Echoes of the Past.

THE FIRST AFGHAN WAR, 1839-1842.

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In 1838 Lord Auckland, the Governor General of India, alarmed at the supposed Russian sympathies of Dost Mahomed, decided to invade Afghanistan and restore Shah Shujah, the evicted Amir, who was an exile in British India, a procedure which involved no uncommon risk, as, at that time, our most advanced depot was at Karnal, and the frontier line ran through Ferozepore, Ludhiana and Bhatinda. Between this and the Afghan passes lay an area of four to five hundred miles controlled by Ranjit Singh the ruler of the Punjab and the Amirs of Scinde, both very uncertain allies.

Following an agreement with the former a column of the Bengal army 10,000 strong was mobilized at Ferozepore on December 10, and marched by the line of the Sutlej and the Indus to Sukkur, which was reached in January, 1839. The sick and medical stores were carried in boats, which were later used to bridge the Indus. This column was followed by another of 5,000 troops of the Bombay army, which was landed at the mouth of the river, and 6,000 Indian auxiliaries under Shah Shuja. These were united at Quetta under Sir John Keane towards the end of March, forming a force of 15,000 troops and 79,000 followers. At the same time a small independent force of irregulars and Sikh allies, under the orders of a political officer, concentrated round Peshawar in the Sikh country.

The regimental medical establishment of the European regiments in India then, and for many years later, was very complete and self contained. Each battalion had a surgeon and two assistant surgeons, all three qualified and commissioned medical officers, a steward, an apothecary and a full menial staff, bringing the total to forty-eight. Hospital beds were provided at the rate of 12 per cent, and the 10 per cent of doolies allowed when on the march involved the employment of some 200 kahars. The medical stores and camp equipment took sixty camels for their transport. The Indian battalions had each one European medical officer of the Hon. East India Company's service, usually an assistant surgeon. The general

1 Quetta was described as "a miserable mud town with a small castle on a mound, on which was a small gun mounted on a rickety carriage."
2 The Apothecary seems to have corresponded to the present-day Assistant Surgeon.
3 This number had on occasion to be much increased. The 101st marched out of the old Anarkali cantonment at Lahore in the autumn of 1850 with 8,000 bearers.
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medical staff officers, comprising a superintending surgeon, field surgeon and storekeeper, were almost invariably found from the Company’s establishment. Wellesley had insisted during the Assaye campaign, thirty-five years before, that a reserve of junior officers should be supplied to staff any field general hospitals it might be necessary to form. If any were provided in the army of the Indus, their numbers were entirely inadequate. He had also ordained, in spite of resistance on the part of regimental commanders and their medical officers, that, on active service, sick unfit to march must be dropped, with proper precautions for their protection, in sick depots. But at this period it was customary in India, except when
dire necessity compelled, to carry forward the sick and wounded even in the face of the enemy rather than separate them from their regiments.

Doolie bearers were found by the Commissariat. Since Wellesley's time, their allotment in the field was entrusted to the superintending surgeon, who kept a proportion under his own control. He also carried enough medical stores to provide for a field general hospital, but it seems very doubtful if he had any personnel to staff it, menial or otherwise, without drawing on the regimental establishments.

Little military resistance was offered to the march of the columns through Scinde and up the Bolan Pass, though there was some trouble from Baluchis who hung around the line of march and cut up stragglers. There was the utmost difficulty in collecting supplies. The Bengal column was reduced to half and quarter rations and the situation of the whole force when concentrated at Quetta was still most precarious. Vast quantities of baggage were carried, much of which, owing to casualties among the transport animals had to be abandoned. There was a sick wastage of 20,000 camels.

