

Air Evacuation of Wounded Takes Its Place With Sulfa Drugs and Blood Plasma as One of Modern Military Medicine's Greatest Life-Saving Plans

By ELMO SCOTT WATSON
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HE WAS one of the dough-boys who jumped down from a landing barge to the sandy shore of Normandy on D-Day.

A chattering machine gun in a German pillbox, that hadn't yet been silenced, sprayed lead across his path and he slumped to the ground. There was a cry of "Medic! Medic!" and a moment later skilled hands were binding up his gaping wounds.

The next morning four planes (unarmed C-54s) swooped down near the field hospital where he lay. Land mines were exploding 150 yards away when the first two ships landed. Out from these planes sprang two flight nurses—Marjean Brown of Columbus, Ohio, and Suella Bernard of Waynesville, Ohio. "All right, soldier, you're going to take a little trip with us!" smiled one of them.

Within two hours they had gathered up not only this GI Joe but dozens of other desperately wounded, loaded them into the planes which were soon winging their way back to England. Two weeks in an American army hospital there and then on June 29 a huge Air Transport Command plane settled down on an airfield on Long Island, N. Y. It was just 19 hours since it had left the British Isles.

A day's rest in a hospital near New York—then aboard a plane again. And today this GI Joe is convalescing in an army hospital out in the Colorado Rockies, near enough to his home so that Dad and Mom and Sis can come to see him get well. It's several thousand miles from the place where his blood dyed the sands of the French coast to this place where both his body and mind are being healed of the wounds of war but this cycle of life, near-death, then life again, is encompassed within the time span of less than four weeks!

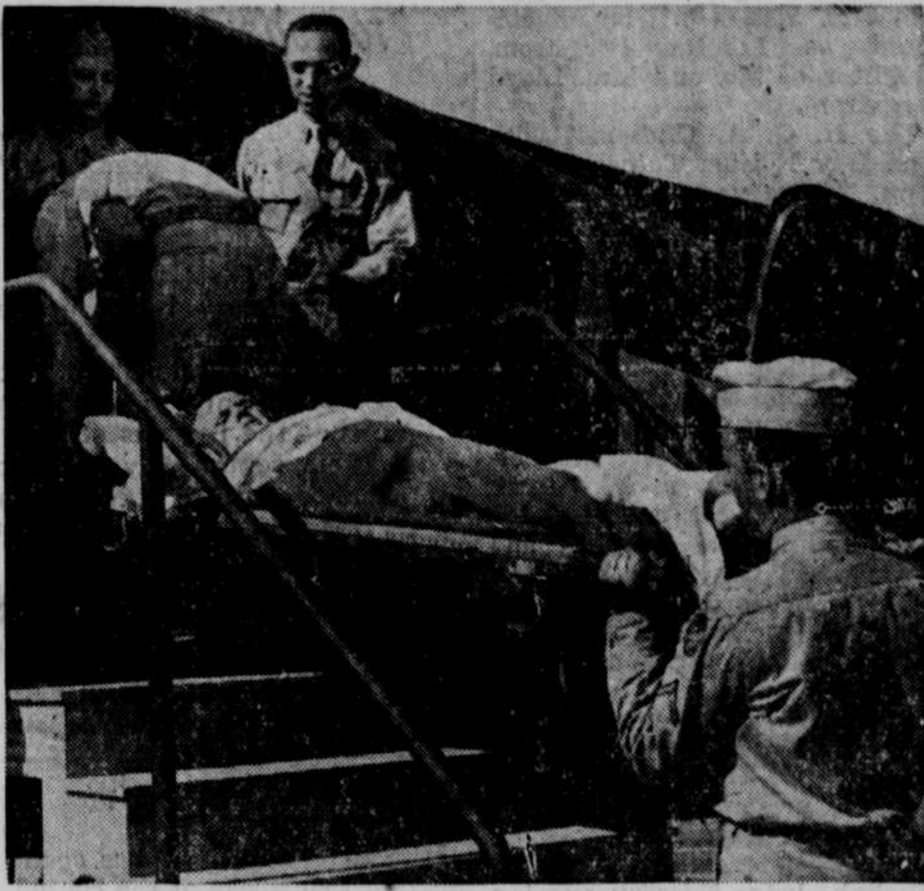
The reason for this can be summed up in two words: air evacuation. No wonder that Maj. Gen. David N. Grant, air surgeon for the army air forces, was able to declare recently that the army's system of air evacuation of its wounded takes its place with sulfa drugs and blood plasma as "one of the three greatest life-saving measures of modern military medicine!"

Because of air evacuation, men are alive today who would have perished in the jungles of Makin island or on the Anzio beachhead, and personnel of the air transport command's ferrying division, who have participated in the air evacuation of more than 7,500 war wounded, have no hesitancy in indorsing the air surgeon's statement.

