RICHARD PHILPS, MD Experiences as a Prisoner-of-War in the Far East, 1942-1945. especially at Haruku

> Interviewed by Charles G. Roland.M.D. 17 August 1986

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This must have been very helpful to you, to have people who knew what was going on.

R.P.:

Of course it was, yes.

C.G.R.:

Did it lead to any difficulties in the sense of...were there feelings of inferiority directed either by the Dutch towards you or -- I don't mean you personally -- but do you understand what prompted my question?

R.P.:

Yes. I do feel that we were remarkably fortunate, perhaps partly because we foresaw that this might occur. So each side, each party, took very good care to see that it didn't, because we realized there was a job of work to do. Of course, as soon as we were prisoners it was quite clear that we were all working in the same direction. So, at <u>no</u> time was there hostility on this account. At no time was there anything but the greatest possible cooperation.

We did take one or two precautions. It touches on your question but it's not directly an answer to it. If for any reason any treatment (and most of it was, incidentally, in very short supply) was to be given in a camp where there were both British and Dutch, decisions had to be made as to who should receive it and who should not -- in fact, who were the people most in need? We tried always, whenever it was possible, to have a Dutch and a British doctor together making the decision, doing the examination, discussing it, and making a decision. There was never hostility between us of any sort in this respect.

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C.G.R.:

Good.

R.P.:

We sometimes felt that the Dutch managed to get more onions than we did, because their batmen were local people -- that's all. [laughter] But from the point of view of our work, no. Some people like Rudy Springer: you've probably heard that name mentioned so many times, he was absolutely magnificent with the British. I don't think he liked all of us that much, but he always used to say to me, often said to me, pointing to one of the prisoners, "I don't like that man very much so I'm particularly careful to do my best for him." [laughter] C.G.R.:

Splendid attitude.

R.P.:

That was Rudy Springer, yes.

C.G.R.:

Well, since you've mentioned his name, could you tell me a little more about him and his work? I was going to ask you about several of the individuals.

R.P.:

Rudy Springer was in practice as a surgeon in Java, and was

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side, you can see the whole length of its sacrum; straight on to the side you can see the whole length of the sacrum. If you look at a very, <u>very</u> emaciated man you can also see the whole length of his sacrum from the side, because his buttocks have disappeared except for a thin layer of muscle. And we turned this into a test. We had the men walk past us. When they were exactly sideways to us we assessed whether we could see the whole length of the sacrum; if we could, they got 50 grams of rice extra. It was a very good test because the number we picked out exactly fitted the amount of rice we'd got. It became known as the Springer-Philps test.

C.G.R.:

One which, fortunately, you haven't had to apply often since [laughter].

R.P.:

No. [laughter]

C.G.R.:

Yes, you did mention that, now that I recall.

R.P.:

Yes, I thought I did, yes. But it does point out what I was coming to, it points out the value of having doctors with two nationalities doing the test. No argument, no difficulty, no trouble. Those that weren't considered to need it, never complained.

C.G.R.:

Let me just go back, if I may, to the Dutch and English business. I just wanted to ask the obvious question, which is,

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HCM 19-86 Dr. Richard Philps, Lewdown, Devon, 17 August 1986 how did the men get along? R.P.:

I never saw any open hostility at all. The Dutch and British lived in different huts. There was never any difficulty in this respect. Though one perhaps felt that deep down there was a consciousness of difference, shall we say, but I think everybody was imbued with the idea that if we started grumbling between ourselves we would loose what authority we had in front of the Japanese. So we didn't.

There is a point which perhaps is a little unkind, but since we are talking about truth, it is important, and that is, you could tell a hut that had a lot of Australians in it, if they were all about and in the hut, because of the amount of the grumbling, the grumbling tone of the voices. The Australians grumbled much more than we did. We tended to get on with it and make the best of it. Sometimes they didn't, which surprised me. I think that when I started off at Mountbatten with the 10th Squadron of Royal Australian Air Force, they were fine chaps, I think by the time we were in contact with fine men. Australians in the Far East, they were not of the same class. Ι don't think they had conscription in Australia, but they were not anything like the top quality of the services. I always felt, as a matter of fact (I don't say this about Australians only), I think there was a good deal of...well, one sometimes felt, anyway, that men who were a bit troublesome at home tended to be sent to the Far East. I know I was, but that's another story! I break off for a moment and say that I was posted after I accused my senior officer of coming on duty drunk.

C.G.R.:

One would suspect a relationship.

R.P.:

Yes, one would suspect a relationship, shall we say, and regularly so. I told him I was tired of relieving him, of being relieved by a man who was drunk.

C.G.R.:

Well, let's get on to other questions here. One of the things that I'm extremely interested in, has to do with what, for want of a better terminology, I call the ethical problems of being a medical-officer prisoner-of-war. Can you tell me anything about these kinds of problem? The obvious ones in the Far East had to do with matters such as who went to work and who didn't go to work, who got drugs and who didn't get drugs, this whole area.

R.P.:

Well, yes. It takes a moment's thought. I should probably say things not in the right order. But the thing that struck me as soon as you said the words "ethical problem" was the question of certification of death. The Japanese required death certificates of prisoners who died. I'm speaking of Haruku. They required that the senior doctor -- he happened to be a Dutchman called Buning -- supply them with a number of death certificates considered to be sufficient to last for any given month, on the first of the month, signed, but with no cause of death on them. The Japanese put the cause of death that they chose. So this was strictly unethical, but what can you do? The

Japanese attitude was -- you do what we tell you or we'll kill you. So it had to be done. So that's something that immediately comes to mind.

The question of the [medical], treatment of one's captors, this is only an ethical problem if you refuse to do it. The Geneva Convention requires that you do. The Japanese were signatories but they didn't ratify the Geneva Convention. Nevertheless, they expected treatment from us, and this is what we did. I've no need to go into it again because it's a rather long story. The story of being able to blackmail them at Semarang. Blackmail them in the sense that I got taken to the hospital [outside the camp] to get medication for them. I could bring back things for the camp at the same time. It's hardly unethical, but perhaps it's bending the rules a bit. So those are two things that immediately come to mind.

Can you prompt me a little; what else do you want to know? C.G.R.:

Well, I mentioned the one about the men going to work and who had to work and who did not go. It was a question of sending sick men out so the sicker ones could stay in. R.P.:

Yes, there <u>always</u> was this difficulty, and Alastair Forbes had it more than anybody else. The Japanese, each day, each evening, came in to say how many men they would require on the working party next day. It was up to us to find them. It was usually fairly easy to find the number bar, say, 25. Those least sick had to appear as well, from whom Alastair Forbes could select those who ought to go. Simply to spare those who <u>couldn't</u>

go, because if we reached a point of deadlock, simply saying we could not provide the right number, the Japanese then and there would go around the hospital with sticks. Anybody who would get out of his bed and run had to come to the working party. Horrible as it may seem, this is what happened. I think Forbes told you that as well.

C.G.R.:

Yes. Now, how did the men react to this? R.P.:

What, to the opinion given against them? Never, never any bother at all. This is the very remarkable thing, that those who lost out in any situation where a selection had to be made of the better or the less suitable -- those who lost out, as it were -had to go to work when they really weren't fit, which of course was so common, or didn't get medication because somebody else needed it more: I never once heard a complaint.

C.G.R.:

That is remarkable!

R.P.:

Isn't it. Well, there was so many things that were remarkable, that showed the basic goodness of these people. There's something about being at rock bottom which brings it out -- in the vast majority. There obviously were exceptions, but the exceptions were rare.

I can remember two people at Haruku who didn't behave well, in the sense that they operated against our interests. C.G.R.:

Can you tell me a bit about that? I have no interest in names, of course, but can you tell me the kinds of.... R.P.:

Yes, I can tell you. Dead men had rings on their fingers and there were some people who saw fit to steal these rings to trade with the Japanese for rice or whatever. That was one. The other was a carpenter. We had a carpenter in the camp whose job, really, was to keep camp structures and such furnitures as we had in order. He thought it much better, much more profitable, to work for the Japanese and be provided with extra rice, which of course was [removed from] our ration. He died as a result, because he got himself so fat that when we were all starved on board a ship called the Maros Maru, coming back from Ambon to Java, those who had not yet, as it were, got used to starvation, died very quickly. He died very soon. But it's one thing to be given extra rations -- it's a dreadful thing to be given extra rations if they're taken from the camp supply. So there were The man who was chiefly responsible for those two incidents. stealing rings became well known for this and he got an immense beating up from his peers.

