EXERCISE "MEDICAL DEUCALION"
D.G.A.M.S. ANNUAL EXERCISE, 1956

BY

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"There are in my army two transport mules which have served through twenty campaigns—and they are still mules."—FREDERICK THE GREAT.

With these words a soldier who boldly escaped from the ankylosing influence of military convention rebuked officers, who in their thought about warfare of the future relied too heavily on the validity of previous experience. I used the quotation first in public when opening the Mytchett demonstrations in 1952 at which, by the order of Sir Richard Gale, then the Director-General of Military Training, we showed large gatherings of senior officers how troops in the field might be protected against the effects of nuclear weapons. For some time after that our late Director-General, Sir Frederick Harris, used to call me "Frederick's Mule," and I believe that I avoided this as a permanent nickname only because he must have realized in time that it might seem to imply that I did Frederick's donkey-work. I have used the quotation many times since then in urging young soldiers in B.A.O.R. to bring their unfossilised minds to bear on the problems of the nuclear battlefield without too much heed to the Dunkirk drones and the Bocage bores.

In the Director-General's opening address to "Deucalion," as he introduced us to the new team at Mytchett, could be heard the same appeal to youth, and he had assembled a beauty chorus of young Q.A.R.A.N.C. officers in the gallery, and later deployed an exceptional number of very young-looking R.A.M.C. majors. They say that it is an early sign of old age when you think how young the policemen look these days—this comes just before conductresses begin to help you off buses. But I am not sure where to place the stage at which you say, as a friend said to me at Mytchett, "How young Colonel Commandants are nowadays!" He was not, of course, punning in this allusion to the upstanding youthful figure of General Tom Young, our Representative Colonel Commandant, who attended the exercise.

With all this accent on youth one might have thought that the Editor would have found a cub-reporter to take over this account of the exercise, but, as he said to me: "Well, you know all that rubbish of yours about Napoleon and Wellington is the only thing which sells my paper."* I may have slightly misrepresented him, but someone must read this nonsense, for one or two have

* A libellous distortion of an innocent comment.—Ed.
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asked me how, in view of the fact that dystrophia adiposo-genitalis is commonly associated with sterility, can one account for the King of Rome? Well, I would remind them that the diagnosis was not mine but that of a medical Lieutenant-General of the French army, and that I have heard that guides at the Schönbrunn palace in Vienna used to relate that it was common gossip in Vienna that whoever was the father of that child it was not Napoleon.

Wellington was not much addicted to gossip—just as well, perhaps, since he was evidently not averse to an occasional affair himself, though they were never so blatant as poor Lord Nelson’s famous one—but he did produce a titbit one night at a small dinner party at Strathfieldsaye, when, in talking of various royalties, and, as Lord Stanhope says, “rambling from subject to subject we came at length to the ex-Empress Maria Louisa. The Duke said that the first time he had seen her was during the Congress of Vienna in 1815, when he went to pay his respects to her at Schönbrunn; but owing to the state of things in France, he did not often, of course, find himself in her society. It is a very curious thing, he added, that she afterwards said to someone: The Duke of Wellington little knows the service he has done me by winning the battle of Waterloo! The fact is, she was then with child by Neipperg—whom she afterwards married; and if Napoleon had prevailed she would have had to return to him in that state” (2).

But now, if I am to avoid another acid footnote by the Editor, I must get down to the exercise, and I would say at once that if you still need a good reason why I should not be asked to report next year’s exercise it could be that, like the publicity agents for Hollywood’s ever-increasingly-colossal productions, I am running out of adjectives. For without a doubt “Deucalion” fully endorsed the tradition that each D.G.’s exercise must be better than ever before, and richly earned our unstinted praise for the boldness of its conception and for the elegance of its production. If your knowledge of Greek mythology, like my own, is creaking a bit you will need to be told that Deucalion, son of Prometheus, was in fact the Greek Noah, who built an ark to circumvent Zeus’ plan to wipe out the human race. When the floods subsided, realising that he had omitted to embark anyone except himself and his wife Pyrrha, he thought it advisable to seek advice from the gods about his task of repopulating the earth; and was told that he and Pyrrha should cast stones behind them, whereupon those cast by him would become men, and those of Pyrrha, women. Deucalion himself, the presiding genius of the exercise, another triumph of make-up for Captain Critchley, and equipped with a truly magnificent rotund voice, appeared from time to time, and after declaiming some suitable comment on the development of the theme, he invariably took from his wallet a stone, and after regarding it thoughtfully for a time replaced it, and stalked off saying, “Not yet.” At his first appearance he reinforced the D.G.’s welcoming remarks by sending to each V.I.P., as a memento of the exercise, a large medallion of Deucalion set in a wooden frame, delivered by the fair hand of a sweet nymph (Patricia Ahern), who was conducted to Generals Burki, Chaudhuri, Gorby, Hall, Hayes, and Brigadier Shier by Mercury in the person of the P.T. Instructor, Lance-Corporal
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Fosh, who, despite the Greek origin of our word gymnasium, had insured against wayward displacement of his flowing draperies with more than the conventional figleaf.