It's a part of the army's policy of handling wounded soldiers through a progressive system of unit hospitalization which has been developed to a high degree under the direction of Maj. Gen. Norman T. Kirk, surgeon general of the army. Because of front-line treatment given American soldiers, more than 97 per cent of the wounded brought from battlefields to evacuation hospitals have been saved.

Once the wounded have been treated, they must be sent to hospitals far from the scene of battle where they can rest and recover and, of course, the quickest way to get them there is by airplane. Part of these wounded have been flown from foreign theaters of war to their homeland and thousands of them have been flown from hospitals on the coast to hospitals near their homes where they can convalesce and benefit in spirit from visits of family and friends, for it is a basic army policy to get its wounded soldiers as close to home as possible for the convalescent period.

In a recent report on the handling of men wounded during the invasion of France, Maj. Gen. Paul R. Hawley, chief surgeon of the European theater of war, stated: "There has not been the slightest hitch in the chain of evacuation. As a result of the speed with which these wounded were evacuated from Normandy, the condition of the casualties on arrival in the United Kingdom has been surprisingly fine." To that comment might be added the fact that approximately 4,000 sick and wounded have been returned to this country aboard Air Transport command planes, part of them over regularly scheduled transport services operat-



GOING HOME—A soldier is carried aboard a plane operated by the ferrying division of Air Transport command and in a few minutes will be flying to a hospital in the vicinity of his home. Flight surgeons inside the aircraft supervise the job.

ed by the ferrying division of ATC. Many hops are as long as 12,000 miles. Only one patient among those evacuated by the Air Transport command has been lost as the result of air travel.

Cooperation Does It.

Close cooperation between the several organizations of the army makes possible successful air evacuation of the war wounded. The combat air forces outside the United States, the foreign wings of Air Transport command and various air commands in the United States, notably the First Trooper Carrier command, have done experimental work on the problem. In 1943, a total of 173,527 sick and wounded patients were evacuated by American military aircraft throughout the world, ATC carrying all those returned to this country.

Here is the way evacuation from the combat areas is accomplished: Suppose the scene is Anzio beachhead. Medical corpsmen have toiled across the bullet-swept area, given a guy named Jim emergency attention, then inched back with him to the beach where he receives more extended treatment. At a nearby clearing station, the flight surgeon classifies the patients. He determines that this soldier, just arrived from the front, has a serious head wound which requires immediate surgical attention. When the transport plane flies in, Jim is among the outgoing patients.

The medical air evacuation units transform the plane from its troop or cargo-carrying mission and do it quickly lest snipers or bombs disable the aircraft. Litter equipment is installed in three or four tiers and as many as 24 patients are loaded. Two men carry each litter to the plane, two more place it in position inside and a third man inside fastens it in place. In an emergency, the flight nurse in the plane must use untrained personnel for this work and occasionally she takes the place of a loader.

When the plane takes off, the flight nurse is in medical charge. Only in extreme emergencies does the flight surgeon accompany her. A surgeon checks, when possible, during the refueling stops. Otherwise the flight nurse and a surgical technician, an enlisted man with non-commissioned officers' rating, handle the patients. The plane is equipped with an ambulance chest which is a small trunk containing bandages, medicine for the relief of pain, equipment for administering intravenous medication and blood plasma also is on the plane.

Once in the air, the flight nurse is in complete charge, aided by a trained staff sergeant. Aloft she handles any emergency and does anything a doctor would have to do—except operate. Already the men borne aloft from Anzio were feeling better. Removed from the din of battle, their shock condition improved. Jim, for example, mustered sufficient interest in life to ask where he was going. Six hours after he left Anzio he was in a base hospital in North Africa undergoing a delicate brain operation.

The evacuation chain does not end at the base hospital overseas. Efficiency and medical factors suggest that the men be kept moving rearward until they are as close to home as possible. Part of the wounded,

of course, come home by ship. Patients for the trans-oceanic flights are selected by flight surgeons.

Four Kinds of Patients.

Patients' general fitness for air travel is the deciding factor and they are grouped into four medical categories: (1) Mental patients requiring security accommodations en route; (2) Hospital litter patients who must remain in bed, services rendered by other individuals; (3) Ambulance patients requiring medical care en route from other individuals; (4) Troop class patients needing little medical care en route who can take care of themselves, even in emergencies.

Air evacuation increases enormously once the patients have reached coastal receiving hospitals in the United States, either by aircraft or by surface shipping. The same system of screening is employed at the coastal receiving hospitals that was described previously as prevailing overseas. Urgency of the patients' conditions, together with their susceptibility to air transportation are primary considerations.

