep his sword as a guarantee that he would do her no injury during the journey, she took the sword from him, put it under her pillow, and gave it to him next morning on arrival at Pindi. It would be interesting to know what the native officer thought of the incident.
Marching from Jhelum the regiment reached Pindi in four or five days, passing on the way the Bengal Sappers and Miners and other corps moving to the front. Coming from a down country station, one now began to see for the first time the wearing of putties by the troops, a custom now so common, then quite unknown, and most people had never seen or heard of a "Sam. Browne" sword belt until they saw them worn by frontier officers on the road to Pindi and the front; the workmanlike dress now devised for field service did not then exist, and it was quite impossible when in khaki to say who people were. For some time at Dakka in the Khyber a Brigadier-General was taken for a Chaplain, as he had very little beard, and nothing whatever distinctive on his uniform to show who he was.

The Elcho boot, now so universally worn in the field, was never seen on any officer until the campaign was well on, and the custom of having a lanyard to one's revolver was practically unknown to the average officer in the early part of the war. In tents, in camp furniture, in cooking utensils as well as in dress, all seemed unprepared for the special character of this campaign in the highlands. With the frontier force it was of course quite different: they, and especially the Guides, were well equipped, but they lived and still live ready at all times for the field. The example given to the Army by these frontier Corps abundantly proved that it is possible to devise a field service dress perfectly distinctive and becoming, and at the same time perfectly serviceable, and all that the Army as a whole has since done is to level up to the standard already existing in 1878 in the frontier battalions.

The utter breakdown in dress that used to happen when a force was sent into the field need not now occur in India, as the field dress is practically complete. A story is told of the anger of an officer usually perfectly well turned out in cantonments, who, when dressed in the old khaki coat and going to buy stamps for his English letters, was addressed by a private soldier, also at the post office: "What a duffer you are to buy stamps, why don't you get the Colonel to frank your letter?" Later on reference is made to an incident where a well-known photographer in the Khyber took command of a convoy and was mistaken for a Bengal Cavalry Officer.

The 25th King's Own Borderers remained at Pindi halting for a time, awaiting final orders, and the writer in the meantime was transferred to the first division (Sir Sam. Browne's) then mobilising in the Peshawar valley.
While waiting day by day for a dak to reach Peshawar, the future Principal Medical Officer of the division, Deputy Surgeon-General John Gibbons, A.M.D., passed through with a special dak. Coming from Allahabad, where he had been Principal Medical Officer, and going on to Peshawar, he very kindly gave up a share of his dak, which enabled me to reach Peshawar with him.

The want of a bridge over the river at Attock was now and at all times during the next two years a most serious delay.

Peshawar was in a state of great excitement, troops and detached officers were daily pouring in, and the roads were filled with camel convoys moving out to Jumrood with supplies.

The medical officers passed through a wretched time in the few days that intervened between the arrival of the Principal Medical Officer in Peshawar and the marching out of Sir Sam. Browne's division to Jumrood to attack Ali Musjid.

It was simply a killing time for the Medical Officers, and the confusion and the trouble long foreseen by any thinking men arose in this way:—

Although the unification of the medical department had begun in England in 1873, it was still, in October, 1878, working on regimental lines in India.

Everyone who had studied the question must have known that such a system would not work in war time up the Afghan passes, and when the war was drawing near, the then Surgeon-General, Sir Harry Ker-Innes, submitted a scheme for the present field hospital system to be introduced, based entirely on the English, that is to say the German, French and Russian lines.

Some difficulty occurred in obtaining sanction from the Government of India for this change, and his scheme was not accepted.

At the very last moment, that is to say, one week before the Army crossed the frontier, wiser counsels obtained, and a plan of field hospitals as opposed to regimental hospitals was sanctioned, but no one knew anything whatever of the details of the scheme until 10 o'clock on the morning when Deputy-Surgeon-General Gibbons arrived in Peshawar, and sought shelter in some vacant officers' quarters.