In describing “Avernus”, I suggested that the soldier of the nuclear age should never have to suffer what our fathers suffered in the First World War (3). Digging and dispersion must inevitably spare us such sights as the battlefield of Talavera, on which, in Sir Arthur Bryant’s moving words, “lay thousands of dead and dying, piled in stiff or still faintly stirring hillocks of soiled scarlet and blue”(1). I made no attempt to paint the other side of the picture, passing too lightly over the grim possibility that it will be civilians who must endure the horrors of a future war. Their morale could be powerfully sustained by prompt and effective help from a well-trained military force. The important subject prescribed by the D.G. for examination in his 1956 exercise was how such help could best be given, and how we could plan and train for this task. It is plainly not the D.G.’s intention that his units should simply be handed over to any organisation which might prove to be unable to employ them wisely, so we must know enough about the civil defence organisation to enable us to collaborate in evolving sound plans for developing our maximum potential in dealing with any incident. Beginning therefore at the top, the D.G. had invited General Sir Sidney Kirkman, the Director-General of Civil Defence, to address us, and this was a most interesting and valuable introduction to the problem. Next Lieut.-Colonel Marks spoke about the new experimental field medical organisation, for we were later to see how it might fit into the plan. Those of you who are out of touch with developments in this sphere will be reassured to know that it has never been the D.G.’s intention to push ahead with reshaping our field medical organisation until he is fully satisfied of the soundness of the new fabric. Amongst the patterns produced for his appraisal, when it became his heavy responsibility to equip us for nuclear war, was the so-called “New Look,” which we might call a nice Harris tweed with an intricate Crosse-stitch pattern. But just as we may claim that in “Mushroom” we showed a lead in demonstrating how troops might be protected in the field, so in elaborating the “New Look” we were perhaps a step ahead—to far ahead, in fact, because the staff have not even yet determined either the make and shape of the divisions of the future nor the tactics of the nuclear battlefield. So now the D.G.’s aim is to ensure that we build our structure on sound foundations. He is thinking in terms of the bricks of which it will be built—possibly units capable at all levels of caring for some 100 patients. This line of approach might well be compared to that being undertaken in such circles as the Headquarters of the Allied Land Forces of Central Europe, where French staff officers particularly, are elaborating the theory of the “critical mass” in the organisation of all arms for nuclear war. And how glad you die-hards will be to know that he is likely to retain the name of “field ambulance”; though the most reactionary die-hard must admit that the name is worthless unless the new field ambulance can do a job worthy of the great traditions of the old.

Two other very important facets of planning and training dealt with outside the main theme of the exercise were First Aid and Psychological First Aid.
Brigadier Phillipson’s valuable talk on the latter subject should be read by everyone in the exercise report. It would be wrong to attempt to make a précis of all the sound advice he contrived to pack into twenty minutes. Captain S. E. Rayner told us of the achievements of the new First Aid Training School, which in its first year has trained for the army 967 first-aid instructors from combatant units—good instructors, too, for 20 were graded outstanding and 216 above average, whilst of those sent to the school 8 per cent were failed. A good start has also been made in the Territorial Army. Captain Rayner’s talk included reports which proved that these instructors are actively employed in spreading the teaching throughout the army, and from one personal report we learned that even in peace time lives can be, and have been, saved as a result of this. In an outside demonstration we saw competent first-aid being done by young soldiers who had been trained by regimental instructors.

The exercise theme began to unfold in a discussion in late autumn of 1960 between the D.D.M.S. of the Avalon Command in the U.K., Lieut.-Colonel Hood, and his A.D.M.S., Major Blyth, about how effective aid to civilian casualties could be given by army medical units in the command if the period of international tension then prevailing should culminate in a sudden enemy attack on main centres of population. We in the audience were joined by the Army Commander, Lieut.-Colonel J. E. Miller, who dropped in at the D.D.M.S.’s office and stayed to hear his plans and to ask a few questions. (How young Lieutenant-Generals are these days—and how did the make-up man resist the temptation to plant upon those smooth features an efflorescent moustache of the type which, with memories of a certain A.D.M.S. in “Royal Road,” we might call Phlox drummondi?) The plan expounded by General Hood aimed at guaranteeing to the Civil Defence organisation all over the U.K. a certain number of beds in places where they would probably be needed, and by locating such hospitals in army barracks to avoid making demands on buildings which might be earmarked for other uses. It was hoped that by selecting four alternative sites suitably spaced round each likely target for attack at least one of these should be suitable, however the fall-out pattern might develop, for the establishment of an emergency hospital of some 1,500 beds, about twenty miles to the windward of whatever should prove to be ground zero. Such hospitals would have to be set up within eight hours of an attack, so careful planning had been undertaken to staff and equip them; and the pre-selected sites for the hospitals, like the target areas they would serve, had been given code names. The staffing of the hospitals was to be by such units or sub-units as could most easily be spared from field formations mobilizing within the command, together with increments from static medical units, which were to consist of detachments of one to three medical officers, three nursing officers, and 30 other ranks, specially trained to staff and equip 100-bed blocks for various types of case. These sub-units and detachments would bring equipment with them, and would hold any necessary extra equipment as a Civil Defence reserve. Further help would be given by the provision of a central sterile supply service from the nearest peace-time military hospital. Ordnance would provide laundry facilities, including washing of surgical
textiles if sterilization proved to be impossible. Royal Engineer assistance of every sort might well be badly needed, and it was felt that amongst the many claims on their time from all sides our first priority might be in connection with water supply.

