

ARTHUR GLENN MacBAIN

Experiences as a Prisoner-of-War in the Far East, World War 2

Interviewed by  
Charles G. Roland, M.D.

13 April 1986

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[Material within square brackets was added by Mr. MacBain at a later date. CGR]

Charles G. Roland, MD:

This is Chuck Roland interviewing Mr. Arthur MacBain, at the King George Hotel in San Francisco, on Sunday 13 April 1986.

Mr. MacBain, would you just tell me about your background, who you are and who your parents were, and a little about your early years?

Arthur Glenn MacBain:

Okay. Being a native southern Californian, of course, born here in this state, I went to school all over the state. My father was in the oil business, and we were in school probably ten months at a time. Always a new school. Then finally he expired, and my mother settled in Glendale, where the family had lived for eons. I went through Glendale High school.

Then, during the depression, things got bad, and I joined the navy in 1935. I did my first four years aboard a cruiser, a battleship, and then finally transferred to the naval hospital in San Diego, where I went through Hospital Corps school.

Finished my four years, came back to San Francisco, worked for a while at Benetar's Drug Store, on Fourth and Market, and then there were rumors of war and so forth, so I re-enlisted, and was sent to the Far East.

I commenced my duty at the old Canacao Naval Hospital in Cavite.

C.G.R.:

Sorry, what's the name of the hospital?

A.G.M.:

Canacao Naval Hospital in Cavite, the province of Cavite.

It's across the bay from Manila. Then I was transferred to Manila and the Walled City, where Dr. Epstein and I held outpatient clinic; I was more or less, you might say, a physician's assistant. [My first duty station in the Philippines was at the Canacao Naval Hospital in the Province of Cavite. Then I was transferred to USN Dispensary in Manila. It was located in the 31st Infantry barracks in the Cuartel de Espana within the walled city. (1988)]

From there the rumors got a little stronger. Dr. Epstein got transferred to the cruiser [USS Houston].

C.G.R.:

Do you remember his first name?

A.G.M.:

Dr. Epstein?

C.G.R.:

Yes.

A.G.M.:

Abraham.

Fine man. Oh, he was a great man.

Then I was transferred to the submarine squadron on the Canopus [USS Canopus, AS-9]. Then the war broke out. We kept dodging around Manila Bay, dodging the dive bombers, and finally wound up in Mariveles Bay, at the tip of Bataan.

The submarines that we had at that time were the old World War I S-boats. We serviced them, their last servicing, and they made off for Australia, along with the P-boats, the Pickrel, Permit, Pike -- that type of vessel. Then the remainder of the time we serviced army vehicles -- half-tracks, field artillery,

that sort of thing. We primarily, at that time, then, became a floating machine shop for the army and the navy, supporting them.

Bataan fell, and we were all transferred to Corregidor, much to the chagrin to our commanding officer, who had set up our 40-foot motor launches with sails, and we were going to go to Australia.

C.G.R.:

Ah, yes.

A.G.M.:

But General Moore said "No," that we had to report to Corregidor as a ship's company. We were all sent there. First couple of days was really a schmozzle, no one knew anything -- where to go, what to do. Finally, the pharmacist's mates wound up with the Fourth Regiment from Shanghai, the Fourth Marines.

C.G.R.:

As a pharmacist's mate?

A.G.M.:

Yes. A pharmacist's mate. Combat Corpsman.

C.G.R.:

I mean, they didn't try to turn you into a rifleman?

A.G.M.:

No, but we were armed on Bataan.

C.G.R.:

Yes.

A.G.M.:

Our fleet medical officer wound up on our ship as our medical officer. He suggested very strongly that when we went on

walkie-talkie patrol on Bataan, that we'd not wear a Red Cross brassard. It made too fine a target, so we were all armed. It is a fact that the Japanese did not primarily recognize the Geneva Convention. I believe that's a fact. I don't -- I'm not quite sure, doctor.

C.G.R.:

Yes. That's one of the great debates. Legally, they had not signed the Treaty, and did not. They said they would adhere to it, and they certainly did not, a great deal of the time.

A.G.M.:

No. They did not. We lost many army corpsmen because of the brassard. They'd pick off the corpsmen and the officers.

Anyway, having injured myself evacuating Bataan, three or four days later I wound up in what they called the Navy Tunnel, which was operated by the Navy Communications Center, and torpedo repair, that sort of thing. The doctor put me in bed for a while, until my knee got where I could walk on it. Then the doctor and I were transferred to the army hospital, Fort Mills Station Hospital, that's on Corregidor. The hospital itself had expanded into Malinta Tunnel, to multiple laterals. Now I was detailed to -- and I say this with tongue in cheek -- a "convalescent ward," where any one of the patients, had it been a regular hospital, would have been confined.

Then, towards the end, when we knew that we were going to be captured, the administrative officer came down to the unit, relieved the army captain, who was a nurse, and I was placed in charge of the unit, acting as head nurse of that unit. That's what happened up until the time that we were captured.

C.G.R.:

Right.

A.G.M.:

At first the Japanese did not pay too much attention to the patients. I would say a week or ten days, then they started discharging patients with suppurating wounds. Just a mess! We were put into an old fish market in the village, what they called Bottom Side, Corregidor. Where the natives had lived, prior to the outbreak of the war. It was there that I set up more or less a small infirmary, to try to get these fellows back on their feet, if possible. At the same time, we had to haul scrap iron during the day, so taking care of patients was after-hours.