The march of the Bombay column, two infantry brigades, a cavalry brigade, two troops of horse and two of foot artillery, has been described by Richard Kennedy the superintending surgeon. The hospital stores would have sufficed for a force four times the size. He had eight camels for his personal baggage; one of the brigadiers had sixty. Slipper baths of copper and block tin were among the loads. At Quetta he found one of the officers looking for a sideboard. His staff consisted of Dr. Pinkey the field surgeon and Dr. Don the deputy medical storekeeper. The transport of the sick as far as Sukkur was provided for by four flat-bottomed boats which held forty patients each, the field surgeon and two assistant surgeons being in charge. Doolie bearers accompanied the troops on the march. At Julalkote there were twelve cases of cholera and eight deaths, but the first part of the march seems to have been a healthy one. The men carried a weight of nearly sixty pounds. At Tatta, a small cantonment was marked out. The P.M.O. protested against the site, but was snubbed. He noted that the hospital records of the 26th Native Infantry, who remained in garrison there, subsequently showed 1,526 admissions and ninety deaths in six months. This was probably from malaria. At Sukkur, where the river transport had to be dispensed with, Dr. Don was left behind with the surplus medical stores. Here he opened what was called a depot hospital. In traversing the Bolan Pass the heat was severely felt and there was some increase in sickness. The thousands of dead camels which marked the track of the Bengal column are said to have poisoned the water, and no doubt the foul state of the narrow and restricted camping grounds contributed. The sick were carried in doolies, but in the Bengal column the superintending surgeon, James Atkinson, urged the adoption of camel

1 Dr. James Atkinson was a Persian scholar of much repute. He was for many years assistant assay master of the Calcutta mint and director of the Government gazette.
kajawahs as used by the inhabitants of the country. The appliance was described as a wooden frame about 4½ feet long by 3½ broad with a seat for two men, the sides being filled with gunny cloth. Each camel carried a pair and therefore four patients. Pads to obviate sore backs were found to be necessary and, as in our last Waziristan campaign, their careful fitting was found to be of supreme importance. In June ten pairs were authorized for British and five for Indian regiments, and proved a success.

The united columns left Quetta on April 7, and proceeding by way of the Khojak Pass, reached Kandahar on the 25th. Over a month was spent in attempts to collect transport. The men suffered greatly from the heat in their single fly tents, and several cases of fever, dysentery and jaundice occurred among the Bengal troops. On the lines of communication casualties from heatstroke reached alarming proportions. At Shikarpur, where in April the temperature rose to 120° in the tents, two officers were found dead on their beds “their bodies turning as black as charcoal.” In May a wing of a native infantry regiment escorting a convoy from thence to Quetta, lost 6 officers, 100 sepoys and 300 followers from the same cause.

When the Commander-in-Chief moved out of Kandahar on June 27, the troops were on half, and the followers on quarter rations. The ration of the latter seems to have been a nominal one; many subsisted on dried sheep skins and congealed blood, the refuse of the slaughter house. There was a failure of the spirit ration which was considered by many to be a blessing in disguise. Capt. Havelock noticed increased bodily power and resistance to disease as well as improved discipline. Dr. Atkinson attributed the remarkable way in which deep sword cuts were found to heal to the absence of the spirit ration.

On July 21 the whole force was camped outside Ghazi, which, contrary to expectation, was found to be strongly held. There were only three days’ rations in hand and the siege train was far in rear; there was therefore no alternative but to attempt an assault. This was fixed for the night of the 22nd-23rd the objective being the Kabul or north gate which, having been blown in by the engineers, was to be carried by parties of the Queens, 17th Foot, 13th Light Infantry and 1st Bengal Europeans.

The spirit of the troops was excellent. On visiting the regimental hospitals of the Queens and 17th Dr. Kennedy found that every man who could stand on his legs had joined the ranks while the rest had put on their uniforms and taken the place of the hospital guard. Each division had its main dressing station. Kennedy was assisted by his field surgeon Dr. Pinkey, Smith and Hunter, the surgeons of the two British Infantry regiments, and Chatterton of the Poona Horse. Assistant surgeons Thatcher and Cannon were with the assaulting troops; Watkins, Ranchard

1 The rum ration was two “drams” a day—apparently 8 ounces—and normally an unlimited amount of arrack could be got in the regimental bazaar.
of the artillery, and Grant of the engineers formed an aid post by the guns, which were massed about 300 yards from the point of attack. The field hospital tents of the Bengal division were pitched about a mile S.E. of the fortress. Here Dr. Atkinson and his staff awaited the outcome of the event. At 4.15 a.m. there was a tremendous crash. "In half an hour more as the darkness was wearing away," he writes, "we perceived a dhooly coming up to us, the bearers hurrying with the greatest speed. It contained a soldier of the European Regiment, and to our inquiry 'What news?' 'We have done 'em' was the ready and gratifying reply." As soon as the storming party were fairly inside the fortress, resistance collapsed. Our casualties were 17 killed and 165, including 18 officers, wounded, many of these being from sword cuts.