Our next meeting was with a District A.D.M.S., one of those who would have to mould into an efficient working unit all the bits and pieces raked together by the D.D.M.S. on the day of trial. It was well that he should be a fairly genial and even-tempered officer—Lieut.-Colonel Dick in fact. The army's medical plans seemed to be well laid and in competent hands; and after lunch we were given a similar insight into the planning and organisation of Civil Defence, in a very interesting presentation by a team from the Army Operational Research Group, led by Mr. Gould and Mr. Smith, who themselves began with a talk on general Civil Defence organisation illustrated by a first-class floor model, which must have made even Mytchett envious. Then followed two playlets. In the first we were present at the dramatic moment when the duty officer at a Civil Defence sub-regional headquarters was aroused to hear of a mega-ton explosion over Birmingham. This playlet was designed to show the state of the city in terms of fire, destruction, and radio-activity, hour by hour after the explosion, and to portray the Civil Defence counter-measures as realistically as possible; to try to determine the earliest time at which the reality of help, and not its planners' mirage, might first take useful shape. It was an honest and forthright presentation of what might well happen if we should be faced with such a situation to-morrow, and A.O.R.G. deserved the congratulations which they received from all sides. The second playlet was set in an A.D.M.S. office, and A.O.R.G. assumed that our 1960 telephone calls would be complicated by being able to see the caller on a TV screen, and they had provided the A.D.M.S. with one, on which we could see the characteristic silhouettes of those with whom he spoke—the unmistakable D.D.M.S. for example, as solid and dependable as the Rock of Gibraltar, and a well-known figure at Mytchett too, for it was Lieut.-Colonel Hooper. But despite this amusement this last playlet failed to hold my interest. Use of the telephone to heighten excitement or tension is a common dramatic device, and at Mytchett it has been freely used for comic effects. Here its overuse induced boredom, and not benign soporific boredom for it was punctuated by sharp pricks of irritation. I make this comment in the spirit of the notes on A.F.B2078, for confidential reports on majors and above—"Everyone has his weak points as well as his strong ones; therefore, describe both."

An oleaginous stream of praise often fails to impress superior reporting officers, who may in fact be moved to suspect the initiating officer's own judgment. But in revealing weak points one can often see mitigating influences underlying them, and so it is here. I have reason to suspect that Deucalion was sold one of those pups of which wary exercise producers have learned to be very suspicious—the bright idea conceived too late for rehearsal. Of course he did not tell me this himself, so, glancing again at the notes, we can infer that Deucalion is "loyal, and gets results by leadership, not by driving." Already he must suspect that his grading will be "above average," or even "outstanding."
So much for Birmingham’s H bomb; and before the blitz got any closer to Mytchett the first day’s work ended with a playlet in which we heard discussed such tricky ethical problems as euthanasia and priorities for treatment when one is faced with cases who could live to fight another day, and others who might never be restored to full function or may even be doomed by ionizing radiation. And just before dispersing for the evening we visited a deep shelter constructed in section near the officers’ mess. Whilst we were looking at this, a motley crowd of civilians, ranging from infants in carry-cots to old age pensioners, converged upon it and were bedded down by the shelter officer. They had come because an enemy air attack was thought to be imminent, and they had not long to wait, for in less than twelve hours—at 0425 on the 6th October, 1960, in fact—a nuclear bomb explosion just north of Reading was reported. We heard of it next day at breakfast. Some pretty glum looks were exchanged by the curmudgeonly old traditionalists, that is to say by more or less anyone in “flannel,” when a wireless musical programme opened up at breakfast; but it was soon interrupted by an unmistakable B.B.C. announcer with the awful news of the enemy attack, though it was reassuring to realize that, judging by the wind direction, we should be just outside the fall-out area. After this news flash the announcer said we were to have the scherzo from “Frankie the Bagpiper,” which proved to be a pretty cacophonous noise. I was assured that it was a genuine excerpt from Weinberger’s “Schwanda der Dudelsackpfeifer,” but could it be that someone was having his leg pulled, and at breakfast too?—monstrous.