C.G.R.:

I see.

A.G.M.:

Another fellow by the name of George Raby Dixon, who was the Chief Petty Officer, Chief Pharmacist's Mate, did a lot, too, to lend a hand. But he wasn't primarily interested in that.

[Tape turned off]

C.G.R.:

Please go ahead.

A.G.M.:

Right-o. We were there for about three months, or four months, and then I came down with dengue fever, which is a mess. I don't think anyone has ever died from dengue fever, have they doctor?

C.G.R.:

Well, I can't say they haven't, but it's not normally a sickness that....

A.G.M.:

Makes you miserable.

C.G.R.:

Yes. Tell me how you felt having it; what does it feel like to have this disease?

A.G.M.:

Dengue fever? Horrible. You are as weak as a kitten. You can hardly lift anything. You're just in constant fatigue -- constantly fatigued. I thought I was getting prematurely old at the time, you see.

Then they transferred us from that fish market, what they called the Bottom Side, to a place they called Middle Side. These are army terminologies. They were on Corregidor where they had barracks.

There they kept all of the sailors from the Canopus together. My master diver, myself, some of the storekeepers, and whatnot, we were the scrap-iron team. We started offloading scrap iron, taking off the railroad rails, and the copper wire from the electric trains, and that sort of thing. Ornamental shells were all exported back to Japan. We did that for about ten months.

Oh, and during that time, just by way of interest, if it's interesting at all, the attitude of the Japanese guards -- The first ones were....

[Tape turned off]

During this campaign of stripping the island of metal, we had some -- finally we got some Formosan guards, from Formosa [now Taiwan]. The front line troops moved on. There were times when we thought these people were really the dregs of the army.

C.G.R.:

The Formosans? Yes.

A.G.M.:

Formosans. Some of them we actually thought we were a little psycho. Homosexuals. You name it. There was a real cross-section of ding-dings. Really weird. You never could anticipate what reaction they might have, which I found out very quickly when one pushed me off the 15-foot retaining wall, and I broke my arm. Of course, we had no x-ray or anything. Dr. Glusman put it in a cock-up splint, and apparently it was all right. Everything healed.

About that time, too, we were transferred back to Bilibid Prison for further transportation to the main prison camp in Cabanatuan.

C.G.R.:

So you were on Corregidor roughly how long, before you left the island?

A.G.M.:

About a year. A year.

C.G.R.:

Ah, I see. So it would have been....

A.G.M.:

Not quite a year. About ten months, or eleven months.

C.G.R.:

What, about the end of '42, or, no, or early '43 then?

A.G.M.:

Yes. '43.

C.G.R.:

When you left to go to Bilibid?

A.G.M.:

Yes.

C.G.R.:

Yes. Okay, I just wanted to keep some chronology here.

A.G.M.:

Yes, right. I spent a few days, I don't know, it must have been a week or two weeks in Bilibid Prison. Dr. Sartin, who was the Commanding Officer of Bilibid -- it was primarily still a naval hospital, because the entire staff was billeted at Bilibid. He tried to make certain demands upon , which you'll find at the end of....

C.G.R.:

Of the records, yes.

A.G.M.:

Keeping the naval hospital as a unit under the Geneva Convention as being non-combatants, and being recognized as a functioning unit. Then he tried to keep all the Hospital Corpsmen there.

C.G.R.:

How did he succeed in that?

A.G.M.:

Well, he didn't quite. That's why I wound up in Formosa.

This chap I was telling you about, George Raby Dixon, was one of the -- well, to give you a sailor's expression, they used to refer to him as "the blanket man," or "the phantom of the foc's'le." He was a homo. Dr. Sartin did not want him in the unit. Consequently, a chap by the name of Bradley, myself, Dixon, were all transferred up to Cabanatuan, to work in the fields. But when I got up to Cabanatuan, my ship's doctor, Dr. Max Pohlman (he's an ophthalmologist, or he was not an ophthalmologist, but ENT, neck and ears) and his friend and consultant and good buddy, was Dr. Andrew Wilson, an ophthalmologist from Los Angeles....

C.G.R.:

Yes. I've corresponded with him.

A.G.M.:

Oh, you have? Warren Andrew? Yes. Good man. Oh, tops! Well, Dr. Wilson found out I was coming up, so he arranged to have me detailed to his eye clinic in the -- what was then the army hospital, under a Col. North. So I spent the next couple of years working in the eye clinic with Dr. Wilson.

C.G.R.:

At Cabanatuan.

A.G.M.:

In Cabanatuan. Right. Also I was his scrub tech. We did iridectomies, and enucleations, and whatnot.

C.G.R.:

Could you tell me something about the facilities that he had to work with?

A.G.M.:

Very scarce. We had to manufacture a lot of our own. The name slips me, doctor. The peripheral vision -- the ones that were made out of a barrel hoop. This way and this way, and then just used a wand to....

C.G.R.:

I can't think of the name of it right, either, but I know what you mean. A perimeter.

A.G.M.:

Right. Well, he did quite a bit of research at that time, too, and kept pretty fair records. We would chart the corneal scars, because of the avitaminoses that the men were suffering from. I recall one man who was a warrant officer, Mr. English; I saw him once after the war. He was legally blind, and needed a big magnifying glass to see anything. Poor guy. Anyway, I found that really interesting, working with Dr. Wilson.