There were then in and around Peshawar numerous regiments and batteries ready for the field, with all their medical arrangements for the campaign complete on the regimental lines of organisation.

The Principal Medical Officer had with him but one single printed copy of the new field hospital scheme, in the shape of rough
proofs of a pamphlet called "the précis," a name which no Medical Officer who served in the earlier days of the first Afghan campaign can ever possibly forget.

The Principal Medical Officer on his arrival sent for all the Medical Officers of Corps and Batteries, and directed them to bring their clerks with them to his office, and there and then he explained to them as concisely as he could, the entirely new scheme of field hospitals, and directed the Medical Officers to cause their clerks to set to work and copy out the printed scheme on manuscript from his single proof of the historic pamphlet.

This wretched delay alone caused much inconvenience, as every moment was of importance, and it is certain that few Medical Officers fully understood the drift of the new system at first. Practical experience, however, in a few weeks up the line of the Khyber soon taught them the good and the bad points of the scheme.

It became necessary, therefore, in accordance with this new scheme, in three days, and practically in the face of the enemy, to remove all the Medical Officers and all the medical subordinates from their battalions; to transfer all the native hospital establishments from their regiments to the little understood new creations called field hospitals; to hand over every grain of medicines, instruments and technical equipment, tents, books, documents, and to give and receive receipts on both sides; and finally to draw from the commissariat, barrack, ordnance, and transport departments, the various equipments needed for the same units, the very existence of which was unknown outside the medical department.

If ever there was a case of "swapping horses in crossing a ford," it was here, and one can never forget the hurry, the worry, and the trouble these sudden changes caused; and there is no doubt whatever they acted most prejudicially on the health of the overworked Principal Medical Officer, and that this anxiety, together with the wear and tear of his heavy duties during the campaign, so broke him down as to hasten his death, which occurred a few months after the second campaign was ended.

In the first place he had no secretary or orderly officer nor personal assistant whatever to assist him, that fatal blot in our divisional medical arrangements; and his wretched baboo clerks, admirable as penmen under a punkah at Allahabad, had no relish whatever for the rocks and robbers of Afghanistan, and were in no hurry to join him, and when they did they almost immediately afterwards went sick.
As the Principal Medical Officer had constantly to go and see General Officers and various other officials, and to make numerous inspections taking him away from his office, there was no official there to meet officers who called for orders, or to make reports or to ask for explanations, and the confusion was made worse than ever.

When after all this the Principal Medical Officer was seen with his own hands leading his camels from the transport lines, it seemed as if the cup was full and the last straw laid on the camel’s back; and it became evident that the very first duty of the Principal Medical Officer of a division in war time is to name at all hazards a secretary as his office staff officer, and a younger and more active officer as his orderly officer.

The Commanding Royal Engineer has a brigade major, the Commanding Royal Artilleryman of a division has an adjutant, but the work of both these officers is more circumscribed and much more within a ring fence than that of the divisional Principal Medical Officer, who deals with every regiment, every hospital, and every sanitary question in his division. Without assistance the work simply cannot be done, and it is essential to have the clearest conception of this matter.

Owing to the novelty of the system, at Peshawar there was the greatest difficulty in getting battalion and battery commanders to understand what their medical officers were doing, for in those days the phrase “field hospital” was not understood as it is to-day, and might have meant anything to the average officer, and indeed also to many medical officers. The Commissariat, the Transport, the Barrack Department, and the Ordnance Department, failed to comprehend what this new indenting body was, and it was not until 9 o’clock p.m. on the night before the advance on Jumrood, that the tents for the field hospital were drawn from the Peshawar arsenal.