C.G.R.:

I was going to ask whether retribution of some kind would....

R.P.:

Yes, retribution did follow him. I don't know his more recent history, but I think he probably was quite well off in the camp.

C.G.R.:

Was there private trade with the Japanese, black market, or what have you? By private, I mean, could any individual do this or was there a camp organization.

R.P.:

It is quite a long answer. I'm speaking mostly about Haruku.

C.G.R.:

Yes. In Haruku I have a special interest.

R.P.:

If it's not Haruku I'll say so.

C.G.R.:

Thank you.

R.P.:

I was paid 125 guilders a month by the Japanese. They immediately -- I never saw 120 dollars [guilders] of that, because that was put into the Japanese bank, so-called. If I've said dollars and I mean guilders, please forgive me. The remaining 5 guilders were divided, 4 guilders 50 were withheld to buy vegetables for the camp. so I had 50 cents. It might sound incredible but this is how it was. At one stage I had to sign for it with my thumbprint, which I thought was funny. The 4 guilders 50, of course, provided vegetables -- insofar as it was spent on vegetables at all -- which should have been provided by the Japanese, not from my income.

Now, this next bit may be a story you've heard before from other people. The camp had a shop run by the Japanese, supplied from the native population with food bought, presumably, with our

HCM 19-86 Dr. Richard Philps, Lewdown, Devon, 17 August 1986 money. That I don't know [for a fact]; that was assumed. Anyway, there was the food, there in the shop.

Now, you couldn't buy anything in the shop unless you had a shop ticket. The shop tickets were provided by Sergeant Mori, who was the NCO in charge and a dreadful man. The shop tickets were provided by him. Each man who went out and did a day's work got one shop ticket. Of course, there were some people who didn't go out and do a day's work -- and the doctors were particularly among them. They did their day's work within the camp, so they were not entitled to a shop ticket.

Therefore, we were only well off for shop tickets if one of the Japanese wasn't feeling very well, or I remember one occasion when Sergeant Mori considered that it would be rather fun to have a circumcision. So doctors did well for shop tickets for a little while. It was a form of blackmail, really. If the hospital was too full, shop tickets were <u>particularly</u> withheld from the doctors. So we had to rely -- the medical staff -- to some extent on the generosity of the men, who had their shop tickets. But when you've only got 50 cents it doesn't last very long -- 50 cents doesn't last very long when you've got a month in which to spend it.

C.G.R.:

Let me ask a question, if I may. Who had the honor of circumcising Sergeant Mori?

R.P.:

Nobody did, nobody did. It didn't happen. [He thought better of it.]

C.G.R.:

I see. Perhaps we could pursue that direction just for a moment, then. We can always come back to this other. Do you recall your first seeing Sergeant Mori?

R.P.:

Yes I do, <u>very</u> clearly. We were in Surabaya. We were told that a draft of men were going -- we knew not where. They wanted 2000 men to go on a working party. The morning came for us to parade. The senior British officer there was called Squadron Leader Pitts. He's in this picture [showing photograph]. Squadron Leader Pitts. We paraded on the parade grounds, in tents, in Surabaya. Mori came, a stocky little man. Oh, again, he's in the photograph. He, without any warning at all, subjected Pitts to the most almighty beating-up, in front of us. He continually knocked him down. He ruptured at least one of his ear drums. It's difficult to time these things -- it was such a horrible exhibition -- but it certainly lasted five minutes and possibly ten. It was that sort. Well, Pitts finished [still] standing up, but he was very shaken and badly bruised and hurt.

And why? One can only feel that it was a demonstration to us that Mori was in charge and that we could forget about getting any authority from our own officers. Really, it had the opposite effect. It had the effect of rallying people behind Pitts. But that was not how the Japanese looked at it.

The difficulty about this, as in the start of any such operation as this, was that we, 2000 men, were picked from all parts of this bigger camp. Many of the people picked didn't even know each other. So there weren't the groups of friends which

those conditions at Haruku started off particularly horribly.

By the time we got to Haruku we had about 100 cases of dysentery. Nobody had died on board, that's the only thing. Anyway, I forget how the Haruku expedition -- it started with your question, didn't it. Well, that's how it started, with Pitts being beaten up.

C.G.R.:

Yes. Actually we were talking about Mori. I'd asked about your first....

R.P.:

My first acquaintance with Mori, right. Well, Mori was there all the time. Mori never let up being beastly. Really he didn't. He occasionally tried to ingratiate himself for a short time. He was a man to be extremely careful with, particularly as he had this effective interpreter. Kasayama, whatever one thought about him, was a good interpreter. He could speak intelligently and intelligibly and understood perfectly. Mrs. Johnson, who taught him English in Tokyo, has a lot to answer for. [laughter] He was sent to jail at the end. He was not an officer. He was an ordinary soldier. I've told you about the song "a tisket a tasket" haven't I?

C.G.R.:

Yes. How about Kurashima? I think Kurashima was the officer actually in charge.

R.P.:

We had two officers. Now, I never knew their names, but there was one for the first half of the period, about, a little

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was such an important standby in this situation. This is what I wanted to talk about. It has come back to me now. People arranged themselves when they got to know each other. I'll qo back to the start of the Haruku camp in a moment. People arranged themselves in groups when they got to know each other; in groups which they called "conxies." I never learnt the spelling of this but if you call it conxies it's phonetically correct -- a conxie -- and it could be four men, it could be six men, it could be eight men, it was seldom more than that. They shared their luck. If the majority of them had a shop ticket in this group and two of them didn't, well, they all shared what could be bought. The sort of thing that could be bought was kippers and fruit and things like that, quite useful too. If somebody was ill in the conxie, his mates would see to it that he had something delivered to him to eat if they could possibly supply it. There is no question at all that in many cases they died for each other. They simply shared their luck.

But you see, at the beginning of the Haruku expedition they didn't know each other. They were just individuals, herded together in the hold of a ship with barely lying space each. With no chance to get to the lavatories, which were primitive things, if you had dysentery. We had a dysentery epidemic starting on board that ship. So the conditions aren't difficult to imagine. In the hold of a ship in the tropics -- particularly as we stayed in Surabaya for a day or two before we started, without any air movement at all, and the only air access, the only air getting down to the bottom was through a canvas pipe. As there was no motion in the ship it did no good at all. So

man who looked rather like Arthur Askey, had no beard, and the second half, and he was of the lieutenant sort. Then there was a more senior officer in the second half. Leslie Audus would have their names. But I can describe both those men if you like.

The first one, I used to know him as "Askey," neither of them really took much notice of what was going on in the camp. They relied entirely on Mori. You could never get -- we doctors went to see the first officer, old "Askey" -- a lot, in the first few weeks of being at Haruku. Because when we arrived there the camp was only half built. There were very few roofs on the framework of the huts that had been put up by the native population. What was worse was that they had used the latrines that had been dug, quite inadequate in size, and it was the wet season. They were overflowing, and the flies would lay their eggs and the maggots were crawling all over them. They really were all over the place and overflowing.

Now, apart from the obviously unsanitary situation, there were one or two things which made the situation quite impossible, not the least of which were that the men had been fitted out with canvas boots. Each man had a pair of new boots. But, of course, they need unlacing, if you're going to take them off at all. If you were walking about where there are fly maggots wriggling all over the ground, and you undo your shoelaces, you've infected your hands with any infection those fly maggots have on them. So it was this sort of thing which caused a very rapid spread of dysentery. I speak from memory -- I think we had 100 cases when we arrived, and in a week or two we had 1100. Our figures will be in here [indicating his own manuscript].

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Now, it's impossible to men who haven't got a roof over their heads, and it's raining, and are expected to go out to work from the first moment there at Haruku and build their camp lord knows when. You can't also expect them to walk far to the river to wash their hands -- I should say it was 300 yards, perhaps 400, to the river -- to wash their hands several times a day. They haven't got the energy and they were simply doing other things. So this sort of thing is one of the reasons why the dysentery epidemic spread so fast.

Another is that there was a certain amount of tobacco available. I forget exactly what was the source of that particular lot of tobacco at the beginning, but there was a little. We had prayer books, so a cigarette could be rolled. It didn't really dawn on the men that if you roll a cigarette and lick it, and your hands are infected, you will catch dysentery. Things like this.