C.G.R.:

Yes, I'm sure. How about things like anesthetics? Were there any problem with that?

A.G.M.:

Oh yes. We had cocaine, and ophthalmic pellets. Not a big supply.

C.G.R.:

No. No.

A.G.M.:

Then we could only operate at night, when they started the generator. Couldn't operate during the daytime. they wouldn't start the generator -- the Japanese -- because of the fuel.

C.G.R.:

How about aseptic technique?

A.G.M.:

Well, we had one corpsman. [laughter] He was an army kid, not very well qualified. His job was to shoo the flies away from the field, with a switch, a paper on a stick. To keep the flies off the surgical field. No screens.

C.G.R.:

No screens.

A.G.M.:

Amazingly enough, we did some elective surgery on strangulated hernias, that sort of thing, and do you know, doctor, there were no infections?

C.G.R.:

Is that right?

A.G.M.:

Isn't this fantastic? You ask Doctor Wilson. He could give you more on that than I can, but it was -- well this Dr. Glusman, I think it was, he did some surgery too, along with Dr. Hewlett, Capt. Hewlett. Again, it was just that...the sailors and the soldiers were pretty good. They would find medicine and in revettments or bivouac areas, and they'd bring it in, no matter what it was. So we did have some. This constituted most of our supplies.

C.G.R.:

Did you have gloves, and masks?

A.G.M.:

Yes. A few of those.

C.G.R.:

There was a supply of those kinds of things?

A.G.M.:

Yes. They used them very, very sparingly.

C.G.R.:

Okay. Please go ahead. You were going to go on from Cabanatuan, perhaps, when I interrupted.

A.G.M.:

Yes. That was in '44. Oh, you wanted me to mention something about morale, doctor.

C.G.R.:

Yes, please.

A.G.M.:

Now. I don't know if you've talked to anyone from that camp recently or not, or whether they'd have even mentioned it, but the most humorous thing that happened, I felt, was around the latter part of '44. Some of the fellows that were on wood-cutting details would go out by the Bongabong River and bring back wood to the camp. They found -- actually found -- on the ground, .45-caliber cartridges, marked Springfield Armory, 1943. Now, how did they get there? Either the guerrillas or rangers or whatever.

C.G.R.:

Somebody must have been dropping ammo, or....

A.G.M.:

To let us know they were there. Now. Everybody became so hyper, they became so elated, and the Japanese became so

depressed, that the camp commandant put out an order that no prisoner would converse with a Japanese soldier, except in the line of duty. Their morale was going down, and ours was skyrocketing. We had them so depressed that they were about ready to throw down their arms. Really. It was just fantastic. I think Dr. Wilson would remember that, quite well.

C.G.R.:

How about before that? How was morale, say, through '43?

A.G.M.:

Okay. You lived from 4th of July to Christmas. You always had a target date. "Well, if we're not liberated by the 4th of July, then we'll set it up for Christmas."

C.G.R.:

Yes.

A.G.M.:

It was that sort of thing you almost had to have.

One thing, I think, about the men then as compared, say, to what I've read, and the few people I've talked to, about Vietnam -- a whole different group of men with a whole different philosophy, if you will. They believed in their country. They really had more of an idea of what the Japanese were up to, particularly the sailors in the Asiatic fleet. They knew the Japanese, and they witnessed the Japanese shelling in Shanghai in 1938. They knew the Japanese were in Mukden, and in the Rape of Peking [sic, Nanking]. They weren't totally frightened, but they realized the Japs were good soldiers; that they were not the comic strip Japanese chap with the rifle up over his head and big

horned-rimmed glasses, and buck teeth. You realized very quickly that these were damn well-trained soldiers. I think most of the men -- there was that camaraderie among the men, all for one type of thing. One for all. There wasn't this "To hell with you!" type of thing.

C.G.R.:

There must have been exceptions, though, surely. Were there bad apples in the group, would you say?

A.G.M.:

Yes. Yes, but I didn't witness it among the sailors. John David Provo, you've heard of him -- the army corpsman?

C.G.R.:

I think so, yes.

A.G.M.:

That was a "Buddhist priest" who had studied at the University of Tokyo, before the war. The war was coming, and he went to the Philippines and then was inducted into the army -- draft notice, type of thing. Caused one of the dental officers to be shot. Was hounded by the FBI after he got home, etcetera. I was in one unit with him for a short while. He was a typical pseudo-intellectual. Homo. Really weird.

C.G.R.:

Was there a lot of homosexuality?

A.G.M.:

[laughter] Yes. Yes. They came out of the woodwork, doctor.

C.G.R.:

Yes. I would assume that there would be, but....

A.G.M.:

The only ones I personally knew were a marine by the name of Beauregard, who was a corporal, Fourth Regiment. Nicknamed "Queenie." "What'd you join the Marine Corps for, Queenie?" "Oh, to be where all the men are."

Then there was a Chief Yeomen, Teddy Brownell, and I can use these names openly -- it's a fact. Everybody knows it, and these men are not to be considered really eight-balls. Brownell probably risked his life more often than anyone else. Stealing medicine from the Japanese for his shipmates. He was a good man. Damn good man.

C.G.R.:

Being a homosexual does not make you cowardly or against your country or anything like that.