All this hurry, this dire confusion, this wretched wear and tear of men’s lives comes, and will come, from not preparing in peace for war, and so absolutely assimilating our peace routine and organisation, and our war customs, that a soldier of any rank will glide from one into the other almost imperceptibly. How different it was with those perfect units, the frontier mountain batteries, and indeed with the frontier force regiments generally, and above all with the Guides, who go to war with as little trouble as one goes to a picnic. One learned from them, more than ever, the great lesson of the need of readiness for field work at all times, the be all and the end all of the soldier’s existence.
Let us leave the field hospital marching out on the morning of November 19th, 1878, towards Jumrood, and glance for a moment at some of the battalions concentrated at this time in and around Peshawar.

If it be not invidious, the palm for physical fitness and complete efficiency on the old long service Army lines might be given to Thompson's battalion of the 17th Foot, now the 1st Leicester Regiment. They had come down direct from the Murree Hills, and were in magnificent physical form. They were probably about the last of the long service battalions of that Army which was just then disappearing before the short service system, introduced a few years before, and better specimens of that old régime could not be seen; probably for weight and space occupied per man they were 30 per cent. heavier and broader than the younger men of to-day.

In India one must never overlook the fact of where the regiments are stationed before a campaign begins. The 17th Foot coming from the Murree-Abbottabad gullies were in excellent form; other battalions coming from malarious stations were often quite the reverse.

When the campaign was imminent, the Rifle Brigade and the 81st Foot were both quartered in Peshawar, and they also moved forward to the front. Both battalions had suffered much from the then deadly Peshawar fever, but the Rifle Brigade, though sorely tried, held bravely on to the end of the first campaign. The 81st Foot, however, in a health point of view, suffered severely. They literally went sick by half companies, and flooded the field hospitals.

The lesson of all this is most important to remember, for malarial fever, although it shows no death-rate, practically ruins a force, as the least exposure on picket or outpost duty induces ague, and the man must be taken into hospital.

The 51st K.O.L.I. (now the 1st King's Own Yorkshire Light Infantry) also marched into Peshawar at this time and were in excellent form. They had quite lately been on the Jowaki expedition, and in a measure had had their baptism of fire. In their medical inspection at Gandamak in April, 1879, when they were detailed for the proposed rapid advance on Kabul, they were found very fit indeed, having hardly any rejections.
The greater age of the regimental officers of the Army in those days was very marked. By comparison with the average age of to-day, there were many old men still commanding companies.

On the morning of the advance on Ali Musjid, the junior major of a European battalion engaged had then thirty-eight years’ full pay service. He had turned back from the advance on the fort to send in his papers to retire from the Service, saying; “I feel my position acutely, but I cannot go up the hill.”

His senior major was so old a soldier as actually to be commanding a brigade in the force.

In nothing is the Army more changed than in the age of the officers. On November 18th, 1878, Sir Sam. Browne had a meeting of staff and commanding officers in Peshawar to explain his proposed plan of attack on Ali Musjid. The Principal Medical Officer was present, and heard confidentially of the proposed turning movement by the Tartara route being decided on, and on the morning of November 20th the division as a whole concentrated at Jumrood, and pitched a divisional camp just in front of the then ruined Sikh fortress, now so completely remodelled. The field hospital also marched out and pitched its camp with the division. Even thus early in the campaign one could see how hopelessly unfit our heavy plains’ hospital equipment was for mountain warfare. In the first place, the tents, like those of all the European troops, were the huge E. P. pattern, heavy, cumbersome, and unfit for mule or camel carriage in the highlands. Again, all the equipment was packed in unwieldy camel trunks, difficult to load, difficult to unload, crushing a fallen camel to the earth, and in which it was impossible to get at any small article.

No mule or mountain equipment for field hospitals of any kind existed in India, and no one knew on what lines to advance to make a mobile field hospital for mountain warfare.

The changes made in our war hospital material since 1878 have been very considerable, and we may safely say that as far as type is concerned the broad lines of efficiency are laid down. Details, of course, in this, as in all departments, still remain to be dealt with. Want of experience, and want of careful thinking out one’s requirements in peace for war, will account for most of our troubles in 1878 on these heads.