After visiting again the deep shelter, which was some fourteen miles from the edge of the fall-out area, we went back to the gymnasium to hear how the district medical authorities were dealing with the situation. They had decided to open the support hospital in Keogh Barracks, its code name being “Harden”—all the code names were those of R.A.M.C. winners of the V.C. The D.D.M.S. dropped in to be briefed, and the layout was explained to him on a fine model of the barracks, and so we were given a clear exposition of what we would be seeing in the course of the morning’s visit to the Harden support hospital, which together with expansion accommodation being prepared at the Cambridge and Connaught Hospitals was to provide the necessary 1,500 beds. This was a most impressive and practical demonstration. Keogh Barracks, which during the night had housed its ordinary occupants, was now a hospital engaged in admitting and treating the casualties with which it was steadily being filled. The casualties came from a filter unit set up by a Medical Staging Unit, at which sorting had been carried out and from which the first priority cases had been sent elsewhere. The task of Harden Hospital was therefore to give any specially urgent treatment, but principally to “support” them for a period of up to eight days until definitive treatment could be arranged for all. Triage having been done elsewhere, the hospital was organised in special sections for the supporting of such types of case as head injuries, burns, fractures, chest and abdominal casualties, thus benefiting by being able to use teams trained to handle special cases. The teams were planned to handle 100 cases—another phase in the search for the medical “critical mass.” Although in our normal training it is hardly possible to give
such specialized instruction to large numbers of medical auxiliaries it was clearly shown here how, if our men are soundly trained, the impetus of an emergency could enable them to be organised in a very few days into smoothly working teams capable of a considerable "through-put," to use one of those misshapen monsters recently spawned from the union of zeal for progressive planning and desire to coin expressive phrases. Be sure to read all about this in the report.

There was a tremendous amount to see as our progress round this emergency hospital was kept up to time, and any tendency to linger gossiping with members of our syndicate or with friends met en route was checked by the urgent Gs sounded by Bandboys R. Taylor and D. Boone, who I hope were making the most of what may have been the one and only chance in their service of making so many senior officers "jump to it." (If that "D" stands for Daniel, as surely it must, we were perhaps lucky not to be speeded along by shots from an expertly handled frontiersman's musket.) Impressions had to be stored in the mind rather than in a notebook, and for details of the staffing and organisation of Harden hospital I must refer you to the official report which will be a valuable companion to "Bombs on Benghazi" ("Royal Road," 1955). We saw various types of casualty being handled. The F.T.C. had been helped in the masterly casualty faking by teams from 56 (London) Infantry Division, T.A., and 10 (London) General Hospital, T.A.; and 51 General Hospital, A.E.R., helped with the reception and handling of the casualties. Pyjamas were still in use, but I made a note of the exercise A.D.M.S.'s idea of using flannel shirts as a substitute, which struck me as very sensible from the point of view of storage and nursing in field conditions. A well-organised Information Room, in which B.R.C.S. and Order of St. John workers and chaplains were helping, prevented the work of the hospital from being impeded by members of the public. Lieut.-Colonel Johnstone convinced us that the forcing of a high protein diet upon serious casualties within the first fourteen days may be unnecessary and even harmful because the hormonally regulated katabolic phase has not yet been succeeded by the hormonally regulated anabolic phase; but a more direct appeal was made by a "gastric mucosal stimulant" in the form of that experienced high-power demonstrator, Major Harwood, A.C.C., who brought us back to grub, and showed us how his corps could help us to cook and enjoy it. Whilst he spoke his team was building a field oven in which they cooked delicious Welsh rarebit. How I kicked myself for having taken only half a piece as I hurried on, munching happily, to the mobile laundry, where, though no samples were offered, we saw how the R.A.O.C. can help us. In the absence of lifts, casualties were being conveyed to the windows of upper storeys on hoists improvised by the Royal Engineers from such equipment as fork-lift trucks and builders' hoists, whilst equipment was going up on a stacker and bundles of dirty linen were cascading down fire escapes—what a pity we couldn't bring the children. I hope that the model of Harden Hospital, supported by photographs of these equipments and perhaps of some of the wards and departments, will become a standard exhibit at the Field Training Centre.