A.G.M.:

Queenie. Queenie walked down the road during a barrage: "Pooh, pooh. These bullets can't hurt me." He goes down and picks up the major, and brings him back to the revetment. They were good men.

In Cabanatuan, there was "Mexicali Rose," "Queenie," and a whole flock of them, like I suppose any prison here in the States or even in Canada or anywhere in the world. I would say there was roughly, probably in that whole group, known homosexuals, maybe half a dozen.

C.G.R.:

Not a very high proportion.

A.G.M.:

No, it wasn't.

C.G.R.:

There would have been how many men in Cabanatuan at the time?

A.G.M.:

Oh, probably 1,500. Maybe six or seven of those fellows. But I can't judge them.

C.G.R.:

No. Nor do I, but it is a matter of some medical interest.

A.G.M.:

Yes. That's right. I can see your point, doctor. But they worked just as hard. I would say that "Queenie" (you were talking about morale) probably did more for morale than anyone. He was a topic of conversation. "What did Queenie say today?" There was an old bosun's mate by the name of John -- what was his name -- Stevens, I think. Reportedly he had been a skipper -- he retired in Shanghai from the navy after 20 years as a bosun's mate. Believed to have skippered a pirate vessel on the Yangtze. Oh, there were some characters there, doctor, you have no idea. John Stevens now. A man probably well into his late 50s, called back to active duty, chief petty officer. So the Japs were very good about not working the older men. If they were 50 they didn't have to work in the fields. They sort of watched the barracks. Queenie came in one time on Valentine's Day, approached John -- I'll never forget this -- this is some of the humor, camp humor. "What a lovely evening for a date. Won't you be my bosun's mate?" Here's this old guy, 50 years old, that's going to kill him. And he can hardly run! This guy, well

as I say, he was a morale builder. He really was. Because you have to -- they had a certain function, really.

C.G.R.:

Sure.

A.G.M.:

They put on shows, and they always took the female part, you see. The Japs'd let us have a show maybe once a month, and then we'd have to sit through their movies, propaganda movies, that type of thing.

Then along about '44, well nothing else happened I guess. There wasn't anything. It was just routine. The thing in the eye clinic, and then Dr. Wilson thought he could do more on that than I could possibly do.

C.G.R.:

Maybe, though, you could tell me something about the way a clinic like that is organized. I don't really mean -- that's not quite the right word. How did patients get to the clinic? Did they have any difficulty getting permission to go the clinic? Things like that.

A.G.M.:

Well, most of these were patients within this hospital unit. In Cabanatuan, the camp was divided. One side of the road were the workmen, who worked in the fields; the other side would be patients: amputees, psychos, whatnot, colostomies, (Jimmy Pfeifer had a colostomy). They were pretty bad. With malnutrition, malaria -- dysentery probably was the worst. When I first got there we were losing about 45 men a day.

We'd move all the patients out of this hut, take a big squeegee, and move the excreta, with buckets of water and a big squeegee, and just -- out onto the dirt. And put them back after it was washed down. Terrible. The flies just knocked them off right and left.

C.G.R.:

Dysentery certainly is the great killer in situations like that.

A.G.M.:

Yes, right. That and malaria. Then, of course, a lot of beriberi at that time too. Most of the patients that came to the eye clinic were from the hospital itself.

C.G.R.:

I see.

A.G.M.:

The work detail, if they were ill enough to go to the hospital, they were admitted. They did have a little dispensary, sort of an outpatient type of dispensary in the work area, and they were allowed so many men to go to sick call off work unit per day and that's all.

C.G.R.:

Ah, yes.

A.G.M.:

It was controlled. I wasn't too involved in that until about the last three months. First time in my life I ever got in a fight. I took on a big marine, and then I was transferred to the work group. Anyway, then I was transferred to the draft going out. We started out, I think it was in October '44, if I

recall correctly. Eleven-ship convoy. This was a very small freighter. Two holds. Fore and aft. Sixty by 40. I'll never forget it -- 500 men in each hold, in a space 60 by 40.

The Japanese officer in charge of the draft had lost two men off the coast of Mindanao, a Lt. Commander, and I forget his name. They jumped over the side and swam ashore. He swore it wasn't going to happen again, so once we were in the hold, they put the hatch covers on, leaving about two or three inches between each plank, then an inch and a half cable was woven back and forth and taken up by the deck winch. So it wouldn't pop if we sunk. We were trapped. He made sure we weren't going to escape. Fortunately, we weren't torpedoed. Pretty small ship. I don't think Chester [Nimitz] was interested in that too much.

Needless to say, we took off for Hong Kong. We got as far as Hong Kong. We stayed in Hong Kong Harbor for about ten days. In October. Very hot, and we lost about ten men a day out of our hold, and lost about a hundred men out of there in Hong Kong.

C.G.R.:

Were you let out of the holds at all?

A.G.M.:

Only if you had to defecate; they had a trough up on the well deck. Then a storm came up and every....Oh! Interesting! Every night they would move the ship and they would change the numbers on the stack. We'd go up the Pearl River at night, and then during the day, we'd come back where they had maneuverability, in Hong Kong harbor.

Finally a storm came along and they hugged the coast, and we

got up as far as the Straits of Formosa, and then shot across to Takao. Three ships arrived out of the eleven; we lost seven ships en route. I think old Chester Nimitz did a damn good job. He sure did.