As the doctor, I personally arranged a bamboo-ducted water supply from the roof, so that I could wash my hands frequently. I lived my life using a sort of orthopedic no-touch technique. I didn't touch with my fingers any food that I ate, unless I had previously scrubbed my hands. This sort of thing. I didn't catch dysentery at Haruku. I caught it later on, when we went back to Singapore, when the food handler who was carrying my dinner to me pinched some on the way, and he was a carrier of dysentery. Half the medical staff went down.

C.G.R.:

Lord Lister would have been proud of you.

[Laughter] Well, one had to, because I was seeing at least 80 people a day with dysentery, handling specimens. It was interesting, perhaps -- so much of it is in here [his manuscript] I can't remember which is not.

It was interesting, perhaps, and totally beside the point --I said I saw about 80 people a day, it happened that my ward contained 80 people. I found, because we had rice gruel for breakfast and that was it, by about half past twelve, just before lunch, I went into what was evidently almost a hypoglycemic attack, cold sweating and having to sit down, feeling faint. It could only be cured by having a mouthful of rice, really. But that's beside the point. Anyway, that's how I didn't get dysentery, by living a no-touch technique.

The men were not able to do this -- however intelligent, they hadn't got the time. The boots, the boot-laces, were one of the chief problems with this. It was the latrines that were the source of it. We went -- we are going back to the [Japanese] officer now -- we went to him, Springer and I, I think Buning was there too. We, with Kasayama's help, and we had an interpreter of our own, but Kasayama sometimes was a help, (and sometimes a hindrance). We explained that the sanitary arrangements were totally unsatisfactory. More than half the men were down with dysentery and not only would our men go down but the Japanese also would go down, if they didn't let us build a latrine over the sea. We were on the seashore, you see, we were against the seashore. I think the answer is in this book. He sent us away and got us back some days later and said the sea belonged to the

Emperor and we wouldn't be allowed to do things like that in it. Believe it or not!

One thing we learned about him was, you could never ask him two questions. They were always both ignored. If you asked one, there was a chance you might get an answer, even if that was unsatisfactory. His mind didn't encompass two questions at a time. Anyway, we did have dealings with him. We never got any satisfaction, but we could see him.

The second chap (with a beard, in the photograph there) was totally unapproachable. If there was any order to be given it came through one of his inferiors.

C.G.R.:

One of the impressions I get, a very strong impression from talking to a large number of people, is what I can only call, unkindly, generalized stupidity amongst the Japanese. Yet it is obvious that there are many very intelligent Japanese people. Can you equate these two?

R.P.:

I think I can talk about it. To leave Haruku for the moment, to speak of Semarang (but I can go back to Haruku afterwards). We had to go to Semarang -- this was before Haruku -- we had to go to Semarang, a British working party of 200 with a Dutch working party of 100, and I was the medical officer for the British, and there was a Dutch medical officer. We had to go to Semarang to extend the runway, the civilian runway, to make it suitable for heavy military aircraft.

Now, it was a camp where our living conditions weren't too

bad except that there was malaria. It was surrounded by malarial swamp. That is beside the point. The point I want to make is that, in order to get the materials to the runway to build the extension of it, we had to divert the railway line, which went past a siding, which went past the aerodrome, divert it across the aerodrome so that the cement and everything could be delivered on site. Now if <u>we</u> had been doing that, no doubt we would have had surveyors out....

[End of side 1.]

If we would have been doing it we would have done it properly, with engineers and everything, surveyors and the like.

All the Japanese required us to do was to lay the railway lines and their sleepers on the marshy soil, bolt them together, more or less straight, and go on doing that until they reached the runway. Then, of course, when the train came along and was driven, with this enormously heavy load of building material, to the side of the runway, we certainly expected it would sink in or fall over or do something dramatic. They rocked a bit, but it got there perfectly well!

Now, this is the sort of thing the Japanese were capable of doing in many situations. I mean, who else would have thought of invading Malaya on bicycles!

There was the other occasion, returning to Haruku, when they wanted to take a steamroller away. It had to be got on board a cargo ship which was standing out, a good distance out from the jetty. The way they arranged to do this was to lash two barges together. Lash them to the end of the wooden jetty, which is in the bay, wait for high tide so that they were not too far below

the top of the jetty, and drive the steamroller down the jetty and let it, really, drop a fair distance onto the barges. We were quite sure it would sink. We hoped it would blow up -- we felt for the driver if it would happen. But it didn't. It went down the jetty, the jetty rocked, it landed on the barges with an almighty crash, but they didn't sink. They were unlashed and ferried out to the cargo ship and the steamroller was hauled on with a crane. Well, this is not stupidity really but it's taking chances which shouldn't work.

C.G.R.:

What would the drop have been from the jetty to the barges? R.P.:

If we say 18 inches it's a fair, it's a fair estimate.

But to say that they were stupid...remember that some of the so-called Japanese were Koreans. One didn't really know how their minds worked. I always put it to myself that they don't think rectangularly, and it would take a long time, a long period of training, to understand how the Japanese think, I always felt. They were given almost unlimited authority over us, these Korean peasants, so that they could do and say silly things, and there was nothing we could do about it.

The other thing that struck me was that the Japanese were worse the further one got from wherever the center was. In this case it was Java. Get far away, when the individual could be as beastly as he wanted without being found out, then they were particularly nasty. But stupid? It's not the right word, somehow. They didn't think in the same way as we think. Who's

right or not is a different matter. Occasionally the most remarkably stupid things did happen. It's difficult, really, to find an example. But there were sometimes awful muddles during the parade called <u>tenko</u>, when we were counted morning and evening.

C.G.R.:

Well, I think this is one of the things I had in mind when I used the word -- the apparent inability to count. To count a group of men reasonably quickly and arrive at an accurate number, that should be feasible.

R.P.:

Perfect. Yes, there would be even consultations about what constituted 25 men, yes, perfectly true. But I just made allowance for the fact that these were simple and, perhaps, "naturally" rather stupid peasants, but not more so than other races. I didn't associate them with the word I describe as stupidity -- simplicity, perhaps.

C.G.R.:

And one does not send ones crack troops or the most highly intelligent individuals to be prisoner-of-war guards, perhaps, either.

R.P.:

I mean, they did tumble to the fact that here was a European doctor who apparently was prepared to treat venereal disease. It didn't take them long to find out about that. We had a garrison, if that's the word, of 15 men responsible to see that we didn't run away and to supervise the work, under a junior officer. Fourteen of the 15 had gonorrhea. That's all in here too [his

manuscript book]. The fact remains that they saw fit to come at midnight, secretly, because they weren't <u>allowed</u> to report their gonorrhea to me. I'll explain in a moment. This is still Semarang. They weren't allowed to report their gonorrhea to me because, if you're a Japanese and you have VD you just go to the nearest fighting. Anyway, they did, and it had to be at midnight or in the dark. The Japanese who was to be the patient would come along with his torch, and pull on my mosquito net, and a medical examination would happen by torchlight. I had my speech ready, because it was of use to me that I could treat him but I had none of the medicine, I would have to go to the hospital to get some more the next morning.

And <u>always</u>, I was taken to the hospital, secreted in the bottom of a lorry. Always I was able to bring back anything that I needed, something of value. Now, these people who were my escorts -- the patient, of course, was the escort -- they were quite content to sit down in the hospital pharmacy and be given a glass of absolute alcohol, syrup of orange, and water. They would be asleep in ten minutes. And [the Dutch at the hospital] would hand over quite a lot of stuff and I'd get all the news and everything. The news was never right but it was always good. C.G.R.:

Yes, that you do mention in the manuscript.

R.P.:

As I say, I am repeating myself. It's difficult not to. C.G.R.:

Oh no, no. I don't want you not to. Not at all.

How do you explain the 15th Japanese, the presumably pure one.

R.P.:

I don't know. He was a thorn in my flesh. He was the first Japanese to beat me up. I swore at him.

C.G.R.:

Perhaps you might pursue that direction. I was going to ask about your personal experience in brutality. R.P.:

I was a witness to much more than I received. I was only personally beaten up once. I saw it coming and the threat somehow suddenly evaporated, on several occasions. Partly, of course, because -- not so much perhaps at Haruku, where there were several doctors -- whereas the other places I went to I was the only person the Japanese could call on for treatment, which meant I didn't get beaten, except I was beaten at Semarang once by the 15th man. I think he probably had more puritanical views about the way he should behave when he was in China. They all caught it in China. It had all been in, it's called the Sino-Japanese War, isn't it?

C.G.R.:

I think so.