On the second afternoon we went first to the Royal Aircraft Establishment at
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Farnborough where a company of a M.S.U., complete with its equipment, and with attached Q.A.R.A.N.C. personnel, arrived in a Blackburn Beverley aircraft, and made a business-like job of de-planing and moving off the airfield in its waiting vehicles, despite the handicap of the plane's doors jamming. Any impatience which that small hitch might have caused was allayed by an inspired exhibition of helicopter aerobatics by a Westland Widgeon, which the pilot of the Westland Whirlwind, which was also on show, was thoughtful enough not to emulate whilst he was conveying the Colonel Commandant and five other senior "stretcher cases." We also saw the Single and Twin Prestwick Pioneer. I first heard of this wonder aircraft which can spring into the air with a really worthwhile load of casualties in 1953, when Brigadier Elmslie, then D.D.S.T. at the War Office, told us of it at Exercise "Cambyses." Ever since then I have been putting my money on it rather than on the helicopter—so expensive, so difficult to maintain, spending many hours on maintenance for each hour in flight, and so impossible to conceal in the field. What if Westland are developing a beautiful new one which will take some thirty-six stretcher cases? This might be very useful, but in the field, especially in the forward areas, the medical services are not well suited by vehicles or aircraft with a large payload. Other administrative services can offset the inconvenience of the limitation of daylight movement and of all administrative traffic because of enemy air activity, by planning convoys at suitable times and may be helped by increasing payloads, but in our case this might often result in uneconomic loading. The time and nature of the medical task cannot be foretold, and our precious cargo cannot usually be kept waiting. Little and often is what we need. So I was most grateful to "Deucalion" for showing us the Pioneer, and I hope to hear much more of it. At this demonstration I learned the secret of the presence at Mytchett of my old friend Colonel Livingstone Kerr, who retired from the appointment of A.D.M.S. 51 (Highland) Division some time ago. The other senior Territorial delegates from beyond the Tartan Curtain had asked me if his presence might constitute a precedent for other retired Scots A.D.M.Ss. I could only suggest that he was with us in his capacity of Deputy-Lieutenant of the County of Lanark, and perhaps I was not too wide of the mark; for it was his ability to put in a word in the right quarters which helped the D.G., who always seems to know how to get what he wants, to secure these fine Prestwick Pioneers for the demonstration. It was no mean tribute to the quality of the entertainment provided at Mytchett, and to the Territorial spirit, that "Livy" Kerr asked for no reward other than an invitation to the D.G.'s exercise. The exercise report should be consulted for planning figures concerning these aircraft, but some brief particulars can be given here. The Beverley can carry some 12 tons of vehicles, stores, or men, with a range of 1,000 miles. It can take 48 stretchers and 34 sitting cases (preferably not too badly hurt, as they travel in the tail boom) plus 5 attendants. With a load of 60 casualties and 5 attendants the range can be increased to 1,500 miles—e.g. a non-stop flight from Malta to the U.K. The Single Pioneer takes one stretcher and two sitting passengers, with a range of 300 miles; and the Twin Pioneer takes nine stretchers, two sitting cases, and a medical orderly; or without
stretchers, 15 sitting patients and a medical orderly; and it has a range of 400 miles, which can be increased by lightening the load. The Westland Widgeon takes two stretchers and a medical attendant, or four passengers, and the Whirlwind takes six stretchers and a medical attendant, or 8 to 10 passengers, but has a range of only around 200 miles compared to the Widgeon’s 260 and the Pioneer’s 300 to 400 miles.

Whilst the M.S.U. company which had flown to Farnborough were moving to Aldershot and preparing their emergency hospital, we visited a camp for the homeless organized by the Army School of Health. A great crowd of homeless people were arriving at the Reception Centre, and a B.B.C. man was selecting a cross-section of them to record their experiences for an outdoor broadcast. Mrs. Waites, the wife of Sergeant-Major Waites, R.A.M.C., was the theatrical producer of this dramatic interlude, in which humour and pathos were most acceptably blended, and her own fine acting was ably supported by a cast of soldier actors. Most of us thought that the "man with the mike" was a professional, but he proved to be Corporal Haddon, R.A.M.C. This outdoor broadcast was a telling and lucid way of underlining the varied personal and communal problems which would have to be considered in organising such a camp for the homeless; and then as we were conducted round the camp we could study the methods by which an infantry unit might handle such a task with help from other arms, such as R.E., R.A.S.C., A.C.C., and of course army health personnel. For me, this ranks as the best demonstration which I have yet seen staged by the Army School of Health.