After the battle, Sir John Keane proposed to leave the sick and wounded in a general hospital in the town, but the superintending surgeons, who had already dropped portions of their field equipment at Sukkur, Quetta and Kandahar, found themselves unable to provide for such a contingency, so Dr. Pinkey and three regimental assistant surgeons were left with the worst cases, the rest, apparently about 250, being carried on in doolies. Fortunately little further resistance was offered, and Kabul was occupied on August 7.

A division of all arms was distributed between Kabul, Ghazni, Kandahar, and Jalalabad—the last having been occupied by a force of irregulars and Sikh auxiliaries under Lieutenant-Colonel Wade operating from Peshawar—the remainder, including most of the Bombay army, returned to India or took over the lines of communication through Scinde. Dr. Atkinson remained at Kabul as P.M.O., but was later relieved by Dr. William Duff. Dr. Kennedy accompanied his division as far as Sukkur where he left the force on promotion to a seat on the Medical Board. He received an appreciative reference in column orders, and published a departmental order of his own congratulating his officers on having won the approbation of higher authority and on the way their duties, professional and financial, had been performed. He was evidently a genial and popular person. He had strong views on the contagious nature of cholera, which he expounded in a pamphlet. Like others of his contemporaries, he yielded to the temptation to write occasional verse. Both he and Atkinson wrote descriptions of the campaign.

A part of the returning troops under General Willshire was diverted to deal with Khelat, which was assaulted by the Queen's and 17th Foot on November 13. On resuming the march, some of the column, including the 4th Light Dragoons (Hussars) and the Horse Artillery, passed through Bagh. The author of "Dry leaves from young Egypt" describes their arrival at Shikarpur on the 25th. "There was little of the elation of men returning from a successful campaign. Death in fact was busy in their

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1 James Atkinson. "The Expedition into Afghanistan."
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ranks. That dreadful scourge, the cholera,\(^1\) had made its appearance among them at Bagh. Dr. Forbes of the 1st Cavalry was the first victim, an officer much esteemed. From that moment the malady spread with frightful rapidity. In four marches they reached Janiderah. It was then no longer possible to bury those who died. The jungle and the roads were strewn with corpses. ... I rode a little way into the town and about the camp. Many Europeans were lying on the ground intoxicated. In front of the Agency they were digging a large pit, another outside the wall. They had thrown thirteen of the dragoons into one, and at least as many of the artillery into the other. At least a hundred died that night."

The British troops engaged in the operations of 1839 had a sick mortality of about 10 per cent. The hospital admissions were roughly 2 per head, and the prevailing diseases mentioned were fevers and dysentery. The death-rate among the native troops of the Bengal division was about one third of this. The units which suffered most were the 31st and 47th Native Infantry, who marched from Shikarpur by detachments in May, June, and July, and arrived at Quetta with inadequate clothing and bedding, when they went down with malarial relapses. There seems no reliable record of the health of the native troops of the Bombay division, but, from Dr. Atkinson's statements, it must have been at least double that of his own division. That officer did not think much of the medical arrangements of the rival army, and claimed a case mortality of 3.75 per cent for Europeans as compared with Dr. Kennedy's 6 per cent. Discipline throughout on the lines of communication was lax, there was little or no attempt at co-ordination, the needs of the troops and sanitation generally were badly attended to, and, as a result, sickness originated in the various staging posts. Quetta had a bad reputation. When the winter set in, no provision had been made for pallerasse straw, for hutting the men, or even for fuel. In Scinde up to the end of 1842 the British soldiers were crowded in low mud huts without doors or windows with the thermometer standing at anything up to 120° F. It is not surprising that far too much arrack was consumed. The amount of drunkenness was no doubt deplorable, no doubt also it was the cause of much ill-health, though by no means all it got the credit for. Considering the life they had to lead, and the food they had to eat, the deprivation of the daily rum ration would have inflicted a real hardship on the majority of the men, moreover the doctors recommended it as a protective against cholera. That alternative amenities might be provided to brighten garrison duty in the tropics was still only dimly realized. The regimental officers did their best, according to their lights.