R.P.:

I was thinking, that's the wrong way around. The Japanese started it, it should be the other way around. Anyway, they had all been to that theater of war and they'd all caught the VD there, as far as I could tell. They were all quite clear what treatment they required -- intravenous trypaflavine. One man got

himself an overdose; one guard said, if I said it was good, twice as much should be better. He went to his own medical orderly and had <u>his</u> injections in addition to mine, and he went dark brown. C.G.R.:

One doesn't have to be Japanese to work on the principle that twice as much is going to be better.

R.P.:

He disappeared. I felt anything might happen to me but he didn't ever tell anybody.

C.G.R.:

Can you tell me a bit about sex, and about the absence of sex, and all of that?

R.P.:

Yes, I can. Remember that we were starving. If there was --will you say "circumcision" to me afterwards, so I don't forget? -- if there was any homosexual activity going on it never came once to my notice. I heard no mention about it, no snickering, no one ever reported with any sort of lesion that could have been associated with it. So as far as I can think, it didn't occur because we were too near rock bottom, physically. That really is the only answer I can give you. I was not aware of any homosexual activity <u>at all</u>, throughout the time. Of course, it may have been happening in the more comfortable places like Changi. If so I didn't know about it, but I was only there for three months. And I was not on duty there.

Circumcision. If ever there were another war in the Far East, only circumcised men should be sent to it. Uncircumcised

men with poor washing facilities are a very bad risk in the Far East. They get nasty ulcerated lesions. Without good washing facilities there's not a hell of a lot you can do with that. I was very, very forcefully shown that many times.

C.G.R.:

One more question. To go back to the question of sex, what about heterosexual sex? There was, I believe, some possibility of contact with the islanders.

R.P.:

Not at Haruku, insofar as I knew about it. I think I would have known. There's very little one didn't know about it. The only time when there was sex available was during the first week or two, when we were sitting doing nothing at Tasikmalaya. All around the camp, women were shouting "mack mack!" offering their services. I was told (though I never witnessed it, nor did I see any barbed wire lesions), that occasionally it happened, actually, through the barbed-wire fence. I don't know. Otherwise there were no women available. I was not aware.

Now I must break into another subject, which came to mind as I was saying this, which is that stress is considered to be a cause of what is called, loosely, nervous breakdown. In the Haruku situation, there was only one way out of the camp and that was in a coffin. Therefore, there was plenty to escape from but no means of escape, mentally I mean. I never saw anybody suffering from anything that could reasonably be called a nervous breakdown during that time. This may sound cynical, yet it's true. We were all up against it. We were all pointed in the same direction, of course, in the sense that we were all up

against the Japanese, which made life a good deal simpler. But I never saw anything which could reasonably be called a nervous breakdown. I saw acute mania once, but that was at Tasikmalaya, and I had to give him a general anesthetic to get him out of it. I thought that was worth mentioning.

C.G.R.:

Perhaps from that, logically, we could talk a little about coping.

R.P.:

Say a little more. Coping with what.

C.G.R.:

Well, this whole business of two men who seem identical in body build, diet, etc., one of whom dies and the other lives. R.P.:

Could you remind me of that question, because something has come to mind which I don't want to forget, when you said coping? C.G.R.:

Definitely.

R.P.:

I often discussed this with Springer, when we saw a ward full of dying men, knowing darn well most of them would be gone in a week. They, the men, showing remarkable fortitude and courage and even something approaching cheerfulness. I'd say to Springer, "What are we doing all this for?" "Don't worry my friend, we must pretend," he said, "one day some destroyers will come around the corner there and take us off. That makes it all worthwhile, if we save a few of these men." That comes somewhere

near to coping. That's all I wanted to say about the subject. He kept us going with this sort of mass pretense because, I mean, if I can use this expression, one felt certain that one would die as a result, during this experience. There's no other way of putting it. At that time it seemed that the only logical end to it was death. Leslie Audus stopped the logical end to it being blindness, which it would have been. One felt that death would be the outcome.

Now to your question.

C.G.R.:

Let me rephrase it. I have the impression that a very large number of individuals in their 20s and 30s arrived at a position that we would find common in people in their 70s and 80s, namely that they simply ceased to feel they had anything to live for -so they died.

R.P.:

I'm with your question. There are many aspects. Let's take the psychological one first, because it's come into my mind. I'm speaking now not of Haruku but of the journey back from Ambon, which was the really low point of the whole experience. [Very much earlier] there was a time when one had -- because medical duties took so much time (I'm speaking now of Surabaya, before we went to Haruku), where one could have a certain amount of help from one of the other ranks with keeping the room tidy, as it were. Call it a batman if you like. It wasn't quite so formal as that. I had one such, his surname was Arthur, and he came to Haruku; there was no question of him helping me out, he came as one of the working party. On the ship back from Ambon to Java,

he said to me one day, "I'm going to die now." I said, "Don't be stupid, don't talk like that." We were just talking as friends. "I'm going to die now." I said, "Don't be so stupid." But in 24 hours he had done just that. He sat down and he died. He wasn't physically ill. It was a most extraordinary example of what one had read about happening in Eastern nations. Obviously starvation entered into it because we were all starved, but he didn't, one felt, <u>need</u> to die at that moment. He wasn't as bad as some. So there was an extreme example of mental attitude being associated with death.

There was the extreme opposite, of people who ought to have died a week ago, or a fortnight ago, with dreadful things like cancrum oris -- which I'd never seen before and never want to see again -- staying alive in a cloud of bluebottles. This is the sort of thing I have to make an effort to remember -- these awful lesions were simply <u>covered</u> in flies. So there were those two extremes -- the enormous fortitude and cheerfulness under great hardship, and the fact that one could will oneself to die. I just saw that one example; it was staggering.

Now, regarding physical attributes and the capability of living through difficult times. It was borne in upon me many times that the thin skinny men did best. The men who were of that build; I was one such, then. People who started off fat, if they were brought from their fatness fairly slowly, did fairly well. People who stayed fatter than the rest of us, sometimes by rather foul means more than fair, there weren't many -- the cookhouse staff, of course, were rather inclined to stay fat --

didn't stand up to starvation anything like so well. When the journey back from Ambon to Java started, they were the first casualties. We skinny ones managed to weather it, some of us all the time, some of us not. This was the chief thing, I think it more or less answers your question.

C.G.R.:

What about age?

R.P.:

Less important than one might think. In fact, I would say death -- it was more moving and I hoped it was not more frequent in the young. One didn't know everybody's age, but it did seem that the very young didn't last so well, the teen-agers. There was at least one very surprising person -- I'm not speaking of Haruku now -- who was at Semarang, my Senior British Officer, Wing Commander Gregson, who was at time in his 50s, I think. He was a vegetarian, so the tiny meat ration he refused to have, and gave it to me. He was a theosophist. I don't quite know what they believe but he believed something very strongly and I think that's important. He was very tall, and despised the Japs in a magnificently obvious way -- and got away with it. Now, he lived through it and, at the end, didn't look very much different from how he did at the beginning. Though I wasn't with him right at the end, I must admit.

To break off from this story at the moment. He started getting skin cancers on his scalp. As he lived in Australia he knew that he had too much sun, and he bothered to come from Australia to London to consult me about these. That's when I saw him afterwards. He came to England on one other occasion.

I have said somewhere in this [book] that whether you wear a hat or not, in the tropics, is of much less importance than it was at one time felt to be. Sunstroke as such I never saw -- as opposed to heat stroke, but I myself am getting a few patches of solar hyperkeratitis [on my face]. One of them is, I've got a scar here, one of them was malignant, so [I had surgery and] I'm having to watch it. That <u>could</u> have been associated [with undue exposure to the sun]. Other people get them too, so one can't say it <u>was</u> associated, but it could have been.

C.G.R.:

But one can go out in the midday sun.

R.P.:

Yes, one can go out in the midday sun -- without hair. We were shorn.

C.G.R.:

Yes. You mentioned this chap [Gregson] was a theosophist, let me ask a little about religion.

R.P.:

I don't know anything about his theosophy.

C.G.R.:

No, I understand that. But religion generally. Was religion a force, a help, a hindrance? Do you have any feelings about this?