When we moved on to the site of the emergency hospital the M.S.U. company which we had seen landing at Farnborough had set up a ward for 100 patients, 20 in beds and 80 on stretchers, using the Universal shelter. It had taken over certain casualties which had been left behind when another unit was hurriedly moved. Some of these were too ill to be moved, but fifty were less serious, being all fracture cases in need of plaster. To deal with these Harden Hospital, in response to an urgent request, had sent a plaster team of twelve R.A.M.C. and Q.A.R.A.N.C. student nurses who were allowed just half an hour to complete the task. This we saw them achieve with practised ease, although, as we were told by Lieut.-Colonel Waterston, they had in fact received only some three days’ training in the methods which they used. This demonstration illustrated the scope of modern transport aircraft. We were told that two Beverleys can transport three complete M.S.U. companies; and of course there are many other useful possibilities, since the Beverley can also take lorries loaded with the equipment of companies or sections, and the men could even more conveniently be transported in a Britannia, which takes 100 men. A demonstration by the Cambridge Military Hospital showed us how with good routine various types of case can be treated or supported whilst awaiting definitive treatment, in considerable numbers, with minimum use of staff or waste of time. We saw and heard explained drills for applying skeletal traction for fractures of the lower limb with Steinmann pins (ten patients in half an hour); and the admission and treatment with full-length plaster-of-paris leg splints of one hundred cases of
compound fracture of the tibia and fibula (two hours and five minutes). Various
aspects of the care of mass casualties were discussed, and I felt glad that Major
Downie, who must have a future as a clinical teacher, could be more cheerful
this year, for I remembered his tender solicitude last year for that pathetic
ward full of girls doomed by an overdose of "R"—a real tear-jerker. Finally the
central supply department of the hospital, expanded to cope with mass casualties,
was visited. This is emphatically a section of the report which you must all study.
There was no faking about the supporting treatment which the staff of the
Cambridge Hospital next administered, and without that magnificent tea many
of us would have had little spirit for the discussion with which the day's work
ended.

At the exercise supper that evening our most senior guests presided at tables
decorated with their national flags; and for me and my contemporaries the
time of pre-dinner drinks was a very special occasion, for we drank them with
Lieut.-General Chaudhuri, who was in our batch at the Depot, way back in '28.
A still more remote link with the past was being celebrated by Lieut.-Generals
Burki and Drummond who were fellow-undergraduates at St. Andrew's
University—and as that seems to come under the heading of "things which might
have been expressed more delicately" I might add that as the evening wore on
their undergraduate days did not seem to be so very remote after all. Oh well,
perhaps I had better stop trying to take my foot out of it.

The last morning began with a final visit to our friends in the deep shelter
whom we saw being released from their long confinement after monitoring
teams had decided that a safe escape from the fall-out area was open to them.
Their part in the exercise was delightful evidence of the way in which the great
occasion of the D.G.'s exercise can touch every inhabitant of Mytchett, in or
out of uniform—in fact in or out of "nappies." Then, after the talk by Brigadier
Phillipson which I have already mentioned, we saw a playlet which suggested
how we might reconcile staffs and commanders to some of the aspects of the
proposed new units which especially affect them. This did not quite ring the
bell for me. I suppose there may be divisional commanders like that, but oh,
how I prefer Captain Critchley as a Russian general! During the general
discussion of the exercise Brigadier Officer said that he believed that the new
units could have done the job, but he felt that a field ambulance could have done
it just as well. He stressed the superiority of a unit under its own commander
to the collection of detachments of various units which had formed Harden
Hospital. This was an echo of the "meccano-set" criticism made last year by
Colonel Meneses, and readers of my last report will be relieved to hear that he
was there again with some sage comments, about the importance of communica-
tions, and that he had come not from sea-level on Rockall, but from the rarefied,
almost stratospheric atmosphere of S.H.A.P.E., where any waves he may be
contemplating are not those with which the Inspector of Training is so familiar.
I gave a tentative toot on my trumpet at the neighbouring walls of Jericho by
suggesting that army health is a sphere in which we have won our battles, having
convinced the whole army of its importance, and handed the torch to them in
the concept of Health Discipline. Any failure by commanders to play their part in this can be neutralized by a puff of D.D.T. and a pocketful of sulphasuccidine tablets. As the next war will be a contest of morale—a powerful platitude that—we should transfer our efforts to the spiritual sphere, in which we can make a contribution to the army which might equal all the great achievements of our Corps in hygiene. The discussion was brightened by a small freshet from the reservoir of eloquence and humour which I knew to be dammed up behind the benevolent exterior of Colonel Shaeffer, a prominent surgeon of the United States Army who had come in General Hayes’ party from Washington. He has recently covered a great deal of the world with a high-powered team of lecturers on the handling of mass casualties. Anyone who has experienced the stream of Joe Shaeffer’s oratory in full spate will know that to offer him five minutes was like trying to confine the mighty Mississippi between the banks of the Basingstoke Canal. I wish that as many of you as possible may yet have the chance of hearing him on his favourite subject.

