Book Reviews

Thomson and George Ballingall. He has very little to say, however, about the short-lived chair at Dublin, but the final chapter provides a sketch of medical education in the wake of the Crimean war, and the establishment of the Army Medical School at Fort Pitt, Chatham, in 1860 and its relocation to Netley three years later.

Overall, the book provides a good deal of useful information about British military and naval medicine, but it lacks a clear sense of purpose or unifying argument. One assumes that the book was intended as a supplement to Sir Neil Cantlie's two-volume history of the Army Medical Services, which appeared in 1974. If so, it succeeds in the sense that it provides a more detailed study of military medical education and in that it utilizes some new published sources (mostly medical monographs but also some manuscripts). It does not, however, supersede Cantlie's account, which remains the more detailed of the two, and the more closely grounded in official records.

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The imprisonment of large numbers of Allied soldiers in the Far East, and their experiences until their release in 1945, was a significant occurrence in both military and medical history. Yet, strangely, good secondary source accounts are remarkably hard to find. This book is therefore a welcome and excellent addition to the small literary resource available. The author, Charles Roland, is a Professor of the History of Medicine at McMaster University, Ontario. In his preface he gives some clues as to why the Far East Prisoner-of-War (POW) experience has attracted relatively little academic attention. He points out that POWs in general are "low status" players in the military history scenario. They win no battles or medals, and many lead boring and unhistoric existences in drab camps. If they are lucky, they return home alive, but unglorified, to a retarded military career, or civilian life in which no one asks "what did you do in the war?". Small wonder that historians have tended to ignore this backwater of military history.

This viewpoint is, however, a major misconception, and certainly so for Second World War Far East imprisonment. Here, mere existence was difficult, and required regular acts of extraordinary heroism. Roland also points out that it is highly appropriate for a medical historian to investigate this subject, as it "is explicitly a medical story since every POW was a patient at some time" during their captivity, many becoming seriously ill, and a number dying before release.

An especially important feature of this book is that it is entirely concerned with POWs captured in Hong Kong in late 1941. This is understandable, as many were Canadian, and their oral history record was particularly available to the author. It also adds, however, to the uniqueness of the book, since other secondary sources on the Far East POW experience have almost all dealt with the fall of Singapore and the subsequent imprisonment of British, Australian and Dutch troops, and their experiences in Changi Goal, or (most infamously) the Thai-Burma Railway.

The book begins by describing the rapid events leading to the surrender of the Far East Allied Forces. In Singapore, the amazing Japanese sweep down the Malaysian peninsula was known as the "Hundred Days War"; for Hong Kong it was an "Eighteen Day War", culminating in capitulation on what must have been a most
miserable Christmas Day, 1941. The Canadian force of 1900 men had arrived just over a month before. The day of capitulation was also marked by especially grim precursors of things to come—most notoriously the summary murder of staff and patients and rape of nurses at the temporary hospital of St Stephen's College.

In later chapters, Roland describes POW camps and life, and POW hospital and medical care under difficult circumstances. Two major chapters deal with the more specifically medical matters of 'Trying to cope with too little food', and 'In sickness, rarely in health'. Then follow accounts of transportation of many of the POWs to Japan, and life in the Japanese POW camps until the end of the war in August 1945. There are two final chapters; first an examination of the reasons for the maltreatment of POWs by Japanese soldiers. This appears related mainly to cultural and ethical factors in Japanese society (notably the code of “bushido”), and to the inherent violent discipline in the Imperial Japanese Army (where IJA soldiers were often beaten in ways not dissimilar to POWs). Finally, the last chapter discusses the effects and aftermath of the experience. A total of 557 of the original 1975 Canadian soldiers (28 per cent) died in captivity. Evidence suggests that the survivors suffered ongoing and more long-term physical and psychological ill health.

As well as using interviews with surviving POWs, Roland has drawn on the little-known but freely available primary source records which detail camp routine and organization, dietary patterns, and medical illness and death statistics. Considering the extraordinarily difficult circumstances in which these men lived, these records are a tribute to their fortitude and determination.

In summary, this is an excellent book. A minor quibble is that some mention of the long-term medical sequelae of the Far East POW experience would have been useful. Tropical worm infestations, neuropathic syndromes, and what we now call post-traumatic stress disorder, continue to plague the lives of some surviving POWs. This is a minor problem, and is anyway not part of the major purpose of the book. Medical and military historians in particular, but modern historians in general also, will be pleased to have a copy on their shelves.

A parting hope is that this work may stimulate other historians to examine other lesser known locations of Far East imprisonment—for example the Formosa copper mines, the Burmese end of the Thai-Burma Railway, and the Sumatra Railway (which was so remote that work continued three weeks after the end of the war, when news finally reached the camps).

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When the problem of “Gulf War Syndrome” arose in the 1990s, it was soon apparent that more than one gulf was involved. Geography apart, there was a chasm between the media’s reporting of the problem and medicine’s response to it. The media dealt in heart-rending individual cases and conspiracies in Washington and Whitehall, while the medical literature was almost entirely epidemiological, in line with current orthodoxy, with no sign of the individual patient. The sort of paper that neurologists routinely wrote a century ago, combining lucid discussion of the clinical issues with brief case histories, was nowhere to be seen.

It has fallen instead to the journalist Jeff Wheelwright to try to bridge the gap. The irritable heart explores five cases in detail, weaving in some of the socio-political background and a discussion of the