C.G.R.:

Yes. Too good, for some people.

A.G.M.:

Yes. They offloaded us there at the old quarantine station, and we stayed there for the remainder of that day; that night they put us on a train, and I wrote to you in that letter, and I was looking for maps of old Formosa, and I couldn't find any in all the junk I had, National Geographics, that sort of thing. But you could probably get them from the archives, National Geographic in Washington.

Anyway, we went as far as a place called Kagi, as I told you. They hadn't even finished the camp. From some of the reading I've done, I don't know about you, doctor, but some of the reading I've done indicated that the Japanese just didn't know what the hell to do with prisoners.

C.G.R.:

That's the impression I get very strongly.

A.G.M.:

Yes. So in Kagi, we wound up in what I took to be an elementary school. I had described that to you in the letter. They didn't even have a cook-shack built yet. It was interesting to watch those Chinese, the Formosans, the natives, build with bamboo. Just fantastic! They can put a roof on in one afternoon. It IS waterproof. You saw them sitting there

whittling bamboo pegs, and drilling with the old-fashioned drill that goes up and down on a string?

C.G.R.:

Yes.

A.G.M.:

Banging those in, and putting one on top of the other. It's beautiful. It's just fantastic. Let's see, I was there for a while. I forget how long. They designated one of the little schoolrooms as the dispensary. Then they decided they would move all the rest of the prisoners except the ones that were ill. Sgt. Murphy and a few of the others had tuberculosis and beriberi so bad they couldn't walk. As I told you in the letter, this corpsman, we had Sgt. Stevens, a Mexican boy [Latin-American], from New Mexico. He and I and one other kid, I forget his name, stayed behind with something like nine or eleven (I forget) patients. They moved all the 400 and some odd men out, all enlisted. Moved them all to Japan.

From that point on, I became the internal camp commandant. The Senior Petty Officer. Then we got a bunch of chaps from Malaya, Singapore. As I told you, some Canadian Rifles from Hong Kong. Lanarkshire Yeomanry from Lanarkshire. Let's see. Oh. There was -- no, that was about it. There was about 300 of them I guess.

C.G.R.:

Who was in the camp initially, in Kagi?

A.G.M.:

Americans.

C.G.R.:

They were all Americans?

A.G.M.:

All Americans.

C.G.R.:

Yes, okay. They moved the Americans out except your small group and brought in the British and Canadians.

A.G.M.:

Right.

C.G.R.:

Good. Now I understand.

A.G.M.:

There was a few natives. Malaysians. Indians. I think there was one Ghurka, if I'm not mistaken. Anyway, just a mish-mash.

C.G.R.:

Right.

A.G.M.:

We stayed there, then, from about October until, I guess, about February that they moved the Americans out. In '45. Then the British came in. Then around August, I think, July or August, they disbanded the camp. They moved us all to a place called Shirakawa.

C.G.R.:

Okay. Now, before we go to Shirakawa, can I ask a few questions about Kagi?

A.G.M.:

Sure.

C.G.R.:

Tell me about the medical set-up there. What did you have?

A.G.M.:

Oh. Okay. Nothing. Only what I had in my first-aid kit.

C.G.R.:

What might that have been?

A.G.M.:

I had one syringe, one 18-gauge needle from an old IV set. I had a little merthiolate, a couple of bandages that we'd washed, maybe some aspirin -- that's about it.

The Japanese medical officer purported to be a doctor. His rank was sergeant. Now I don't know whether they commissioned all their physicians or not. I just never did get that straight.

C.G.R.:

I don't know.

A.G.M.:

Anyway, he would bring in a section of bamboo, with a little salicylic acid ointment, sulfur ointment. He'd bring in some Turkish quinine once and a while. Wow! Knock your head off! God! Three grains. Boy, was it potent. Anyway.

You had to beg, borrow and steal. They were just not that willing to -- well, maybe they needed it for their own troops. If it was a matter of giving to their troops or to us, you know who got it then. Their troops. Naturally. I think we'd do the same thing.

C.G.R.:

Did they -- this sergeant, this so-called doctor -- did he

look after the patients himself?

A.G.M.:

No. I did. You see, it was an all enlisted men's camp. They followed the Germans, I think, by separating the officers from the enlisted men. To break down morale if possible. Etcetera. It didn't work. They considered all the doctors -- if they were an officer, they were an officer. Period.

So after -- Wakasuchi, who was the Camp Commandant, and incidentally, he was educated in Canada -- he got his degree in Canada. I don't know whether he went to your school or not. Anyway, he was a gentleman, he really was. He was very sympathetic. As a matter of fact, two of us, Sgt. Demaio (this is before the Americans left and Wakasuchi was there) kept asking to get a doctor. [We said,] he wouldn't have anything to do with the running of the camp -- he'd just be a physician to take care of the patients. So finally it went through headquarters, and finally after several months, four or five months, we got a Dr. Leo Schneider, from Portland, Oregon. He's still practicing there, I think. Gee, I can't remember who the other one was. I know he was in with the [Philippine] Scouts. Very handsome man. I forget his name. Captain.

Dr. Schneider, well he and I had a rapport, because his brother was my medical officer aboard the Tennessee. The Striker. Oscar Schneider. Two brothers. Anyway, up to the point that we got a physician, I had to do about everything, set broken limbs, broken arms, jobs that....