In an interesting demonstration of new American, British, and French field equipment, including inflatable huts and a variety of cooking and heating equipment, everything looked good and seemed to work well, and with very fresh memories of a family caravan and tenting holiday I longed to “win” the smaller inflatable hut. Unfortunately it is too often a characteristic of these demonstrations that all the fine things are hustled back to Didcot and other hidey-holes and never seen again—by me at any rate. Just as the army, when it introduces new patterns of uniform, gives you and me a reasonable time in which to wear out the old type “in possession,” so it seems to need a most inordinately unreasonable span to wear out all the old junk which it holds stored up against the possibility of war. If the medical services are going to have to handle and treat many more casualties spread over a much more extensive and dispersed battlefield with much the same number of men and vehicles as before, then we really do need to be allotted a very high priority in the bidding for genuine lightweight materials. Purely medical equipment accounts for only about one-tenth of the load of the field medical services. The rest is G 1098 and all that, and the bulk of it is tentage. The hospital marquee tent weighs 2½ tons. When the staff of an Evacuation Hospital, which in future may with advantage include many Q.A.R.A.N.C. other ranks, have erected several of these after a long night move, how fresh do you suppose they will feel for their proper job of caring for the casualties? As I have not got an inventive or practical mind, I used to throw out this challenge to the Didcot experts who have that sort of mind. In the 1950s they can do almost anything with plastics. Suits of clothes, fishing rods, and even Trinity House pilot boats can be made from glass fibre. But we are still lugging around heavy stiff canvas and clumsy poles, and I do not exclude the Universal Shelter; and when we have erected these confounded things we set about disguising their outlines with piles of sodden nets and crude garnishing material, which we must also drag around the countryside in vehicles, in the load tables of which no provision is made for the amount of camouflage material which would be needed to make a proper job of concealing the vehicles and the tents and
shelters which they carry. When will the experts give us a lightweight shelter fixed perhaps with wires from trees or light posts, so that it has no outline to be disguised and can fit into various awkward places? What would the Royal Army Ordnance Corps think of us if we asked for transport to take with an expeditionary force going to a tropical country several tons of Jesuit's bark? Of course, I know that the most essential need for the lightweight materials, the tubular aluminium poles and so on, is the construction of the aircraft which will gain for us the air supremacy by which alone we may hope to avoid having too many casualties to handle. But all the same it makes you think.

Back to "Deucalion," which ended with talks on training and Territorial problems by the Inspector of Training and Brigadier Ward, and some remarks by the Chief of Staff of the U.K. Land Forces, Major-General Blacker. During the Director-General's closing address we had the now traditional moment when he thanks the back-room boys who work so hard to make the show go with a swing, and the curtain rises to show a beaming collection of men of the Field Training Centre, under the regimental sergeant major. As a former producer I was especially struck by their noiseless assembly, for I had memories of my anxiety, when we were founding this tradition, of the D.G.'s voice raised to drown the scuffling of army boots on what was then an improvised stage, and even perhaps some throaty whispers from Sergeant-Major Cross—no terminal "E" to distinguish him from our usual principal boy, Major-General Crosse, D.M.S. of a succession of army groups. But anxiety did not press too hard for, with the successful delivery of the exercise conceived by the happy union of several minds, our main task was accomplished. But the birth of an exercise does not end the responsibilities or the hard work of its organizers. Mytchett, the puerperal mother, soon returns to normal life, but if her child is to play his full part in the training of our officers, real hard work has to be put into the preparation of a concise and readable report—the full report to which I have made frequent references in this and previous accounts, from which not only those who attended but many who did not can extract the important lessons. In general there is nothing deader than a dead exercise, and if the reports are very bulky documents in which the teaching points are like currants in a N.A.A.F.I. cake—sparsely distributed in a somewhat stodgy matrix—people just will not read them. It takes a great deal of time and care to reduce playlets and demonstrations to précis in which the training lessons are crystallized, but it is well worth while from the point of view of the vast majority of readers, and there won't be any "vast majority" at all if the effort is not made. Copies of the full scripts of playlets can be held at the Field Training School for loan to units who want to use them in their own exercises.

Deucalion himself at his final personal appearance spot-lighted in a most amusing way a serious medical problem of this nuclear age—the need which the incidence of mass casualties might impose upon us to leave much of the first-aid and supporting treatment to medical auxiliaries working under as much direct supervision as the hard pressed doctors can afford them. I have heard Colonel Shaeffer speak of this problem as it touches operative surgery. The specialist
surgeon's knowledge and experience will be so essential for the supervision of scores of less skilled operators who must immediately tackle the cases urgently awaiting operative treatment that he must not get immersed in an operation which may last several hours, during which he could have guided the steps of those dealing with a dozen cases or more—advising here, helping there. "I foresee some pretty ropy resections being done by the dermatologists and the psychiatrists," said the colonel, or words to that effect. So when Deucalion for the last time took the stone from his pouch he pondered whether to create a super-surgeon or two, or a swarm of sub-professional personnel. He plumped for the latter. Over his shoulder went the stone, and out and across the gymnasium pattered the swarm of very small children dressed as surgeons from the cap and mask to the little white rubber boots—with a Pied Piper's little lame boy rather bemused at the rear helped along by pats from the audience. Could they all have been Aherns?

