

# Medicine

By Colonel Donald D Beard AM (Retd)

## Down Memory Lane

*necessity, invention and miracle cures in the Korean War*

From the bitter cold of winter through to the tropical heat of summer, treating troops during the Korean War required ingenuity, says Colonel Donald D Beard AM (Retd).

### The war starts

The 38th parallel in Korea was lit by flashes of artillery fire on 24 June 1950. Seven North Korean infantry divisions supported by a brigade of Soviet tanks and 100 aircraft smashed through the frontier and swept down the main road towards Seoul. The President of South Korea, Dr Syngman Rhee, telephoned the US President, Harry Truman, for help. The United Nations had an urgent meeting for what was apparently a breach of the peace.

I was in Japan preparing for my return to Australia when rumours of the conflict started to spread through the units of the British Commonwealth Occupation Force. Before long I had volunteered to go to Korea and my return to Australia was cancelled. Australia had committed troops together with the rest of the British Commonwealth and other nations including Turkey, Ethiopia, Greece, France, Thailand, India, Norway and Italy.



The first Australians into Korea flew the mustangs of 7 Squadron, RAAF. They were soon followed by the Royal Australian Navy and the Army.

By late September 1950, the North Koreans had pushed their way south, almost to Pusan, around which a

perimeter was formed. It was from this perimeter that the UN, led by McArthur, broke out and pushed forwards, just as rapidly as the North Koreans had pushed south.

The UN fought its way up through Seoul and over the 38th parallel, the Australians swept northwards into the Winter, almost to the Yalu River, at the border with Manchuria.

At this stage, I was stationed at the hospital in Kure, Japan. Australian casualties were brought to Iwakuni, Japan by the RAAF and were then sent 40 miles north by ambulance train to Kure. I realised that, at 25, I was inexperienced to manage the increasing complexity of the injuries I was seeing. In Australia, Bill Hughes (later Sir Edward) had just returned from surgical training in the UK and was 'invited' to volunteer for Korea. He was on the plane three days later. Australian casualties rapidly increased, with gunshot wounds, burns and a few peculiar illnesses.

When the RMO, 3RAR, became sick and was evacuated I was suddenly precipitated into the war. I left Iwakuni by RAAF Dakota at dawn. It was beginning to snow. I was frightened for what lay ahead. I was cold and had a king-sized hangover from my farewell!

### In Korea

I eventually found 3RAR in the chaos of refugees, retreating armies and uncertainty. Very quickly I realised that I was no longer on my own, but in a strong, solid unit, where I felt safe.



Winter had set in with a vengeance, with wind, snow, ice and temperatures falling to well below freezing. Vehicle radiators were filled with anti-freeze but still had to be run for 10 minutes every hour. I kept syringes and a few instruments in alcohol but then the alcohol froze.

The depths of the Winter had forced the war to slow down, but I was still treating large numbers of illnesses and injuries that had been neglected earlier – the occasional gunshot wounds, joint injuries from falling on the ice and cold injuries, of which I had little experience. I was soon to learn that the best treatment was prevention, with constant movement of the feet and hands, preferably protected by woollen socks and gloves. The problem at the end of a long patrol was the sweat around the feet freezing into a block of ice. The incidence of frostbite rose rapidly. I was asked how to recognise it. I always said, by the time you recognise it, it's too late. The toes were the first affected, becoming painful, then numb, then waxy, then dark.

### Miracle treatments

Drugs and dressings were inadequate. I had to improvise by mixing jam and aspirin for sore throats. Aspirin really was the wonder drug. Then there was my miracle treatment 'Barbasol'. This was really a brush-less shaving cream, which was rendered useless for this purpose because of the cold. It did, however, contain some lanolin and so I used it for all skin conditions and muscle injuries. I even used it for early frostbite by massaging it into the toes. The troops did not realise what I was using because I had removed all the labels. After some

weeks they discovered me and, from that time, I was known as 'Barbasol Beard'.

I insisted on troops shaving but snow had to be heated to produce water and only a couple of inches of face could be shaved before the razor was pulling off ice.

Medical supplies became shorter and I had to improvise further. Lard was used as an alternative to Barbasol for skin diseases and for massaging impending frostbite. Carb soda was used for dyspepsia. Diarrhoea was not a great problem. I think, perhaps, the buttocks were too frightened to expose themselves to the snow!