Sergt. Walter A. Smith of Springfield, Mass., can testify that the army doesn't stint on its resources when one of its wounded needs special attention. On May 9, 1944, he was wounded in action in Italy. He reached the United States June 14 in a convoy and entered Baker General hospital at Martinsburg, W. Va. An examination by the staff there revealed that immediate surgical attention was necessary. Ashford General hospital at White Sulphur Springs, W. Va., had the specialist for the type of operation required.

Two mornings later a ferrying division plane was at Hagerstown, Md., when Sergeant Smith arrived by ambulance. He was placed aboard with a full crew making certain that the solitary patient received every attention. By noon that day, the sergeant was on the operating table at Ashford General hospital receiving the best surgical care that the army has.

Ordinarily ferrying division planes engaged in air evacuation are completely utilized with all space occupied. Within the continental United States, the evacuation by air of the army's war wounded is the responsibility of the ferrying division of the Air Transport command. Since this responsibility was assumed more than 7,000 patients have been moved without injury to any of the personnel involved.

"The air evacuation of sick and wounded personnel of the armed forces was pioneered by the medical services with the AAF and it can be considered as one of the greatest life-saving measures in modern military medicine," Lieut. Col. Andres G. Oliver, surgeon of the ferrying division comments, "Its rapid and comfortable delivery of the patient to a hospital where he or she will get the best (and most specialized) treatment; or to another closer to his home, where his convalescence will be shorter and far more pleasant, has become a great morale factor among our returning heroes."

This justice is being served when the aircraft, so terrible an instrument of death and destruction, can be converted to such humanitarian functions as air evacuation.



Cover Crop Seed Increase Sought

Supplies Needed to Maintain Acreage

Growing of legumes and cover crops—with particular emphasis on seed production—is receiving more attention than usual from Uncle Sam this year.

The nation's farmers for many years have relied upon legumes and cover crops to protect their soil from erosion, preserve valuable moisture, and gather life-giving nitrogen from the air. In most cases, these crops are plowed under as green manure to make room for more profitable row crops, such as cotton, corn, or tobacco.

Heavy wartime demands for more food and fiber crops from each acre under the plow have increased the need for seeding legumes and cover crops, the War Food administration says. Records show that growing these crops in winter will bring about a substantial increase in per acre yields of subsequent crops. The urgent need for more feed crops to support added numbers of livestock also has a place in the picture, WFA says. These crops provide excellent pasture for several weeks before turning under, thus supplementing dwindling supplies of concentrated protein feeds.

Principal emphasis is being placed on harvesting of seed from 1944 crops of legumes and grasses because supplies now are at dangerously low levels. Adequate quantities of these seeds are essential for providing



Good Clover Stand

winter feeds, protecting land during the winter months, and maintaining soil productivity at high levels.

Increases in production of legume and grass seeds must be made in 1944 if there are to be sufficient new seedlings this fall for hay and pasture production and for sod acreage in regular crop rotations. Nations liberated from Nazi domination will need seed quickly to help reestablish themselves by restoring their devastated farmlands. Shipping seed abroad is an economical way of exporting food and lessens the drain on our own food supplies.

Harvesting of legume and cover crop seed will be encouraged under provisions of the 1944 conservation program of the Agricultural Adjustment Agency. Substantial payments will be allowed for each acre harvested, up to a maximum of 25 acres per farm. Prices of seed will be supported at levels designed to give the farmer a fair return. Crops eligible for AAA payments and support prices include most principal legumes and grasses.

In addition to the profit realized, farmers are being urged by the WFA to produce adequate supplies of seed for two principal reasons. First, WFA says, if farmers are to maintain their record production levels, every effort must be made to keep the nation's farmlands in top productive condition. Any effort to draw upon soil fertility without replacing it is a dangerous gamble which may result in declining production in later years. In the second place, many of the crops now being produced in record quantities to meet urgent needs are soil depleting. Continued production of these crops makes it imperative that productivity be preserved by every means possible.

Here is how the situation sums up:

1. Red clover—Reserves at 40 per cent of 1940 level.
2. Alsike clover—Carryover reduced one-half by two short crops.
3. Sweet clover—1943 crop small—less than 1922. Carryover July 1 expected to be 40 per cent of 1939-1943 average.