At 6 p.m. on the night of November 20th, 1878, the turning brigades began to move out of camp, and any bystander would be particularly struck with the fitness of the 17th Foot.
A second body of troops left the camp about midnight on the same route, and at 7 a.m. on the next morning the main body, moving up through the Khyber mouth, got under weigh, and gradually moved away over the three miles of plain that intervenes between Jumrood and the mouth of the pass.

And now those in the field hospital were to feel how unready they were in equipment for active work, for that morning early Sir Sam. Browne rightly issued an order that no loaded camels were on that day to enter the defiles of the pass as they would encumber the column. As the field hospital equipment of every kind was entirely packed on camels, it had simply to halt on the Jumrood camping ground while the troops marched off to the attack.

A gallant soldier commanding a gallant regiment, remained behind that day to hold Jumrood. The soldier was Colonel Armstrong, and the men, his regiment, the 45th Sikhs, an admirable body, who did first-rate service during the campaign, but were destined soon after the war to lose, while still a young and active man, their gallant leader, a distinct loss to the Indian Army.

The disappointment and vexation caused by this order about camels was very great to the Medical Officers, who stood by and saw the troops go up to the fight with only a single Medical Officer with each battalion, and no bearer company, or any field hospital whatever.

Deputy-Surgeon-General Gibbons, the divisional Principal Medical Officer, remained behind with the field hospital at Jumrood, and in this act no doubt he was wrong, as the true place of a Principal Medical Officer is with the General on whose staff he is, so as to issue orders for the care of the wounded and the disposal of the sick.

The morning was thus passing away, and while eating out one’s heart with vexation at being shut out of the fight, it seemed that it would be possible to extemporise some ambulance aid for the division in front without using the camels or their cumbersome equipment.

It was accordingly suggested to the Principal Medical Officer of the division that it would be well to prepare loads of blankets, brandy, beef tea, and reserve dressings for the wounded, and pack the whole in doolies and so overtake the column.

The Principal Medical Officer readily assented, and, applying to Surgeon-Major Ramsbotham, who was in actual charge of the field hospital at the time, the writer obtained the necessary supplies,
as well as the help of a young apothecary to assist. There was, however, no escort, nor any arms whatever with the party, and moving out of the Jamrood camp lines, the rolling ground was rapidly crossed, only a few armed hillmen being met with, evidently on the look-out to see how the day was going, and we caught up the rear-guard of the division struggling up the stony track that forms the entrance to the historic Pass. The 6th Bengal Infantry that day formed the rear-guard, and applying to the Commander of the Guard, Captain Birch, an escort of a Havildar’s party was obtained, and we pushed rapidly along the column crowded in the narrow defiles, and were soon well to the front. Just below the Sherghai heights the party had to halt for a time to set the kahars at work to assist Captain Graves, who was in charge of the waggons of the elephant battery, and whose unwieldy vehicles were jamming in the narrow tracks. This well-known and popular officer died in the following July in Peshawar, in the interval between the first and second campaigns.

Some miles of gradual ascent along the winding road takes one almost suddenly out of the defiles of the Khyber on to the open plateau called the Sherghai heights. These are comparatively open and rolling hills from which one commands a good view of Ali Musjid heights and fort, and of the rocky cliffs that directly overhang Ali Musjid, and well away to the left when facing Ali Musjid run the green valleys which lead towards the Bazar valley. Wilson’s elephant battery was in action against Ali Musjid from a level space on the Sherghai heights, and at intervals a shrieking 40lb. Armstrong shell went flying over the intervening valley, and either struck against the stony profile of the fort, or dashed against the masses of living rock behind it, leaving a great white patch where it struck, and a few missing both fort and rock fell behind Ali Musjid in a gorge where a number of Afghan troops were under canvas, and suffered some loss from the fire. The fort itself presented a very low and almost indistinguishable profile merging in the grey rock on which it stood, and by which it was surrounded, and was in every way a difficult object for any artillery to hit. I/C Royal Horse Artillery was also in action from another part of the heights, and the Afghans were replying by cannon shots which came dropping in amongst the troops, and now and then rolling amongst the doolie bearers who were clustered on the heights. One brigade of our infantry was lining the heights towards the right looking from Sherghai towards Ali Musjid. This was probably Browne’s brigade, as the 51st were in that direction, while
Appleyard's brigade, consisting of the 81st Foot, the 27th Punjabis and the 14th Sikhs were more to the left, again facing towards Ali Musjid. Every one was waiting anxiously for the development of the turning movement by the brigades which had left Jumrood the previous evening, but hour after hour went by and there was still no sign. The brigades were at this time struggling with the increased difficulties of the route, and could not possibly appear on the scene. The short November day was already closing in, and the General, resigning all hope of the turning troops appearing on the scene, gave orders for a direct attack to be made by Appleyard's brigade on the sungah-crowned outlying heights that acted as a kind of rampart to the fort, and which were lined with Afghan riflemen. No one can positively say whether this attack was made by Appleyard's brigade as a whole, or whether the sepoy battalions alone attempted the assault.

