American Women’s Hospital Service in France, 1918-1919

The November 1918 armistice ended World War I in Western Europe. **How did the role of female physicians and medical staff in north-central France change in the time period immediately before and after the armistice? Why?**

**Resources**

History of the American Women’s Hospital Service:  

History of Women Physicians timeline: http://archives.drexelmed.edu/timeline.php

http://www.womensmemorial.org/Education/timeline.html

*War Times Journal*. The Western Front: A World War I Summary: http://www.richthofen.com/ww1sum/

Animated map depicting the German offensive lines along the Marne River in Seine-et-Marne, north-central France, 1918 (from the *War Times Journal*):  
http://www.richthofen.com/ww1sum/index_map_18.htm

Google map of Seine-et-Marne in north–central France, including location of Luzancy:  
http://goo.gl/maps/hXBH (case sensitive URL)
The hospital and dispensary service given to the population of the devastated region of France by the American Women's Hospitals, the war service committee of the Medical Women's National Association is unique in that it is the only relief work in this war originated and carried through by the organized women physicians of America. The need of such a hospital in the department of the Aisne was assured by the American Red Cross early in the spring of 1918, arrangement made with the American Committee for Devastated France for a location, and the necessary funds raised during a ten day drive in April which was generously supported by the devoted friends of the organization.

The advance guard arrived in Paris in June, and about the middle of July were located by the sixth French Army, through the American Committee for Devastated France, the "liaison association", at a chateau in the small village of Neuflotiers, Seine et Marne. This village was then housing about 60 refugees from the Aisne, all from the little village northwest of Chateau-Thierry called Chezy-en-Oxois, where later on we established a dispensary. In a radius of 30 miles there were perhaps 300 more from the Aisne, crowded into the already well-populated and rather poor little villages. There was a good deal of unhappiness and discontent engendered by the fact that in ordinary circumstances the department of the Aisne is richer and more prosperous than Seine et Marne, and the peasants of our villages found it hard to understand why they should share their homes and hard-earned food with the erstwhile prosperous neighbors, while the refugees could not forget the rich fields and comfortable homes which they had been forced to abandon to the destroying hun. There were also French and American troops in every little village, smiling and saluting our American chauffeurs.

Because of our location in the war zone, necessitated by the presence of the people we had gone to help, we were notified that our hospital must be prepared to take military cases; to be part military and part civil, what is called a "Hospita Mixte", provision being made to keep each part entirely separate, and all future preparation was done with this in mind.

History was being made very rapidly in those early summer months, all France was fairly holding her breath in expectation of the renewed hostile offensive. The struggle for the possession of the Marne at Chateau Thierry was still swaying back and forth in uncertainty. There were nightly air raids on Paris only 20 miles away, and at dawn we would be aroused by the dull thud of guns and flashes of light toward the northeast. A bomb was dropped in a neighboring village by a "Gothe" on its return flight to the border, and the allied air squadrons swept overhead daily on their way to the front, great V shaped wedges like flocks of geese 25 or 30 in number with a small scouting machine patrolling the flanks. In the midst of this excitement the building was prepared for use as quickly as possible, furniture and carpets taken up by a squad of "pouls" loaned for the purpose, and four new rooms prepared for wards, capacity 50 beds. The servant's dining room with painted walls, tiled floor and running water was chosen for the operating room and a small round tower room adjoining planned to accommodate the department of radiology when it should come. At that time transportation from America was much delayed and it had been planned to purchase the bulky equipment from the American Red Cross or that failing, on the open Paris market. Application to the Red Cross brought the response that they had no hospital equipment to spare, so the fifty regulation French army hospital beds were purchased from the Bon Marche. It was found that operating tables especially with an attachment for the Trendelenburg position, absolutely necessary for our civil work, were very scarce,
On July 16th began the allied counterdrive which was destined to settle the fate of the war. Within a day or two of that time, the country side had become empty of its blue and khaki clad soldiers, and within the week came orders from our commanding officer to stop our preparations, as the army had moved back into the Aisne, our refugees would be returned to their homes, and we would be given a new location in or adjacent to the devastated regions. With such rapidity do conditions change in time of war! Meanwhile two teams consisting of a physician and nurse each were to proceed to Meaux as quickly as possible, to assist in the treatment of the wounded French soldiers brought there by ambulance from the front.