\(^1\) The British army made its first acquaintance with cholera during the Pindari War of 1817, and at intervals during the next 70 years suffered from these devastating visitations which science was powerless to control. On the ship which brought Sir Charles Napier to Scinde in September, 1842, sixty-four out of 200 British soldiers died between Bombay and Karachi. The 86th (2nd R. Ulster Rifles) at Karachi in June, 1846 had 410 admissions and 238 deaths excluding several women and children.
and with their slender means, but there is no evidence at this date that
they received either help or encouragement from above.

When the Bombay division left Afghanistan the field hospital was
broken up, and most of the doolie bearers returned to India to be discharged.
The Kabul garrison settled down in cantonments outside the city, some of
the officers were joined by their families, others set up establishments of a
different kind within the walls. Unfortunately Sir John Macnaghton, the
envoy, totally underestimated the patriotic spirit of the Afghan people, who,
if they agreed in nothing else, united in resenting our occupation, and had
no opinion of Shah Shujah, whom we had placed on the throne. Our forces
were scattered in small garrisons, and harassed continually by Macnaghton
and his subordinates, who ordered them about on impossible military
excursions designed and directed by themselves. Relations between the
politics and the military were strained, and at the same time discipline
and moral deteriorated.

In November, 1840, the deposed amir, Dost Mahomed, surrendered, after
routing a small detachment sent against him in the Parwandara valley.
Among the British officers killed in the encounter was Dr. Percival Barton
Lord of the H.E.I.C.'s medical service, a most talented political agent on
the envoy's staff, who had charge of the operations. Throughout the
following year the storm gathered. The treacherous attitude of the Sikhs
threatened the communications with India. Nearer Kabul, the Ghilzais
rose, were suppressed, and rose again. On November 2, 1841, Sir
Alexander Burnes, the agent in Kabul, was murdered in his house. During
the summer a brigade under Brigadier Shelton, including H.M. 44th (Essex
Regiment), had arrived, and, at the time, another brigade under Brigadier
Robert Sale, containing the 13th (Somerset L.I.), was fighting its way
back through the passes and had reached Gandamak. Attempts were
made to recall it, but without success. On the 14th the Kohistanis in the
north fell on the Gurkha garrison of Charikar. Water failed, all but two
officers had fallen, and the remainder decided to try and break through to
Kabul. As they were preparing to break out, Haughton, the adjutant, was
attacked by a treacherous native officer, the gate was rushed, and general
confusion ensued. In the midst of the chaos Dr. Grant, the medical officer,
amputated the wounded officer's hand, and, having spiked the guns, took
command of the main body of the Gurkhas, while the remaining officer led
the rear guard. Eldred Pottinger the political officer and the adjutant,
both wounded men, went in front, and alone reached Kabul. Dr. Grant

1 Lord, at the time of his death, was an assistant surgeon of six years' standing. He had
served with irregulars under Captain Wade in the Khyber in July 1839, when he acted as
A.D.C., and received the thanks of the Indian Government. These young politicians, many
of them subalterns, were given a very free hand in dictating military policy, to the not un-
natural indignation of the military commanders. Lord's handling of troops certainly gave
grounds for criticism. He was killed in a cavalry charge. After the disaster of 1841 the
relationship between the general in the field and the political officer was properly defined.
and Ensign Rose kept a part of the garrison together till within twenty miles of the town when the detachment was destroyed.