Cattle Liver Flukes

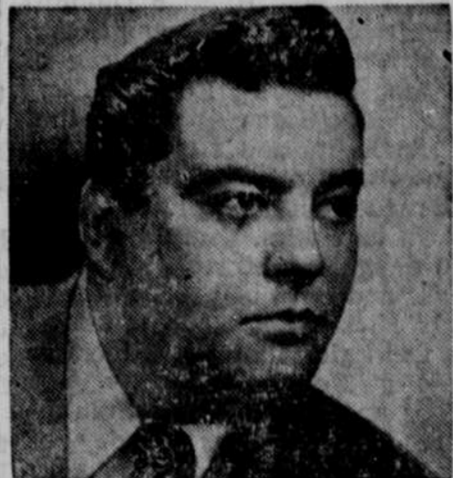
Liver flukes, long a serious menace to cattle production in parts of Texas and other western states, are now being fought with a new chemical treatment, according to the War Food administration. The drug "hexachlorethane" is combined with bentonite in water to make a smooth emulsion that is easily given as a drench. Liver flukes, difficult to reach by medication, are small, flat, leaf-shaped parasites.



Star Dust

By VIRGINIA VALE
Released by Western Newspaper Union.

JACKIE GLEASON is the first new comedian to hit the networks for the coming fall season; the August 13th debut of the Jackie Gleason and Les Tremayne show establishes him on the air waves. He's no stranger to the air, of course, after starring in "Hi Neighbor" and "Laughing at Murder," and movie fans know him from his 12 pictures, including "Springtime in the Rock-



JACKIE GLEASON

ies." Currently he's starring on the Broadway stage in "Follow the Girls"; when he finishes that stint he begins his new contract with 20th Century-Fox.

Gloria De Haven, one of the stars in the new Sinatra musical, "Step Lively," was singing for Galli Curci and Frances Alda when she was 12. They advised her to study for opera, but she took to modeling instead, then began her career in the movies. Played a showgirl in her first picture, will be a chorus girl in "Dr. Red Adams," a new Dr. Gillespie that will go into production soon.

John Hodiak is on his way up, and going fast. "Lifeboat" gave him a boost, and "Marriage Is a Private Affair," with Lana Turner, gave him another. So now he's set to play the coveted male lead, opposite Greer Garson, in Metro's "Valley of Decision."

An orange isn't an orange when it's been autographed by Chico Marx, it's a collector's item. Starring on Milton Berle's "Let Yourself Go," Marx did his stunt of playing the piano with an orange; it's now being cherished by the fan who had him autograph it.

Sonja Henie's new picture for International is "It's a Pleasure"—but in preparation Miss Henie rehearses two hours a day, six days a week, with male and female ice ballets, works on her own skating specialties two hours more, then rehearses dance steps all afternoon!

Four Metro pictures on the N-m-m. film are now playing the 16-mmm. beachhead "circuit." They are "A Guy Named Joe," "Meet the People," "See Here, Private Hargrove" and "Andy Hardy's Blonde Trouble"—and were being screened shortly after the battle smoke cleared.

Dinah Shore's off on a blind date—a date with the American fighting men overseas. She finished her chores in "Belle of the Yukon," International Pictures' new Technicolor musical show, made three months' supply of records, and sailed, to return to Hollywood in October.

An empire numbering 500,000,000 people, one-fourth of all the land and people in the world, is the subject of the March of Time's latest film, "British Imperialism—1944." It's the story of what war is doing to the empire, and of how the dominions feel about the mother country today.

Joe Julian and Paul Mann, regulars on the Norman Corwin CBS series, often alternate roles. Recently, when Corwin wanted the effect of a man running up and down stairs, Julian, who was playing the lead, had on rubber heels, so actually stepped into Mann's shoes, which he borrowed for the broadcast.

Pretty fancy, that accident Danny Kaye had. For a scene in "The Wonder Man," he and Vera-Ellen did an acrobatic dance routine, leaping through the top of a paper-covered native drum and alighting on a trampoline which would bounce them out of the drum. Kaye landed off balance, and was hurled to the stage, with one leg twisted beneath him. So now they're shooting around him till he's recovered.

ODDS AND ENDS—Diana Lynn, soon 18, plays a heavy romantic role in "Out of This World," and gets her first screen kiss from Eddie Bracken. Mae Clark, star of silent films, is playing a come-back role with Paulette Goddard in "Kitty." The new format of CBS' "The Doctor Fights" is permanent, giving Raymond Massey a chance to act. Those arm bands the husky males in "The Great John L." are wearing are women's garters—men's arm bands just aren't made any more. After seeing Marie McDonald's work in advance scenes for "Guest in the House," William Goetz borrowed her for "It's a Pleasure."

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Air Medal Ribbon Winner

MORALE BUILDER—Typical of the flight nurses assigned to the ferrying division of the Air Transport command is Lieut. Gerda H. Bouwhuis of Kalamazoo, Mich. In this picture she is giving a wounded soldier some attention that is obviously much appreciated. Lieutenant Bouwhuis wears the Air Medal ribbon in recognition of heroic services performed in the South Pacific war theater.