The point in doubt is whether the 81st Foot were ordered to attack at the same time as the 14th Sikhs and the 27th Punjabis, or whether they were held in reserve to support the attack as it developed. It seems, however, that they did in part advance and were recalled. The accounts vary, so far as I am aware, but this I know, that no European soldier came back wounded from the assault, nor was any dead European soldier found on the hill-side next morning, so that it is evident the brunt of the attack did not come on them but on the native regiments of the brigade. These two regiments seem to have gone forward to the attack led gallantly by Captain Birch and Lieutenant Fitzgerald, and were received by a heavy rifle fire which killed the two named officers, wounded Captain Maclean of the 14th Sikhs, and caused casualties amounting to fourteen or fifteen killed and about forty wounded in the two regiments. As the divisional Principal Medical Officer was not on the field, and the party was independent of any regiment or corps, it seemed that it would be better to get nearer the front, and accordingly the bearer company moved down the sloping ground into the stony bed of the Ali Musjid river, and pushing along the level ground, reached the ground at the foot of the slopes where the assault was being made.

While still moving forward, Colonel Maunsell, of the Bengal Sappers and Miners, who was Commandant Royal Engineers with the column, came up and said the wounded of the attacking brigade were all coming down into the bed of the river, and in the most lucky manner they came down actually on the very spot where by the merest chance help had arrived. They were all Sikhs and
Punjabis of the 14th and 27th Regiments. The men came down direct into the bed of the river, but no reserves could be seen, nor was their regimental medical officer anywhere about, and it fell to the share of the Jumrood help and to that of Surgeon-Major Creagh, who was in charge of I/C Royal Horse Artillery, to look after them. I/C Royal Horse Artillery had moved down off the heights, and spent the night in bivouac in a sheltered defile opening up off the river. By absolute good fortune there were plenty of blankets, plenty of brandy, and other medical comforts, and in consultation with Dr. Creagh, an able officer since retired, the wounded men were cared for very thoroughly, and after dressing their wounds and giving them some brandy, covering them with blankets, and giving them some sleeping medicines, by 11 p.m. they were all at rest and slept fairly well during that long and anxious night. It must have been about 5 p.m. in the evening when the wounded began to come in, and shortly afterwards we were greatly surprised to see Surgeon-General Ker-Innes come down the side of the pass with Mr. Archibald Forbes and Mr. Simpson of the Illustrated London News, and descend into the river bed. There was now no chance of mistake as to who he was. He was dressed in the undress uniform of his rank, gold cap and cross-belt, and looked very spic and span indeed amongst the sombre khaki surroundings. He enquired at once how we came to be there, and what we were doing, and above all where was the field hospital, the child of his own creation. He then heard of the contretemps as to the camels; and how we came to be up in the pass. He was excessively put out at there being no field hospital on the field, gave some general directions about the wounded, and later lay down to sleep a few yards off on the hill-side.