When Mr. Wakasuchi left camp, the warrant officer took over. Then it got rough. Got typical. At that time it was all

Americans, of course. They would bash people around. I don't know if it was to give the guards more...build up their ego, that they're tough and rough -- because these were natives, Formosans. Kids. Sixteen, 17 years old, with an old 50-caliber rifle without bullets. All they had on the end of it was a bayonet.

Anyway, until Dr. Schneider got there, as I said, I was like an independent-duty hospital corpsman -- submarine or marines or whatever. You just did what you had to do. Even pull teeth. I did have one pair of forceps. I don't know whether they were for upstairs or downstairs.

C.G.R.:

They worked in both directions, I'm sure.

A.G.M.:

Yes. The only traumatic thing was that damn 18-gauge needle. All I had was ophthalmic cocaine, a little pledget, what do you call it -- disks. I thought, well, I'll dissolve this in sterile water and it should work. I guess it did. Can you imagine the poor guy getting an 18-gauge needle shoved into his gums! Little Latin-American kid from the coast artillery.

C.G.R.:

You mentioned in your letter that you had a ten-bed hospital, and that everyone else had to work.

A.G.M.:

That's right.

C.G.R.:

Sick or not?

A.G.M.:

That's right. Yes. No one could be admitted unless they discharged someone.

C.G.R.:

I see. So that was an absolute....

[Pause in tape.]

A.G.M.:

As I say, you had to send somebody out in order to let somebody in, and they'd limit you to ten beds.

C.G.R.:

How did the men react to that?

A.G.M.:

Some of them acted very belligerently -- "You're sending me to my death!" and so forth. I don't know what harm did occur. I don't know. No one actually died, except the psycho. Kid buried himself in his blanket.

C.G.R.:

I'm sorry. He did what?

A.G.M.:

Buried himself under his blanket. Had to spoon-feed him to the point where -- hopeless.

C.G.R.:

He just withdrew himself from life, did he?

C.G.R.:

Yes. I used to try to justify it by thinking, well, the kid probably was psycho anyway, but who am I to judge?

I'm sorry.

C.G.R.:

No, that's fine. Do you want to go on to Shirakawa?

A.G.M.:

Okay. From Kagi....

C.G.R.:

Now this was very late in the war, as I understand it.

A.G.M.:

Yes. This was along about February, I think, of '45. When did they drop the bomb on Hiroshima or Nagasaki? That was about March, wasn't it? March 26th?

C.G.R.:

It was August. Yes.

A.G.M.:

August.

C.G.R.:

August, oh what was it? 6 and 9, I believe.

A.G.M.:

Anyway, I guess the Japanese felt that they couldn't spare the guards and wanted to consolidate all the remaining prisoners. It wound up that the whole unit was transferred to Shirakawa, which was at that time established as the British Hospital Camp, if you will. I forget who the Senior Medical Officer was. Some British doctor. Wound up with, I don't know what happened to -- oh. Dr. Schneider left with the Americans, on to Japan, or it might have been Mukden or someplace. I just forget who the chief surgeon; the only person I really ever saw there at the British camp was the pharmacist.

C.G.R.:

Now is this where Dr. Wheeler was?

A.G.M.:

No. I didn't meet Dr. Wheeler -- yes. No. He came from the mines. He came from Kinkaseki.

That was later on. Then they finally abolished -- . Anyway to make a long story short, I went over to the dysentery ward at Shirakawa. I was there for several months. Nothing spectacular, because we did have physicians. We had a couple of Americans. Amazing thing, though, there, was the Aussies. We had one Aussie sailor and one Aussie Lt. Col.; they were both cooks in the cookhouse. There was a couple of Canadians. Most of them were just, as I say, just mish-mash. The Ghurka, Malaysians, a few Scots from some highland regiment, Gordons, I guess it was. I think they fought a rearguard action down the Malay Peninsula?

C.G.R.:

Yes. Correct. I think the Gordons were the last regiment across the causeway into Singapore.

A.G.M.:

Yes. I think so. Rugged. I don't know about you, but I get along with the Scots and the Irish a lot better than I did with the Brits.

C.G.R.:

I've heard others say the same thing.

A.G.M.:

Anyway, I forget how long we were there, doctor, at Shirakawa. It wasn't too long, until they transferred us finally to -- I suppose it was around July. I think that the war was cranking down then. I think it was -- yes it was. It was after the bombing. Because they transferred Mr. Wakasuchi and, let's

see, then we got a Capt. Hioki, northern Japanese. He looked like an Italian man. Didn't look Japanese at all. Then I think it was around July, or August. Maybe it was in August that they moved us into Taihoku, into an abandoned military hospital where apparently they had...oh, it was a flea-borne disease -- what the hell?

C.G.R.:

Typhus?

A.G.M.:

Yes. So they had burned every other building. I don't know why, but they burned every other building, to sort of spread the camp out. Get rid of the rats, I suppose. I don't know. But they chucked us in there. It hadn't been used for a long, long time. That's where I met Dr. Wheeler.

C.G.R.:

Ah.

A.G.M.:

We were both on -- I went on nights, and Doctor Wheeler usually stayed up till 1, 2 o'clock in the morning with me. We sort of ran the hospital there, in Taihoku.

C.G.R.:

Tell me a bit about him. Tell me what you recall of him.