By this time the insurrection had become general. Lieutenant-General Elphinstone, who was in military command, though a gallant soldier, was 75, an invalid, and had lost all power of initiative. The situation was allowed to go from bad to worse, and the garrison at Kabul was besieged in their cantonments. On December 23, Macnaghton, while engaged in negotiations for a capitulation, was murdered. It was finally agreed that the army with six guns should be allowed to march unmolested to the frontier on the understanding that the whole country should be evacuated, a heavy indemnity paid, and hostages surrendered. The first demand accepted was that all married men and their wives should provide the hostages, but the General protested to the political officer that he had no power to control the movements of the women. He was then persuaded to offer pay at the rate of Rs. 2,000 a month to those whose wives would stay with them. This was refused practically unanimously, and the demand was not apparently pressed by the Afghan sirdars. Six junior officers were handed over. On January 6 the sick were sent into Kabul. The medical officers were ordered to draw lots as to who should remain behind. The duty fell on Assistant Surgeons Campbell of the 54th N.I. and W. Primrose of H.M.'s 44th. The last, unfortunately for himself, exchanged with Dr. G. K. Berwick the embassy surgeon. The march commenced on January 7.

The units which marched out consisted of the 44th (1st Bn. Essex Regt.), 1 troop Bengal H.A., 5th Bengal Light Cavalry, 5th, 37th, and 54th N.I., detachment Sappers and Miners, the Envoy's bodyguard, 2 lissalas Irregular Cavalry, and some units of Shah Shujah's contingent. The whole numbered 4,500 troops and 1,500 followers with several women and children. Of the fighting men, 690 were Europeans. The 44th had their surgeon, John Harcourt and their two assistant surgeons William Primrose and William Balfour. The medical officers of the Company's service were the superintending surgeon, William Duff, Magrath, in charge of the Artillery, Cardew, Metcalf, Harpur, Bryce and W. Brydon, the last being medical officer of the Shah's contingent. Everywhere, except in the ranks of the 44th and of the Artillery, there was confusion from the first. The sepoys, already sufficiently demoralized, were numbed with with cold, and their line of march was disordered by the crowd of followers who broke their formation. The Ghilzais, who hung on the skirts of the column, looted the baggage and cut the throats of those that lagged behind. The same night Shah Shujah's contingent deserted. Ten miles were covered in the first two days, the snow was on the ground, the extremities of many of the native troops became gangrenous from frostbite, several were already dead from exposure. On the 8th, in traversing the

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1 The Political Officer had recommended that the horse cloths should be cut up to provide leg coverings for the sepoys but his advice was not regarded.
Khurd Kabul pass, three thousand were shot down or knifed by the Pathans, others gave up their arms without resistance and were clubbed on the head. Akhbar Khan, the sirdar, who had guaranteed the safety of the force, had undertaken more than he was able, or perhaps willing, to perform, but on the 9th he made the suggestion that the British women and children, including Lady Macnaghton and Lady Sale, should be handed over to his protection. They, with some of the husbands and one or two wounded officers, were accordingly surrendered, and, after months of wandering, though without maltreatment, rejoined the army. On the 10th, in passing a gorge, the remaining sepoys perished and, save the British and a handful of the 5th cavalry, no fighting force was left. The transport was all gone, the kahars had been massacred or died of exposure, and the khajawah camels had been carried off. A few wounded had secured cavalry chargers. Dr. Alexander Bryce of the Artillery was killed on this day. Magrath of the 37th was wounded while trying to rally some of the cavalry to rescue his patients who were surrounded by the Ghilzais. He owed his life to an Afghan to whose family in Kabul he had rendered some small service, and later joined Lady Sale's party. Duff, the superintending surgeon, had been severely wounded in the hand, which, during a short halt at Tezin, was amputated with a penknife. Here the last remaining gun was abandoned, and Dr. Cardew, who had been mortally wounded at the dip of the Tezin Nala was laid on the carriage to await death. The survivors pushed on by night. Duff, weakened by his injuries, fell behind and was cut down. On the 11th, Jagdalak was reached. The political officers had already been seized as hostages, and the Afghans now demanded that the General, who was a dying man, and Brigadier Skelton should be handed over. The latter had up to the present by almost superhuman effort managed to maintain some sort of military resistance. Brigadier Anquetil of the Shah's contingent was killed soon after, and the survivors were leaderless.