The native wounded behaved splendidly, as they always do, and took their troubles with a light heart, Shábásh kuch parwá nahin was the burden of their cry, and they stood the pains of the dressing excellently.

There was of course the usual struggling to get to the doctor, and to try and draw the doctor to them, and there were, as there always is, a certain number of over-solicitous comrades, whose intense sympathy with the wounded entirely overbalanced their desire to return to the front and the bullets. These latter men were utilised as a protection against any prowling Afghans, and next morning we dismissed them to rejoin their battalions.

All through that anxious night, when none seemed to know what had really happened, nor what was the true state of affairs,
officers and orderlies came passing by the bivouac, and asking in vain where they could find the General, as they wished to make reports and ask for orders, but no one had any idea at all where he was, nor indeed that any attack had been made, until the wounded said that all their officers were killed, and even named Captain Swettenham of the 27th Punjabis, and Major Terry of the Borderers, attached to the Punjabis, as killed, mere reports which turned out to be false. The difficulty of finding the General Commanding at night time will always be a difficulty that needs to be specially guarded against, especially if night attacks now so much spoken of ever become realities.

In the early dawn the Surgeon-General came up, and ordered the wounded to be got back at once on to the Sherghai heights, and us to hurry up again to the front. "We are going to have warm work," said he, "an assault in force is ordered," and he evidently spoke with authority.

Accordingly the wounded were rapidly taken back up the bed of the river and up the sloping paths to the Sherghai heights, but there was no hospital there, nor any medical officer to take them over. There were, however, abundance of doolies and kahars left behind by the regiments, and transferring the wounded, the kahars were simply told to "Jao Jumrood," where eventually the wounded arrived without escort, or attendance of any kind on the road. Their arriving at Jumrood safely was another piece of good fortune, as a few days afterwards, when the tribesmen were on the war-path, they would in all probability have been cut up. At Jumrood they fell into careful hands and were looked after by the medical officers of the native hospital there, and it was afterwards said that when they saw the clothes of the wounded covered with candle grease which had dropped on them during the dressing the previous night, they felt what a troublesome thing it is to dress wounded by candle-light on the field.

Having freed the doolies of the wounded, the detachment hastened back again down the slope into the river bed, and it seemed that troops from every point were converging on Ali Musjid, and every one was full of excitement with the idea that the assault would be made in force and the place carried by storm, as it was said that the tribes were assuming a threatening aspect, and that Cavagnari insisted on prompt measures being taken to capture the place.

While hurrying along the bed of the stream towards the open space at the foot of the Ali Musjid fort, and expecting every
moment to hear the cannon begin, an officer in khaki came running from the direction of the fort, and crying out to all he met that the fort was empty and that the Afghans had fled in the night.

Hurrying onwards we at last reached the little white mosque of Ali that gives its name to the place, crossed the stream that runs at the base of the rock, and commenced to ascend the broken pathway that then led to the foot, where were also the General and his staff moving upwards towards the fort.

On entering the fort everything was found to be in complete ruin. The 40 lb. Armstrong shells had knocked the place to pieces, and the bastions at the angles were in ruins. In one of these a 40 lb. shell had burst, and four Afghans who had been sitting round a dish of pillau were smashed to pieces by the explosion.

Posteens in quantities, broken arms, cooking pots, and ammunition lay about in confusion, and twenty pieces of artillery were lying about in the fort and a certain number were in line at the foot of the hill.

There were a number of sick Afghan soldiers lying about, wretched looking men, evidently victims of the Ali Musjid fever, who had been abandoned when the garrison fled in the night by the Bazar valley and the hills on the right of Ali Musjid, looking from it towards Shergbai.

Of loot in the real sense there was none, and if one managed to get an Afghan knife, a Koran, a drum and drumsticks, and a pile of manuscript returns, which turned out to be the company accounts of the soldiers, one was supposed to be lucky.

Posteens could have been had in quantities, but distance lent enchantment to the view of them, and they were in a terrible state of filth. In the gorge behind the fort there was the Afghan encampment, into which some shells had dropped.