I decided to go out into the trenches to help the company officers to boost morale. Spirits were falling for a number of reasons: the weather, inactivity, concern about the next attack and the fact that the newspapers in Australia were making little mention of the war. I went from trench to trench and talked to the soldiers about their problems in Korea and at home. It was here that I learned about the feelings and emotional problems of men and it has stood me in good stead all my medical life.

In February the days lengthened and the order was given to advance, partly by vehicle and partly on foot. The RAP was on our backs. I kept drugs in my inside pocket to stop them from freezing. There were numerous battles and casualties increased but the soldiers were occupied and their depression from inactivity lifted.

### Evacuating casualties

Evacuation of casualties was difficult. On one occasion, a company attacked down a hill and up the other side. It had been planned that the Argyll and Sutherland Highlanders on our flank would open a road to permit evacuation of the casualties. Unfortunately, strong resistance prevented this. I dressed and splinted the casualties as well as I could and decided to evacuate them over the snow-covered hill. On many occasions, the bearers and the casualty fell in the snow. Two patients with gunshot wounds to the femur did not survive the eight-hour carry because of shock.

Occasionally, there was the luxury of a helicopter but they could not operate at night nor during inclement weather and it could not lift above 1500 feet. This made it almost impossible to airlift casualties because of our position in the mountains. The casualties were evacuated by stretcher jeeps of the 60th Indian Para Field Ambulance to the

American MASH, and then by plane to the Australian Hospital in Japan.

Finally, I fell sick with a fever, cough and haemoptysis. Blood goes a long way in the snow. I gave in. I managed to contact the Indian Field Ambulance and a replacement Medical Officer was sent up and I was evacuated to the MASH. They were overwhelmed by casualties and too busy to be worried about someone with a bit of a cough. Fortunately, I had some auroemycin in my pocket. It was very good for infections but not so good on the white cells. When I started to recover, I went to the Indian Field Ambulance where I was treated with rum and curry which would fix any respiratory problem! The Indians gave magnificent medical support to the 27th Commonwealth Brigade, including 3RAR. I keep in touch with them and have visited the headquarters in India. The Commanding Officer, Colonel Rangaraj, recently celebrated his 80th birthday with a parachute jump.

I was back in the Battalion in time for the April advance. There were occasional cases of a peculiar disease, with fever, ankle oedema and haematomas. I was perplexed. Later that year, I was able to investigate and publish what had been an outbreak

of acute haemorrhagic or Manchurian fever which had a mortality rate, due to renal failure, of about 12 per cent.

About once a month, the rations would include a bottle of beer. By the time it arrived in the late afternoon it would be starting to freeze. We would stick it in a sock and sleep with it all night, drinking it at first light before it froze.

## Battle of Kapyong

On 23 April 1951, we were in corps reserve and preparing to celebrate Anzac Day with the Turkish Battalion when we were suddenly called forward to counter the Chinese Spring offensive. The Battle of Kapyong was upon us. During a period of two days, the Battalion had killed and wounded about 100. But they did not give way and, as a result of their magnificent action, were awarded the US Presidential Citation. We were then able to gradually fight our way forward again.



## New challenges

With the coming of summer, various subtropical diseases appeared, including malaria and a variety of intestinal parasites. Fortunately, the discipline for malaria prophylaxis in the Battalion was excellent.

Various inoculations fell due. Included was an injection for Japanese B encephalitis. The troops could not come out of their positions, so I left Battalion headquarters with my sergeant, a supply of serum and a billy can of needles and syringes which I had to boil after each use. Unfortunately, the first batch of serum had been cultured on mouse brain, and this caused some encephalitis in itself. It was changed to culture on chicken embryo.

There were few reinforcements, so every effort had to be made to retain the fit members of the Battalion. The great majority of the troops were magnificent and rarely reported on sick parade. Of the others, I had to determine without any investigations who should be evacuated and who should remain. It was tremendous training for a young doctor.

Eventually came the time for me to return to Japan. I felt humble and proud to have played a part in the medical care of a Battalion of magnificent soldiers, both young and old. They had responded to a call from the United Nations to assist a foreign country of which they had no knowledge but were under severe attack. I admire them and will never forget them. For myself, I think it made me a better doctor.