R.P.:

I've got to divide this up a bit. Speaking now of Surabaya before we went to Haruku. The Salvation Army, what a magnificent group! They helped us when they were outside the wire and we

were inside. That was possibly at the risk of being shot. They helped us when we were inside the wire and they were inside the wire as well, in that, if there was an epidemic, and there was a small epidemic of dysentery in the camp at Surabaya, the Salvation Army rolled up its sleeves and got on with being nursing orderlies. As nursing orderlies not knowing much about nursing, they had to do the most menial and, in a dysentery epidemic, unpleasant tasks, without complaining, in fact willingly and with light in their eyes. So there was no doubt that they were helped by their own beliefs.

The other people who turned to were the Roman Catholic priests [(I use the plural here; I'm not sure whether there were more than one). I was at Semarang when this dysentery epidemic occurred at Surabaya. It was after I came back that I was told about the Salvation Army and the Roman Catholic priests helping with the nursing. I asked the Church of England parsons what they had been doing and I was told, "Improving our bridge" (they had a well-used pack of playing cards). And one told me he had been transposing hymn-tunes. No mention of nursing. To question him outright would not have been my business.]

C.G.R.:

I've heard similar things before, yes.

R.P.:

"Did it help the generality of the prisoners?" is really your question, isn't it, or any of the prisoners? C.G.R.:

Yes.

R.P.:

Well, there was the question of the theosophist who obviously had a firm belief in something. I never had occasion to know of anybody who asked for religious help, [but I would not have been told of this; it was not my business. Certainly, one of the Church of England priests gave a sermon; he might have given more, but I was not in a position to know as I was drafted away to Haruku almost immediately afterwards. It was an act of some courage to give a sermon as the Japanese forbade public meetings.

C.G.R.:

Let me ask a couple of medical questions.

R.P.:

Yes please, it's much easier when you ask questions. C.G.R.:

Tropical ulcers?

R.P.:

Now, tropical ulcers. The lesion that we were seeing, which we called, I believe correctly, tropical ulcers -- because the Dutch surgeons called them that -- were ulcers caused by coral injuries, <u>almost</u> exclusively. If a man cut himself, usually his lower leg, on coral, whether the coral was living or not. Haruku was a coral island and had been thrown up by volcanic action, so there was coral right above sea level. Whether the coral was living or not, it was liable to produce an ulcer of the lower leg, because that's where the injuries were, and the ulcer would <u>rapidly</u> increase in size, usually, but of course these were emaciated, underfed, starved men. And the ulcers, some of them,

reached an alarming size. They went down to the tibia quite quickly and went deeper down the sides of the tibia in a number of cases. At least one of them was fatal.

There was an immense attendance [at a clinic Springer and I ran to treat these, and] because after all this was a lesion that people had to go out to work with, and so they came in the evenings. Now, in this book I give you the figures of attendance among a thousand men. There were many more than a thousand attendances. They could be helped, but we were terribly short of dressings. All dressings that we used had to be used many times They could be helped, if the ulcers were and boiled between. reasonably clean, with potassium permanganate, of which we had a little -- powder, simply put on the outside. They could be helped with iodoform powder. Again these things were ridiculously short [in supply]. Some of them simply had to be treated with sea-water compresses because we had nothing else.

Those that were very bad, there was only one method of stemming the spread of the ulceration and that was by the use of a sharp spoon, scraping out the floor and the sides of the ulcer. For this we had no anesthetic available. So Springer and I used to do it without an anesthetic. We'd give the man a cigarette, of stolen tobacco, and let him cuss as much as he'd want -- and they put up with it! They put up with it because the pain of the ulcer was extreme. I know this from having had a small one myself. Occasionally one that hadn't got too bad, if all the ulcerating material was removed, and we had a little potassium permanganate, we could get them right again.

They were a shocking problem. It was the, I say the

proximity to coral that really made them so common. It was almost impossible to work on the aerodrome without scratching yourself with coral. I'm sure that other materials would cause it, but coral was particularly bad in this respect. Whether in the dead coral there was something remaining of the toxic materials the coral uses to gain its livelihood, I don't know. C.G.R.:

I'm sure other things must have caused the ulcers too, because they had lots of tropical ulcers on the Burma-Siam Railway.

R.P.:

Exactly. I think that it is obviously worse if you're in a poor state of health.

C.G.R.:

Tony Cowling [HCM 48-85] has told me the terror that was inspired by hearing Dr. Springer say, "on der table." [laughter] R.P.:

But just, again, to say one thing more and that is that the strain on the operator was such that occasionally I nearly collapsed. I had to sit down between cases.

C.G.R.:

Yes, I'm not surprised to hear that. Now Springer, would he have been described, not officially, but would you consider him to have been the surgeon-in-chief?

R.P.:

Yes, thank the lord. C.G.R.:

And he was Dutch?

He was Dutch, even though he had an English-sounding name. C.G.R.:

One of the interesting things that I'm pursuing in this direction of questioning is that I have heard -- and the figures I think verify this -- that the Dutch seemed to treat tropical ulcers more effectively than the British when there were separate medical services. The British on the Burma-Siam Railway, the British did an enormous number of amputations, whereas the Dutch did not.

R.P.:

I didn't know this. I have forgotten, I've read Hardie's book [Robert Hardie, <u>The Burma-Siam Railway</u>, Imperial War Museum, 1984] but I've forgotten. We didn't ever function as a separate medical system, you see. We would draw on the skills of everybody in the proportion in which they had them.

C.G.R.:

Did you have, either at Semarang or Haruku, what I recognize as "happy feet"?

R.P.:

Oh yes, yes.

C.G.R.:

I assumed so.

R.P.:

Yes, same disease -- getting up at night and dancing. Yes, I had happy feet.

C.G.R.:

Did you yourself? R.P.:

Yes.

C.G.R.:

What, in your opinion, was the cause, aside from the fact that they were related obviously to being starving? R.P.:

Neuritis as a symptom of beriberi.

C.G.R.:

Again, in the literature there seems to be some difference of opinion as to whether it was beriberi or a more generalized multi-avitaminosis.

R.P.:

Well, how can one tell? The other thing is that it responded to yeast so well. Mind you, it was yeast that contained a number of other things. This was, I think, a fair assumption. That's what I wanted to say. But if it was a multiavitaminosis, well, they had plenty of reason to suffer from that too, because the start of the severe cases of beriberi, socalled, was almost always an attack of dysentery, at Haruku. There were minor degrees such as myself that started without an attack of dysentery.

C.G.R.:

Can you tell me about your personal experience with happy feet? How did it come on, and how long did it last, and so on? R.P.:

I can't remember how long it lasted, but it was a tingling

HCM 19-86 Dr. Richard Philps, Lewdown, Devon, 17 August 1986 painful sensation. That's all. I had it very mildly compared with some, who'd spend half the night up. Nothing more to say about it than that.

C.G.R.:

You talked about the groups.

R.P.:

Conxies.

C.G.R.:

The conxies, yes. Were there loners?

R.P.:

Yes, of course, there were some loners, yes.

C.G.R.:

Do you have any feeling, did they get by? R.P.:

I always felt that the conxie system was the way to get by. But I can't give you any scientific explanation of why that should be, or whether it was actual. It was a feeling I had.

It ["happy feet"] was a serious source of lack of sleep. Some people had it really very badly. The only way that it could improve was by an improvement in diet. This, of course, was one of the advantages of the conxie system. If anybody in the group, or if one or two people in the group got shop tickets to buy something decent, like peanuts, or vegetables, or fish, then they could particularly favor, in giving away the produce, people in the conxie, who [therefore] were less likely to have happy feet. This was the remarkable thing about the group. The word "communism" is so misused. But it was, in a sense, a communistic type of life in that people shared their good luck and their bad

without thought of reward.

Of course, there were some remarkable exploits that went on -- meat stealing and tobacco stealing. I've mentioned them in this [book] -- tobacco is stored in large sections of bamboo with the end cut off -- one of the partitions cut off and one of the partitions intact. It was possible to pinch the tobacco out of these (it was in slabs, round slabs), leaving the top one in, or leaving the end ones in, and putting them back in the store. Obviously, the Japanese discovered they were missing but they never knew whether their own people had pinched them or we had [laughter]. It was called Golden Glory by us.

C.G.R.:

Tell me about orderlies, medical orderlies. I understand that there were a lot of volunteer orderlies. R.P.:

That's right. There were one or two people who had been medical orderlies, professionally, in that sense. One of the people who became a medial orderly was Arthur, the man who decided to die. Of course, they were very useful. There wasn't any really skilled nursing required. They just had to help people who were ill, and be willing to do that.

C.G.R.:

Was this considered a good job? You didn't have to go and chip coral, but....

R.P.:

Ah yes, but you didn't get a shop ticket either. C.G.R.:

No, no.