Some 350 men entered the Jagdalak pass. The far end was blocked by a barrier, and the enemy closed in behind. At this point Surgeon Harcourt of the 44th was killed. The barrier was carried, but only twenty officers and 45 British other ranks came through. A few of these, including Drs. Brydon and Harpur, with Balfour of the 44th, continued on the road towards Nimla, the remainder made a last stand on a little hillock just off the road near the village of Gandamak. An officer and a drummer survived as prisoners, the others, among whom was Primrose, the other assistant surgeon of the 44th, died where they stood. Of those that went on, Brydon, Harpur and four others reached Fatiabad, 16 miles from Jalalabad, where they were treacherously attacked by villagers. Brydon alone, wounded and on a dying horse, reached the town—the remnant of an army.¹

¹ Dr. William Brydon served with distinction in the Indian Mutiny during the siege of Lucknow. He received the C.B., died 1873.
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The siege of Jalalabad lasted till April 16, during which time the garrison never seem to have been very severely pressed. There was an Indian infantry brigade at Peshawar and some Sikh regiments, but the latter not only had no intention of advancing through the Khyber, but undermined the loyalty of the British sepoys. When Sir George Pollock arrived from India with reinforcements in February, he found the troops dispirited and mutinous; sickness was rife, and there were 2,000 men in hospital. He eventually forced his way through the pass and concentrated his forces at Jalalabad. Sir Robert Sale in his despatch describing the siege referred to the meritorious services of Surgeons Forsyth, Hare and Brown of the Indian Army and Assistant Surgeons Robertson and Barnes of H.M. 13th Light Infantry. Meanwhile General Nott at Kandahar not only held his own, but took his brigade into the field. Among his troops was the 40th Foot whose surgeon, J. MacAndrew, when at Deesa the previous year, had been congratulated in General Orders on having the lowest mortality among his patients of any regimental surgeon in India. He was now the S.M.O. of the Brigade. During the General's absence in March a strong attack was delivered on the depleted garrison, when ninety of the sick in their hospital blue turned out under the Quarter-master and gallantly defended the threatened gate. In May, Nott was reinforced by a brigade under General England including the Welch Regiment, which fought its way through the Khojag Pass. The garrison of Ghazni were compelled to surrender on March 6th.

At Jalalabad, General Pollock's movements were hampered both by want of transport and a fresh outbreak of sickness. The foul state of the camping ground, from which the men are described as dying by hundreds. He marched at length on September 7, and, after engagements in the Jagdalak Pass and at Tezin, reached Kabul on the 15th where he was joined by Nott. A few days later the prisoners of Lady Sale's party were recovered, with whom were Assistant Surgeons Campbell, Berwick, Magrath and Thomas Thomson, the M.D. of the Ghazni garrison; the sick left behind by Elphinstone appear to have suffered no harm. The Grand Bazaar was blown up, and on October 11, 1842 the two divisions set out on their return to India. With them went 2,000 miserable natives, survivors of the retreat, who had become beggars in the streets of Kabul, the great majority of whom had lost hands or feet from frost-bite.

To the medical student of this depressing and disastrous campaign, so damaging to our military prestige, certain features are sufficiently obvious. The horde of undisciplined followers who accompanied the army proved

Sir John MacAndrew, M.D., K.C.B., joined the army as a Hospital Assistant in 1809, and served in the 9th Light Dragoons, Royals, 14th and 40th Regiments. His war service included Walcheren 1809, Peninsular 1811-18, Afghanistan 1841-2, Maharajpore 1843, Indian Munity 1857-8, including the siege of Delhi and capture of Lucknow. He retired in 1858.
its bane in that effective camp sanitation was impossible. Their conduct moreover during the retreat contributed greatly to the panic which beset the Indian troops. The fact that it is uneconomical to allow enrolled public followers to die of exposure among the frontier hills owing to inadequate clothing seems hardly to have been realized till Sir Frederick Roberts called attention to it during his campaign thirty-seven years later, and it was another forty years before the matter was efficiently dealt with. The lines of communications as usual provided the source of much sickness. Dysentery was prevalent throughout, and conditions at Quetta and Jalalabad were deplorable. The staff organization in Scinde was sketchy, if indeed it could be said to exist. Efficient central control could have obviated much of the mortality from heatstroke among the detachments marching up. Some of these problems still recur, though perhaps in a less acute form. We now at any rate have the staff organization to deal with them if only it is properly employed.

MEDICAL OFFICERS SERVING WITH BRITISH TROOPS IN AFGHANISTAN, 1839-1842.