All in all this D.G.'s exercise was a sparkling production, and if some of the sparks flew from the grindstone of one with an axe to grind they were sparks well calculated to light the fires of constructive enthusiasm in our minds, for the "New Look" seemed to adapt itself fairly well to duties in aid of the civil power. Those who read my account of "Royal-Road" will have guessed that some of us were unimpressed by its advocacy of the "New Look" in its application to the divisional area. This may be only one small part of the problem. An exacerbated threat of casualties must in future fall upon every part of a theatre of war from front to rear. We must get things right from the point of view of the whole theatre. But I believe that those who are the most profoundly disturbed by the implications of the proposal are those with the greatest amount of operational field ambulance experience, or who have had a chance to try it out in manoeuvres. Let no one think that their antagonism is parochial or swayed by sentiment. Unless one believes that air forces alone will win or lose any future war and will make it impossible for armies to stir on any road or track, or for light aircraft to venture into the air, then it will be in the divisional area that most of the fighting will take place, apart from airborne and similar incursions into rearward areas. The field ambulance will still be the reception department to the whole evacuation chain, including the medical units affording definitive treatment to the wounded—close medical support for the fighting troops and their often hard-pressed regimental medical officers its most sacred task. CLOSE MEDICAL SUPPORT—the slogan deserves block letters, for this close support of R.A.P., where certain other armies keep two doctors, should always be our most pressing anxiety in battle. No one who has seen the horror of R.A.Ps. overwhelmed by casualties or by other disasters which suddenly strike them could contemplate any weakening of this link in the chain. The divisional area is the point of honour of our Corps, and incidentally it could be said to be the scene of all the pictures in our V.C. Room of which we are so intensely proud except that of Assistant Surgeon C. M. Douglas in his boat. So perhaps sentiment does come into it after all, but parochialism—never. Our combatant commanders and staffs know well how difficult our task may be and how disastrous the effect on
Exercise "Medical Deucalion"

morale if we should fail in it, and I have yet to hear one of them suggest that we can suffer a cut in the divisional medical services, though many have said that we may need an increase. Manpower must certainly be found to bolster up corps and army medical support, but the suggestion that the divisional area has always been overinsured could never be accepted by anyone who saw fairly heavy casualties, as for example in the Normandy bridgehead. A committee appointed by the D.G. to report on the "New Look" consists of men who had that experience and we may feel complete confidence that they will find the answers. If they do so they will deserve great credit, but the lion's share must go to the originators of the proposals for the boldness of their conceptions which assuredly put the cat among the pigeons, stirring us all to face up realistically to the problems of the future, and focusing the attention of commanders and staffs at all levels upon our difficulties. After all, it is always easier to criticise than to create, as Whistler quite probably told Ruskin, and it certainly calls for less genius. I was at the War Office in the days immediately after "Avernus" when Colonel Crosse was flinging the paint at his earliest canvases, and I am not entirely sorry that I dodged having to share the hard work of the first key plan. It was much easier to be asked to try out the ideas in the field, and if I have been one of the critics I have never withheld my admiration from the creators. I am sure they have given us a stimulus from which something good will result before long.

And so we come to the moment at which I must assess the grading of "Deucalion." How can I fail to be oppressed by a sense of my own inadequacy as I grow increasingly aware of that benignly dignified presence behind my shoulder, his rather heavy breathing, with—yes, I think just a suggestion of nectar, revealing that even the gods are not untouched by concern over our human judgments? Through which lines shall I run my pen—above average, average, below average, or all three? We are nearly all average—some perhaps more average than others—but we take a poor view of the chap who tells us so on paper. So out go the last two. Above average? Well, that is scant praise when I have already slid that it is traditional for each D.G.’s exercise to be better than the last, each one inheriting some useful bit of property, a new stage and so on, from its predecessors. I doubt whether this traditional progression can possibly be maintained, short of obtaining a grant from the British Council, sending selected soldiers to the Royal Academy of Dramatic Art, arranging échanges au pair with Hollywood, and possibly offering the appointment of Inspector of Training to Mr. Cecil B. de Mille. Above average certainly, but think of some of the high-lights. A.O.R.G.’s fine model; Keogh Barracks ingeniously transformed overnight into Harden Hospital; those lovely Prestwick Pioneers; the outdoor broadcast, and the barrow-boy with his radio-active apples at 2d. extra the pound; Lieut.-Colonel Wheatley's drill for traction with Steinmann pins which really went through; the atomic bomb singeing poor old Deucalion's whiskers on the proscenium. And do not imagine that it was all charades. Think of all the valuable training absorbed by so many officers and men of Regular, A.E.R., and Territorial units in the process of planning, pre-
paring, and staging the exercise for our enjoyment and instruction. Deucalion
had every reason to be proud of the men and women he created. Out goes
"above average." The only possible grading is "outstanding."

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