The masses of troops which had been converging round Ali Musjid for the assault were now concentrating on the bed of the river below, and for nearly a mile the place was crowded with troops, fires began to be seen, and preparations for breakfast were developing.

Many very fine mules were running loose about the place, which had apparently belonged to the Afghan mountain batteries, and although a few intelligent persons had annexed them, they were soon after compelled to hand them over to the transport department.

Some cavalry were sent forward up the pass, towards Landi Kotal, but the main body remained halting on the dry bed of river during the day. The bodies of Captain Birch and Lieutenant
Fitzgerald of the 27th Punjabis, were brought in off the heights where they had been killed. They had lain on the hill-side all night. It was at first intended to bury them at Ali Musjid, but wiser counsels prevailed, and the bodies of these gallant men were sent into Peshawar for burial.

While examining the bullet wound of Captain Birch, which was in the region of the heart, it was found that a locket containing a picture of his wife had been carried into the wound by the bullet.

The Surgeon-General sent round to the various corps and batteries to collect returns of the killed and wounded. The killed were about fourteen and the wounded between forty and fifty.

All through the day, people were anxiously waiting for the field hospital to arrive from Jumrood, but it never appeared.

The Surgeon-General (Ker-Innes) was particularly put out at its non-arrival.

That night we slept in the bed of the river, and on the early morning the troops began to move up the pass towards Landi Kotal.

The eagerly-looked for field hospital arrived during the night; it had bivouacked down the stream nearer the Sherghai heights.

With the arrival of the field hospital the separate existence of the temporary aid on the field ceased, and it reverted to the field hospital, where Surgeon-Major Davie, Medical Staff, was commanding, Surgeon-Major Ramsbotham and Surgeons Cornish and Ryan with others being with him.

A site for the field hospital camp was obtained on some level ground on the left bank of the Ali Musjid river, and there we formed a field hospital for the European sick of the entire division.

It should never be forgotten in choosing battalions in India for field service, that a regiment fully saturated with malaria is unfit for most campaigns, and it is quite certain in general experience, that a regiment which has suffered from malaria will also, in cold climates, very easily fall a victim to pneumonia.

When Sir Sam. Browne's main body moved on to Dakka, the 51st K.O.L.I. and the 6th Bengal Native Infantry remained behind to hold Ali Musjid, and for some time Wilson's elephant battery remained encamped in the open on the Sherghai heights. They were frequently fired into, and later on a company of infantry was sent up from the bed of the river to act as an escort for them.

The Army in those days was certainly far from being as ready for war as it is to-day. In dress, in equipment, and in inherent knowledge of military precautions in the field, it seemed distinctly untrained and unready by comparison with to-day.
Even at Ali Musjid one could see this. The camp was frequently fired into, and at first certainly little or no attempt at outpost or picket protection existed.

Over and over again the gunners who were employed in removing the Afghan guns from the Ali Musjid fort were fired at by tribesmen close by the camp, and the gunners were seen to quit the guns and try to reply to the enemy with carbine fire, while all the time two fine regiments were lying little, if at all, employed in the bed of the stream a quarter of a mile away. A company of infantry could have paralysed any such attacks had they been sent out, but in this, as in several other matters, there was want of initiative, or at any rate of right initiative, at Ali Musjid. A very brilliant episode, however, was the repulse of a bold attack on a picket of the 51st K.O.L.I. The picket was commanded by Lieutenant Johnston of the regiment, and the enemy were driven off.

The tribesmen were particularly bold in attacking convoys, and the road from Jumrood to Ali Musjid, and from Ali Musjid to Landi Kotal was entirely unsafe, several convoys being attacked, and men were killed in detail. The system of holding the line of road by permanent detachments scattered along it, as opposed to convoy escorts alone, seemed far preferable. For this duty second or third class troops do very fairly, and save enormous labour to the troops in general.

(To be continued.)