Sir John Keene's Army.

Superintending Surgeons of the whole force: Richard H. Kennedy and James Atkinson (H.E.I.C.'s Service); 4th Light Dragoons (Hussars), Assistant Surgeon John Stewart Graves; 16th Lancers, Surgeon William Ramsay White, Assistant Surgeons, John Strange Chapman, M. J. Macaline Ross (Medical Storekeeper Bengal Column); 2nd Queen's, Assistant Surgeons Robert Home Alston Hunter, W. E. Hibbert (died); 13th (Somerset L.I.), Assistant Surgeons John Robinson, George West Barnes; (17th Leicestershire Regt.), Surgeon Alexander Hamilton (died), Assistant Surgeon James Smith; 1st Bengal Europeans (Munster Fusiliers), Surgeon John Paton (H.E.I.C.'s Service), R. M. M. Thomson (do. Field Surgeon Bengal Column).

Kabul Garrison, 1841.

Superintending Surgeon William Duff (H.E.I.C.'s Service, killed); 44th (1st Essex Regt.), Surgeon John Harcourt (killed); Assistant Surgeons William Balfour (killed), William Primrose (killed).

General Nott's Force.

40th (1st S. Lances), Surgeon John MacAndrew (S.M.O.), Assistant Surgeons Henry Mapleton, Eneas Mackintosh Macpherson; 41st (Welch Regt.), Surgeon William Wilkins, Assistant Surgeons Arthur Charles Webster, William Home Fairbairn, David Stewart.
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General Pollock's Army.

Superintending Surgeon W. S. Stiven (H.E.I.C.'s Service); 3rd Light Dragoons (Hussars), Assistant Surgeon, Nelson Dartnell; 9th (Norfolk Regt.), Assistant Surgeons Robert Harthill, William Harvey; 31st (1st East Surrey), Surgeon Henry Hart.

Hon. East India Company's Service.

At least 13 deaths occurred among the Company's medical officers. P. B. Lord, political service, killed at Purwandara, G. M. Grant at Chare-kur, W. Duff, E. R. Cardew, A. Bryce (Horse Artillery), F. R. Metcalf (5th N.I.), and E. T. Harpur (5th Cavalry) in the retreat, J. Brickwell in the Bolan Pass, 1842. The following died of disease: Surgeon A. Forbes (1st Cavalry) from cholera, J. Halloran (Bombay Foot Artillery) from heat-stroke, J. Walker (42nd N.I.), Carlow and Baines, the last two in Baluchistan.

Causalities, European Troops, 1839.

<table>
<thead>
<tr>
<th>Strength ranks</th>
<th>Admissions for disease</th>
<th>Deaths from disease</th>
<th>Killed</th>
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<tr>
<td>16th Lancers</td>
<td>468</td>
<td>820</td>
<td>46</td>
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<tr>
<td>2nd Queens (Royal West Surrey)</td>
<td>568</td>
<td>1,342</td>
<td>74</td>
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<tr>
<td>13th (Somerset Light Infantry)</td>
<td>562</td>
<td>1,209</td>
<td>70</td>
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<tr>
<td>17th (Leicestershire Regiment)</td>
<td>566</td>
<td>769</td>
<td>55</td>
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<tr>
<td>1st Bengal Europeans (Munster Fusiliers)</td>
<td>566</td>
<td>1,176</td>
<td>20</td>
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This gives an admission-rate for sickness of 199 and a death-rate of nearly ten per cent. The figures for five native infantry battalions of the Bengal Army work out at 168 and 3½ per cent.

A Parliamentary Paper (1846 (248), xxxi, 377) was published, showing that after the first year of occupation the sickness and mortality among the troops in Seinde were very high. The Queens and the 17th were in garrison there in 1840, and had 17 and 55 deaths respectively. The following year the 22nd (Cheshire Regiment) had an admission-rate of 3,057 per 1,000, and a death-rate of 178. The average annual death-rate for Europeans, all India, 1831-1856, was 57½ per mille.

Authorities.

Hough, Major W. "Narrative of the March of the Army."
Kennedy, R. H. "Narrative of the Campaign."
Atkinson, J. "The Expedition into Afghanistan."