A.G.M.:

Well, mostly we discussed the patients, and what happened at that hospital. He seemed to me, at the time, to be well-versed and very interested in public health. In preventive medicine. I know we used to catch mosquitoes at night, and I don't know how

much of a taxonomist he was, but he could identify them. So we would pull them apart. We would look at them, and he would explain it to me. We talked about malaria. About that time, they started dropping supplies to us.

[End of side 1.]

I think one reason that Dr. Wheeler stayed up at night -- he was reading all these tracts that came with the medicine. You know, like penicillin, and he was trying to catch up overnight.

C.G.R.:

Trying to catch up. Yes.

A.G.M.:

Because we had I don't know how many tuberculars there, and as I say, being on night duty, I was primarily with the contagion group, with Dr. Wheeler. I know that he was just flabbergasted at the medications that we were receiving by airlift.

He and I volunteered to stay behind, when the British troops moved out. They took them aboard an aircraft carrier through Kinkaseki, and we decided we'd stay behind. We were free, we didn't care, we wanted to see that these guys got taken care of. Fortunately -- because they flew us out. We were back in Manila in an army hospital a week before the ships ever got there. So it was really to our advantage.

I admired Dr. Wheeler very much. He was a dedicated physician, he had a great deal of interest in taking care of the men.

C.G.R.:

What did he look like?

A.G.M.:

Thin.

C.G.R.:

Yes, I'm sure. [laughter] You were all pretty thin, I would imagine.

A.G.M.:

Yes. You've probably gotten pictures, haven't you?

C.G.R.:

Yes. One of the things I'd like you to perhaps tell me a bit about was your personal health through all this. You mentioned your knee, but how did you manage otherwise?

C.G.R.:

Oh, the usual. [laughter] Beriberi, pellagra, scurvy. The scurvy, as I indicated in one of my letters to you, doctor, came on very rapidly, shortly after we were captured on Corregidor. Of course, the two doctors we had, Dr. Hewlett and Glusman, weren't that familiar with tropical medicine or deficiency diseases.

C.G.R.:

No.

A.G.M.:

None of the physicians were really that hep on it. They really didn't know what the hell was the matter with us. Sore mouths, scaly and weeping scrotums. Oh, man! I guess that's symptomatic of scurvy, or pellagra.

C.G.R.:

The avitaminoses. Yes. Beriberi or pellagra, more than scurvy, I believe.

A.G.M.:

Pellagra. Yes. Anyway, the chief pharmacist mate out of the USS Pigeon. Very erudite individual. Photographic mind. Richard thought perhaps it was scurvy, and they have a little plant out there, a little citrus tree, called Calamondin [the Filipinos refer to it as Calamansi]. So we found some of that fruit and ate it, and the symptoms subsided. Then, during my stay in Cabanatuan, I didn't have anything really wrong with me. I had pneumonia one time. Until I got to Formosa and there I contracted malaria. Then I had the onset of beriberi where I had to sleep in a semi-Fowler's position. Legs swollen, it was pressing against the diaphragm. Particularly if you laid flat.

C.G.R.:

Yes.

A.G.M.:

Had we not been liberated when we were, I think we'd have lost more men. A great deal more. It was getting to a critical point.

Other than that....I had no corneal scars.

C.G.R.:

That's a blessing.

A.G.M.:

Yes.

Oh, also -- now I don't know, doctor, I've heard talk about it, and really nobody at that time knew that much about it -- the term dry beriberi. Very painful feet. They bothered me for months and months after I got home.

C.G.R.:

The so-called "electric feet"? The "happy feet"?

A.G.M.:

Yes. Whatever.

C.G.R.:

All sorts of different names.

A.G.M.:

Yes. Like they were constantly asleep or something. Now I don't know how valid that is, or if there is a diagnosis. I heard the physicians discussing it, and having experienced it, I knew there was something wrong.

C.G.R.:

What was your weight? Do you remember?

A.G.M.:

When I was liberated? About a hundred and -- oh I don't know -- I think -- you know how the British are, they weigh you in stones. I think the equivalent was about 114, 116 pounds. I was over a hundred. I was in pretty good shape.

C.G.R.:

I'm trying to translate that back. That'd be what, about 8 stone? Does that sound right?

A.G.M.:

I suppose, yes. Weird.

C.G.R.:

Tell me, you have experience with US and British and some Canadian enlisted men.

A.G.M.:

Uh huh.

C.G.R.:

What sort of differences did you see in the ones you observed?

A.G.M.:

How do you mean, doctor? Morale?

C.G.R.:

In national characteristics. Did some seem to take captivity better than others?

A.G.M.:

Yes. Yes.

C.G.R.:

This is the kind of thing I'm interested in.

A.G.M.:

Two cases that I recall. Of course, dysentery, well it was very debilitating. I think it does have an impact on the mental attitude of the patient. I really do. Because they know, in those circumstances, if you really came down with a severe case of diarrhea, whether it was amebic or bacillary or whatever, you know your chances were going to be rather slim. Captain Stuart Fraser was a Scot, an engineer. Finally gave up. Expired. Just gave up.

Same with another lad, and I forget his name, but I think he was the public-school type. Wealthy family, did a lot of horseback riding, in shows and competition, that sort of thing, but was an enlisted man. He gave up. Just utterly gave up. You've heard the expression, "Laid down and died." He did it! He just laid down and died. There was no reason for it. As compared to say some of the Americans who said, "Well, bullshit!