R.P.:

So it wasn't all that glamorous. A shop ticket was an obviously great inducement. That would provide you with a kipper.

C.G.R.

So do you think that -- I don't know how to say this without making it sound as if I'm trying to cast aspersions on them, and I'm not in the least, anything but -- do you feel they were altruistic in becoming medical orderlies?

R.P.:

All but one.

C.G.R.:

All but one.

R.P.:

Who had an eye on the rings. [He, I hasten to add, was not a "professional" medical orderly.]

C.G.R.:

Ah, he was a medical orderly. Well, that's still not a bad record -- all but one.

R.P.:

Yes. They had access to dead bodies, you see.

C.G.R.:

Yes. Tell me how dead bodies were treated. What happened after a man died?

R.P.:

This would be at Haruku. We always tried to find some sort of box. It wasn't much. We couldn't afford cloth, because cloth

was too valuable for dressings and things like that. A few bamboo slats fixed together -- a "box" would be too strong a word -- but anyway, some means of carrying a dead body that doesn't involve its limpness making it too difficult, was all that could be managed.

C.G.R.:

That's more a basket than a box. R.P.:

Yes, yes. Again, the graves had to be dug by ourselves. To dig a grave six foot deep was beyond the capability of anybody in that camp except, perhaps, the cookhouse staff. So the graves were shallow, and wild animals found their way in on several occasions. We tried to treat the dead with respect in the sense that, when they were taken through the camp to the cemetery, people stood up -- this sort of thing. There's something sad about that. This question of respect is, in itself, a morale booster. You don't try to pay respect to the dead unless you have some morale. The fact of doing so improves it, in a way.

In the same way, when it was possible, and when I had a say in the matter, we tried to look tidier for our evening meal. Not exactly "dressing for dinner," but if we had some garment that could be used -- this is not so much at Haruku, but particularly at Semarang. We who stayed in the camp at Semarang -- I did, most of the time, to look after the sick. I had to take a bath, and the weather was sufficiently hot for the water in the cistern above the washhouse to be pleasantly tepid. I would have a tepid

bath at the end of the day, and then put on a shirt. That's what it really boiled down to. This did an awful lot for morale.

There is the bit about reading aloud, that's in the book. In fact we had a copy of O. Henry's short stories. As we hadn't got much oil for lighting the camp at night, one man reading by the light of one lamp could entertain, if there was time, quite a lot of people. O. Henry stories did a lot of good. I read them every night, and when I got to the end I started at the beginning again [laughter].

C.G.R.:

And he wrote well!

R.P.:

And he wrote well.

C.G.R.:

You could have done worse.

R.P.:

Maybe he was American, but nevertheless the situations were very human. Just <u>perfect</u> for the job.

Speaking of entertainment -- now back to Haruku -- there was a man I regarded as not particularly funny, I've got to admit, called Franklin, who would get up to antics for entertainment. Dress himself up stupidly and dance stupidly and this sort of thing. The funny thing was -- perhaps not funny, that our people liked it because it was the only sort of entertainment they had -- and the Japanese liked it too. So he was a sort of favored person, this Franklin, because he'd get up to antics, and he became the camp entertainer. And lived fairly well, because the Japanese liked it too. There was nothing wrong about

entertaining the Japanese and if they give a little bit of extra food, good luck to him. It seems there is a little bit of a parallel in everyday life here. We pay our cinema stars, our entertainers, a quite disproportionately large amount of money -the same at Haruku [laughter].

C.G.R.:

He survived, I hope?

R.P.:

He survived that much, yes.

Cookhouse staff. The temptations, if you're a cook and there's starvation all around you, to provide yourself with more food than is your basic ration, is so great that I never knew anybody who resisted it. I won't say more than that except to say, a football match was ordered by the Japanese. They wanted to see football played. It was going to be the cookhouse staff versus somebody. But there was nobody else who could have the strength. The cookhouse staff were the only people capable of playing football and they had nobody to play. That perhaps tells the whole story.

C.G.R.:

Yes, yes.

In some camps that I have heard about and read about, there were people I can only describe as nicotine addicts, who would trade even their limited amount of food for a cigarette. Was that a problem at any of the camps you were in?

R.P.:

No....

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I knew nobody who comes to my mind as an addict, but there's no question at all that tobacco was the source of considerable comfort. So it was desirable. Now, there were several sources of tobacco. There were cigarettes called Silver City, in packets, which came from the Japanese and therefore were a reward for some sort of group behavior -- and tasted of mildew. There was the Golden Glory that was stolen from the bamboo tubes. C.G.R.:

I'm sorry...Golden...?

R.P.:

Golden Glory it would be called, yes. The disks, flat disks, circular disks, all disks of tobacco about half an inch or a little bit more, thick, and the size of a large bamboo inside. That was quite high quality stuff for a pipe. In addition to that, there was available from the shop, perhaps from other sources though I can't remember, the veins of the leaves, the major veins of the leaves, from which Javanese cigars had been made, Indonesian cigars. These could be smoked if you first soaked them in water, then bashed them on a wooden block so that they came out thin, almost leaf thickness. You started off with veins, then cut them up into little bits, then put them in a tin, if you had one, with a bit of banana skin to keep up the humidity. It left you with something smokeable.

Now how to smoke it is the next thing. The Indonesians used a piece of vegetable fiber and made a sort of conical cigarette. It may well be a corn, a sweet corn husk. If it isn't, it looks like one. It is fixed together, I forget how they fixed it

together -- they tied something around it to hold the tobacco in while they were smoking it. That's the standard way. And they held it between their teeth.

We didn't do that because we hadn't got the husks, so we had to use the prayer book, or the more boring parts of the Bible, for this purpose. In the end, we were all down to having to smoke pipes. Now, it's possible to carve yourself a pipe. It takes a little while but you can make a pipe. The wooden part, the bowl, is easy but it was the mouthpiece which presented certain problems. We did find a supply, fortunately, of broken down, worn out, accumulators; the bakelite type of material of which the wall of these was made, could be carved into a mouthpiece for a pipe. I still have a piece of one, there, where I slipped when I was carving it. So we smoked pipes.

We didn't have many matches. There were some. There was a box for the camp provided by the Japanese. I have described fairly completely the method of lighting that is possible, using the diesel principle. I won't go into that again. For that you required a very dry vegetable material, tinder, so-called. Leslie Audus informs me that the best tinder for the purpose was the hairs from a palm leaf whose species he forgets. (I've added several footnotes.) That was quite an effective way of lighting a cigarette or pipe. So we did all, as far as I know, smoke --perhaps the whole, nearly all.

The tobacco supply was, as I say, from three sources. There was always some about. Mostly it was the crushed-down veins of cigar leaves, but at least it was tobacco. It was a great help.

It became currency, so something swappable. Some people did, unquestionably, swap in order to get -- I'm speaking now of Surabaya; in Surabaya there was a certain amount of tobacco provided. Some people did swap their tobacco for somebody else's loaf. Which suggests that the givers of the loaves must have been rather addicted. Now, in Surabaya we weren't so starving; that never happened in Haruku because we were never provided with anything. I don't think I've much else to say about smoking, really.

C.G.R.:

All right. You mentioned the natives and their method of smoking. You've described some contact with the natives at the time of bombings, when you were looking after casualties and so on. Other than that, were there contacts with the natives? What do Harukunese do? Are they fishermen, are they...? R.P.:

I can tell you a great deal about this, starting by what they do. (Remind me of the rest of the question when I finish that bit, in case I miss anything.) They lived, before the Japanese came, a really very easy life, I should have thought. I should think every adult male had to do two day's work a week. They raised poultry. Ate eggs, chickens, and occasionally goats as well. They fished the extremely abundant fish supply in the bay around, fishing at night and using throwing nets -- they were using the throwing nets from any jetty or jutting part of the shore. There was no shortage of fish. There was no shortage of eggs, and there was fruit growing on most of the trees, papaya particularly. There were tapioca roots; sweet potatoes grew

wherever you dropped a leaf, a leaf would take root. Amazingly fertile! Peanuts could be grown easily and coconuts were falling off the trees. They ate well without having to work for it.