These damn Japs aren't going to get me down. I'm going to live to kick them in the butt."

C.G.R.:

Yes.

A.G.M.:

Some of those attitudes, like for instance, the Canadians, Scots, the Irish, a lot different attitudes than the Brit. Now I know that this one kid had been through Dunkirk and all that, and he'd just about had it. I could rationalize how they would give up. "Jesus, is this going on forever?" They were in the war long before we were. Your heart went out for them.

C.G.R.:

There are differences. For example, the Burma-Siam railway was largely built by British and Australians, as I'm sure you know. The death rate was several times higher for the British than most of the Australians. In the same place, in the same work, under the same conditions generally -- guards and so on. Same diet. So there are differences. I was just curious what your observations were.

A.G.M.:

You'd think that they would be stronger, with the old Viking background and all that. The Celts.

C.G.R.:

Well, I suppose when it comes down to it, the background of all of us, Canadians, Americans, British, Australians, is the same. Really. If you go back far enough.

A.G.M.:

Far enough. Yes.

Well, those were the only two cases who were really -- to my mind were just uncalled-for. I mean, there was no reason for those two men to die. They gave up.

C.G.R.:

One of the comments I've heard from a number of non-officers, of different nationalities, was some criticism of officers. Do you have any comment on that? Not just medical officers. Officers generally. Did you have any observations?

A.G.M.:

I'm trying to think. Right.

C.G.R.:

I don't want anybody's name, or anything.

A.G.M.:

Mostly right after our capture off Corregidor, they very quickly separated the rugged, Academy-type officer from the feather merchant, from the reservist. The shoe salesman if you will. The whatever. Auto salesman.

C.G.R.:

Yes.

A.G.M.:

The career officer remained a career officer. You took your hat off to them. They were -- they held them in together. They'd give you orders, and they could anticipate what was going to happen. Some of the reservists fell apart. They really did. I know aboard our ship, our officers were all Academy officers. Our Commanding Officer, our Executive Officer, Mr. Hede, Mr. Goodall, Capt. Sackett. Rugged individuals. They were military

men. Just because we were captured did not detract from their authority nor their concern for the men.

More, and I make this comparison, doctor, now that I think about it, between the naval officers and the army officers. Now I don't know how they -- they have a different selection system, I think, in the army than they do in the navy. There were, in particular, chaplains -- oh shit! -- poor excuses for human beings, doctor. Poor excuse. You'd think their one goal would be to be on the right had of God, right? Like the Mohammedans, if you will. What's the ultimate? Paradise, right? Join JC. Forget it! Lie, steal! One chaplain was nicknamed "The Red Raider."

C.G.R.:

Really.

A.G.M.:

He would go around and steal from the enlisted men. Right out. They should never commission chaplains. They should be persona non grata, whatever. They shouldn't be commissioned. No.

Most of the senior officers, majors, lieutenant colonels -- line -- were good men.

C.G.R.:

How about medical officers?

A.G.M.:

I would say that the majority of the medical officers, once we were captured, became doctors, and to hell with the rank.

C.G.R.:

Yes.

A.G.M.:

They had a job to do. They did it. The only medical officer I can recall who tried to maintain his rank, and rightly so, was Dr. Sartin. Commander Sartin, who was the commanding officer at Bilibid. The physicians, Dr. Pohlman, Dr. Wilson, Dr. Glusman, Dr. Hewlett -- they were doctors first. Only out of necessity would they ever "pull rank." The physicians -- the people I associated with -- held the men together. Again, like I say, they became physicians -- they were doctors.

Now, I don't know, you asked me now, but you know how long it's been since I've left the Brits. The first sick call I went to -- I witnessed it -- I didn't go to it -- I witnessed it. At Shirakawa. The physicians sat at a table, then there was the sergeant there. Patient approaching the table. He'd say, "What's your complaint?" "I have a headache." "Give him treatment number three. Next." He didn't put a stethoscope on him. Didn't ask him any questions. Nothing. It's amazing. Did you ever witness anything like that, doctor? Well it just floored me.

Our physicians, like Dr. Schneider, Pohlman, Hewlett -- Jesus, "Now where does it hurt? What have you been doing? Do you have any allergies?" No. It's just, "Give him treatment number three. Next." Is that British military medicine?

C.G.R.:

I can't answer that. I would hope that is the exceptional case rather than the typical.

A.G.M.:

That's why I felt such a fondness for Dr. Wheeler. Fantastic man. I don't know whether he was with the Canadian Rifles, or with the Indian army.

C.G.R.:

He was with the Indian army.

A.G.M.:

Now I recall. Yes. Indian army. Not the Canadian. He came with the Canadian Rifles.

C.G.R.:

I can tell you what happened with him. He graduated in about '37 or '38, at a time when there was no opportunity for young doctors starting out in Canada.

A.G.M.:

Depression.

C.G.R.:

He deliberately went to Britain and joined the military service, and they sent him to the Indian army. So he was in the Indian Army Medical Corps. [Indian Medical Service.]

A.G.M.:

That's why he was so interested in tropical diseases. He was probably one of the only ones who knew anything about it!

C.G.R.:

Well, what else should we talk about. Can you think of anything. Let me just turn this off for a moment.

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