They'd obviously been visited by missionaries because we would hear them fishing out on the bay at night, beating time with their oars on the side of the boat, and singing words of their own to what were evidently, hymn tunes, and some of them, recognizable, international hymns. It was rather a fine sound. I have told this story, the most touching story, of how they saw us off, playing on their pipes, the tune of, "When this bloody war is over." I'm sure, as they heard us singing this, our people singing it. They might have thought we went to work singing hymns. Anyway, on the night, the early morning, when we left Haruku, they secreted themselves behind bushes beside the road we were marching on, and they played "When this bloody war is over" on their pipes. It's uncanny, this story.

Now what else was I going to say about this? It was a relationship you were speaking of.

C.G.R.:

Contacts and....

R.P.:

Well, we had little contact except when they were bombed. I'm speaking now of myself. What contact went on between the working party and them, I don't know. I'm sure there couldn't have been a sexual one, but can't be sure that it was not, and I'm saying that there was not. There was no energy left.

There was never hostility as far as I know. They have, of

course, been giving a little trouble to the Dutch since. There was no hostility to us. They saw the situation we were in and they were in a situation not far different. I, at least on one occasion, saw two natives being tortured by the Japanese. The method was simple and unpleasant. Their hands were tied behind their backs and then a rope was thrown over a branch and they were hauled up so that they were hanging by their hands, which had been tied behind their backs. That must be extremely unpleasant. They were left hanging like that for a period of time. So they can't have been very friendly towards the Japanese. I'm perfectly sure they were swindled out of hand, all the time, by the Japanese requiring rations and spending our money upon them.

I won't bother to tell you again but I must remind you of the story of when, right at the end, at Changi, the Japanese senior officer arrived with our bank accounts, which was the \$120 that I had been deprived of each month, and everybody else's. There were five lorries, I think it was, containing bad Japanese notes. He was told by the Senior British Officer -- it was after the capitulation -- that we would not be accepting their money, take it away! And he made his famous statement, "You will not tell me to stick my money up my arse!" [laughter] Were he learned it I shall never know. It's the only other, it's the two ends of my account, there are situations described at which I was not present, and that was the second.

C.G.R.:

You said in your account, in your manuscript, you've said quite a bit about Alastair Forbes and Leslie Audus, and in a way

it seems silly to ask if there's anything else you want to say about them but....

R.P.:

I can't remember exactly what I've said, but sir, I shall probably repeat myself. Obviously, in the situation in which we were living, in very close proximity, one got to know a great deal about the other. There was Clifford Beales the dentist, also, he's now dead; the row was myself, Clifford Beales, and then "Jock" Forbes, we used to call him. He was a brave man. <u>Is</u> a brave man. He had one great principle. If you're speaking to a foreign man who doesn't understand, say it again but loudly. The men loved him because he showed considerable courage, day in and day out, in facing up to Mori and his lot. Obviously, he was very much on the men's side. I've got nothing really else to say about him except in admiration for the way he coped with his job. And we did each other's job if either of us was sick.

The only thing is, we weren't sick except with dengue. Ι had one or two attacks of that. It was just a very incapacitating illness for a couple of days. You suddenly are feeling you can't stand up anymore on morning parade. If somebody takes your temperature, happening to have a thermometer, and it's 103 or somewhere enormously high, it puts you out of . action, there's no question. We did each other's jobs on those occasions, otherwise it worked very well as it was. We talked about this and we talked about that. We covered almost every subject under the sun except, of course, he, as a Scotsman, had very little acquaintance with London. I, as somebody who lived

in the home counties at that time, knew very little of Scotland. So there were a lot of things we discussed that were new to one of us. There were few things, not an awful lot of things in common that we had.

Whereas with Clifford Beales there were a lot of things in common. We knew the same bits of London. We used to play competitions: if you're standing in Regent's Street facing such and such a direction, what's in front of you? -- this sort of thing. Even living under those conditions, I can say that there was no question of us ever falling out about anything at all.

Clifford Beales occasionally got a bit of a problem, he was a more tense man and he would suddenly fly off the handle for no apparent reason. The funniest one that sticks in my mind was, he lost his trousers, he lost his pants and his belt. So he accused me of stealing them and he accused Jock Forbes of stealing them. Well, neither of us had, so that didn't get him anywhere, but he got more and more cross. I happened to look up and saw that a rat had been building a nest in the rafters above his bed, and both those articles were in the nest [laughter].

But we, the three of us, formed a conxie. That was rather useful, because the Japanese, strange that they always insisted on dental care wherever they were, if possible. They required dental care, so Clifford Beales used to get the odd shop ticket, and that was helpful to us. Of course, those of us who have survived probably owe the relative completeness of our teeth in old age to the fact that he was around.

[Tape turned off.]

C.G.R.:

Now we are going to talk about Leslie Audus.

R.P.:

Well, I say he was absolutely brilliant in his handling of the yeast situation. I doubt if anybody else could have done as much. The way that he turned to his own use, things that seemed to be at one stage insuperable difficulties, such as the overgrowth of lactic acid bacilli, which I mention here. You remember that don't you?

C.G.R.:

Oh yes.

R.P.:

Because you see I've been talking to a Canadian in the last two days, not you, and telling him a little bit. I'd be a little bit stuck if I had told him or you. Anyway, his handling of the overgrowth of the lactic acid bacillus after we'd run out of hydrochloric acid, in order to be used to make invert sugar. Making lactic acid and getting a certain amount of invert sugar that way. Well, that's incredible, really. Then, having to use selective temperatures for the yeast to grow best, or the lactic acid to grow best -- to keep the supply of yeast going and yet have some lactic acid. This sort of thing is really remarkable.

His other great quality was his ability to learn languages and his facility in his conversations with the Dutch. I learnt Dutch. I learnt to understand Dutch but I spoke it rather haltingly. This should be off the record, but I needed to understand Dutch. Occasionally, if there was some food to be distributed -- I wanted to know what was happening -- put it that

way. I understood it fluently and spoke it rather slowly. I think I've mentioned sufficiently that we were very careful, realizing that we were two factions who could be opposing factions -- never to let that happen -- very important.

C.G.R.:

Yes. I assume, given the split between the men, which I think was roughly 1,000 British and 1,000 Dutch, and the split between the doctors, which was two British and six Dutch, that obviously some Dutch physicians were looking after some British men.

R.P.:

Oh yes, oh yes. I doctored to the lot, Springer was surgeon to the lot, Forbes did the British sick parade, and the British work parade, and I did ward work among both Dutch and British, but mainly among British because there was Verbaarschotte and Tromp as well.

C.G.R.:

And Bryan.

R.P.:

Oh Bryan, yes. And poor old Verbaarschotte died of a cerebral tumor before the end of hostilities. Imagine dying of a cerebral tumor without any pain reliever! It would have been awful. I wasn't there.

C.G.R.:

What was his name?

R.P.:

Verbaarschotte.

C.G.R.:

Oh. I haven't come across that name. All of the others I'd heard of but not that one.

R.P.:

He was a remarkably clever man. Just for the hell of it, he would translate from English to French, as you spoke to him in one of the two languages, or the other way around, and write it out.

C.G.R.:

I'm not a linguist at all, so I stand in awe of that kind of capacity. Archie Cochrane, incidentally, apparently was a great linguist.

R.P.:

Was he?

C.G.R.:

Oh yes. I have this only from his own mouth, but have no reason to assume that he was leading me astray; he talked about being put into a hospital where there were lots of Serbs, so he learned Serbian.

R.P.:

I don't think Archie Cochrane was the sort of chap who would deceive you, not for a moment!

C.G.R.:

No, no.

R.P.:

He was an interesting man. He was a wealthy man. He ran fast cars when none of the other students could afford a car at all. So -- I think the expression is, he pulled the birds. He

HCM 19-86 Dr. Richard Philps, Lewdown, Devon, 17 August 1986 always had a retinue of good-looking young women.

C.G.R.:

Was he married?

R.P.:

I don't know. I'm speaking now of student days.

C.G.R.:

There certainly is not a Mrs. Cochrane now. R.P.:

I'm speaking of student days.

C.G.R.:

Yes. I meant ever, if you knew. The subject just never came up but there was no Mrs. Cochrane in sight.

R.P.:

This is the thing one doesn't remember about. Remember that he was, perhaps, three years older than me, and therefore three years ahead in the student hierarchy. Therefore, one didn't mix very much with one's betters. Do you see what I mean? C.G.R.:

Oh yes.

R.P.:

They were doing other things. But I got to know him because he was around, and I got to know him because he looked after me when I first got home with tuberculosis.

C.G.R.:

That was really why I asked. I thought you might have known. But it doesn't matter at all. No, no. Let's get back to our main subject here. I've led us astray.

I'm starting to run down on questions, I must say, because

so much is answered in the manuscript. R.P.:

There's a whole lot of things I could say about this dreadful voyage of the <u>Maros Maru</u>. For instance, the temptation to stand at the door of the Japanese cookhouse, in case some scrap of food were to come one's way, <u>had</u> to be resisted. The men could do it. Yet the temptation, my God! was there. We were so hungry. Awful thought now; it was terrible. It was the nearest we ever came, perhaps, on the <u>Maros Maru</u>, of having a slight international difficulty. That was chiefly because one of the Dutch officers wouldn't squash the nits, the lice, he caught on his clothing before he threw them away. His pride was too intact. And we didn't want to catch his lice.

I'm just going through a day in one's life there. Washing, of course, was almost impossible. Water, fresh water, was so scarce that we were thirsty. We died like flies. And then floated -- the dead bodies floated around us. That was the occasion when I swapped my watch for food with a Macassar shipwright. I specified roast cooked ducks, eggs, chilies, peanuts, and I gave him the watch one day and he brought the lot the next day. As a result of that, we now are foster parents, we contribute to the Foster Parent Plan and we have a Celebese It's now called South Sulawesi, but it's the same place. child. We have a child who writes to us every month, and tells us how he's getting on at school, and we write to him every month. C.G.R.:

I know the program. We also have been enrolled in that.

HCM 19-86 Dr. Richard Philps, Lewdown, Devon, 17 August 1986 Yes, it's very satisfying. R.P.:

Yes, it was so nice to be able to personalize in that way. C.G.R.:

Is it possible for you to artificially isolate, in this whole experience, something you could identify as "the worst part of it" for you?

R.P.:

Oh yes. Unquestionably. That is the journey on the Maros Maru. And the worst part of that journey, unquestionably again, was to deal with the meager belongings of the dead. Again, the conxie system still worked because, you see, when people stayed behind or were drafted to go on the Maros Maru, a conxie could go So if mates were there...and what one did was to together. distribute the small things in his kit among his friends. Ι think I mentioned, here, how everybody who died had 500 tablets of quinine in their kit. Because we had been loading Japanese ships with medical supplies and things. I asked for quinine one day, because we had run out. By the grace of god, that evening everybody came back with a bottle of quinine. They also came back with a bottle for themselves too. Everybody had a bottle of quinine in his kit, on the Maros Maru.

But the death rate was the worst. The squalor of the whole thing. Of course, one of the difficulties was to be able to stand up oneself. Somebody had to do this. It was extraordinary what an incentive having to do something is -- really. By my distributing the kit, at least the people in the conxie felt that it had, in a sense, become official.

Now this brings me to the whole question of being an officer --because in ordinary circumstances, in serving, an officer has authority vested in him and he can punish people who don't conform with what he says, obey what he says. But there was nothing like that available at all under these conditions. But sufficient people realized that if we didn't behave as a disciplined group, we would be much worse off than we were. So it was an unspoken rule among people that they did do what they were told. Usually the reason was given, too.

The Japanese insisted that any wrongdoing should be reported to them. But the only wrongdoing that we really were hard on was anybody cooperating with the Japanese. So we couldn't very well report that to them. But discipline, considering there was no punishment system, was incredible. Because as a doctor one had the added pull of being a doctor. But one saw it happening.

Anything else, I wonder?

C.G.R.:

What about after-effects? What about the effect of this whole experience on you as a person.

R.P.:

It's very difficult to assess yourself.

C.G.R.:

Yes, because you have no idea what you would have been had you not had the experience.

R.P.:

People say -- <u>I've</u> said -- after an experience like that I shall never worry about anything else again. This is so far from

the truth that it's ludicrous, I think. You do. If you're a worrier before you're a worrier after. I always have been a worrier, and I have a view that if you're going to achieve anything you've got to be a worrier. The people who jog along probably manage to be quite <u>happy</u> but they don't really achieve an awful lot. I believe this is true.

You'll have to ask Emmie, more than me, what mental results there have been. There's one that was very evident to me, and that was that I couldn't talk about it. Having written about it, I put it away. I couldn't join in with the boys from the Far Eastern Prisoner-of-war Association. I couldn't stand the idea of any sort of jollity resulting from this experience, when this experience, to me, meant the unnecessary death of many otherwise healthy young men. There is, whether one likes it or not, a sort of feeling of guilt that one didn't manage to do more for them. I think this is probably a feeling based on unreality. Yet, as a doctor, one can't not have it.

But from the point of view of physical health, I am extremely fortunate in being married to somebody who has cared very much for my physical health. Because I was quite ill for the first few years, trying to do a job and really failing because I had to give up so often. In December 1948 I realized that I had open tuberculosis again, or it seemed very evident I had open tuberculosis again. By that time I had a young child, Bill -- my oldest son. I happened to be working at the Chest Clinic, so I asked the roentgenographer to take a picture of my chest and there, sure enough, tomography revealed quite a little bunch of cavities in my right apex. I was recommended bed rest.

That was before medication was popular -- it was still in the rather experimental trial stage. I was recommended bed rest and all the other time-wasting procedures. I was still skinny and thin.

I thought, "Enough of this." My brother was on the consultant staff at St. Bartholomew's Hospital, and Moorfield's, and the Royal Westminster. He was a famous eye surgeon. I asked him if he could get hold of a good chest surgeon's opinion upon me, and he arranged that I saw Oswald Tubbs, who was the chest surgeon at Barts. I saw him and he agreed to do a thoracoplasty upon me, quite an extensive one. As I was coughing tubercle bacilli in vast numbers I said, "I can't go back to my child until I have something like this done," so I said, "please go ahead." He did it quite beautifully. It's an uncomfortable thing anyway, but I'm sure I had much more comfort than many people have after a thoracoplasty.

He was so pleased with the results that I lost all my xrays, because he used them for demonstrations in lecturing. We're still in touch. The physiotherapy at Barts [St. Bartholomew Hospital] was so good that I have full range of movement. Apart from the fact that I fight shy of going near anybody with a cold, and abdominal breathing is a habit that can be rather tiresome because you can't hold your trousers up with a belt. [laughter] That's a minor disability. Braces are more satisfactory. One has a reduced exercise tolerance. Altogether, I'm a magnificent result of that extensive thoracoplasty. When I now see doctors, they say, "How is it that you ever got treated

by thoracoplasty, not drugs? You've never tried it?" they say. I say, "No it was before that time." "Good Lord! you're the only person I ever met who's been cured of tubercle without drugs!" In fact I've had to have drugs because I had been put on steroids three years ago because I got a nasty bout of polymyalgia rheumatica, which I've still got. So I am still having prednisol [UK, prednisol]. When I started that, I had to have antitubercular treatments as a precaution. Apart from that, I never had drug treatment. So that's the tubercle part of it, the end result.

I don't <u>think</u> I'm different from how I would have been. The only imponderable is how I would have been. To have survived to the age of 72 is not bad going, after the medical history I had after the war. I always had the theory that having had 3 1/2 years of starvation I consumed all my atheroma. So I started with a clean slate. Of course, unfortunately, the treatment of tubercle in 1949, if you weren't having drugs, was to lie you in bed and give you too much food, which is when I became rather portly and I've never managed to lose it since, properly.

I actually could have been the one who had the drugs, because it was under trial then. I might have gone deaf from it, probably.

I went to Mundesley Sanitorium.

C.G.R.:

Mundesley?

R.P.:

Mundesley. It's a big one. I don't know whether it's still running, a big sanitarium in Norfolk. I went as a patient funded

by the Ministry of Pensions. I had a private room, very nice, very well treated I was. Mundesley Sanitarium had a medical staff of two. We were mostly chronic or recovering. One of the doctors was also a bit of a psychiatrist, and there was a weather vane. Mundesley Sanitarium is three sides of a square in its shape. So it has a bay. There was a wind vane, and it was placed on a pole in the middle of this bay and it was below level of the roof. So every time the wind blew, it spun around in circles and never showed, really, anything about the wind.

One day I said to the psychiatrist -- the chap was just coming around, Dr. Day -- I said, "Why did you put your windvane in a position where you can't show the direction of the wind?" He said, "Well, people are here for a long time. They might complain if the tea is cold. They might complain if the newspaper is late, but they forget that. All of them complain about the windvane." I thought it was worth putting on the tape [laughter].

C.G.R.:

That's a good story [laughter].

I really have about run out of questions.

R.P.:

I've run out of answers.

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