When the excited four arrived at French Evacuation Hospital No. 18 that same evening, the large tree bordered courtyard around which are the various buildings of the converted cavalry barracks, was teeming with activity, perhaps the most interesting to us being the dusty ambulances rolling in almost a steady stream driven by haggard, gray youths with the familiar American air of carelessness while through the open windows and doors could be caught glimpes of white bandages and soiled blue uniformed figures, but all wrapped in a weary profound silence. There were blueclad nurses moving about with their familiar blue chiffon veils and through the open windows and doors of a long low building were to be seen high tables with whitecoated doctors and nurse bending over them. We were assigned a table in this room and the first team began its work there the next morning at 8 o'clock. The wounded soldiers received their first hasty dressing at the frontline dressing station, were given a dose of antitetic serum and a card tied to the buttonhole stating the nature of the wound. Upon arrival at "H.O.E. 18" they were carried from the ambulances into a large building called the "Grand Triage" where emergency treatments were given, the dead and dying sorted out, and made as comfortable as possible. The more gravely wounded placed in a nearby hospital as quickly as possible. By far the greater part were sent to the "Petit Triage" to be carefully diagnosed and redressed before commencing the long trip to Paris and hospitals even farther south. From 1000 to 1500 were passing through the triage daily, here we found our help gratefully received as many of the French doctors had not had a full night's rest for over a week.

We found the hasty dressings placed at the front often under fire, had frequently slipped, the cleansing of the wounds very slight if attempted at all, and a good many wounds overlooked entirely. The method of treatment was pretty well standardized: thorough exposure which usually involved cutting and removing the entire bloodstained, stiffened uniform; scrubbing the wounds and adjoining skin with soap and water; picking out shreds of clothing, badly torn tissues, fragments of shrapnel;
superficial bullets; further cleansing with free use of ether and alcohol—there was considerable use of hydrogen peroxide by the French surgeons to soften and detach the old dressings and finally very free application of a solution of iodine, after the drying of which a dry sterile dressing was applied. For broken bones the Thomas was the favorite splint but the supply was very short and fractures of the humerus were bandaged tight against the side of the chest. The "blesses" themselves were exhausted, sleeping as they lay on their stretchers waiting their turns, or sat nodding on the benches, but on being wakened looked at one with that cheerful patient eye which has caused France to idolise her "poulu". The diagnosing entered upon the envelope tied to the uniform was carefully supervised by the medecin chef. It was important to state whether the wound was caused by shrapnel or bullet penetrating or superficial seton, or complicated by fractured bone. Upon this diagnosis depended the placing of the wounded man on the swift train to Paris or the slower canalboat.

In August, rather restlessly awaiting the time when conditions should be sufficiently stabilized to allow a location nearer the devastated regions in the Aisne, dispensaries were opened and a dentist's office at Neufmoutiers, and we took care of some forty patients in the hospital, old men, women and children suffering from the epidemic of dysentery "maladie a la Mode" as the peasants liked to call it, which later became serious in the armies. During this time our ambulances began to go far up into the Aisne near Chateau Thierry to hold consultations with and bring down the sick. Our refugees had gone back to their homes to harvest the grain which the Germans had not harmed in their retreat, so in September we too packed up our "little things" and moved to the little village of Luzancy sur Marne 15 miles from Chateau Thierry.

The beautiful old building given us had been in constant use as a hospital during the war first by the Boche, then the French and last summer by our own Americans as an evacuation hospital for Chateau Thierry and Belleau Wood front. It held about 150 beds, had an abundant water supply, both hot and cold, not water heating plant, but everything much out of order and very dirty. While the building was being whitewashed and the various systems put in order, 12 dispensaries, each one visited twice a week were started to fill the very great need as quickly as possible. The condition can hardly be imagined without being seen. In the first place we were confronted with a country district containing about 3000 people. Part of it had been heavily bombarded by both the hostile and allied forces so that the houses were in ruins. Despite this the former inhabitants had journeyed back and were living in any kind of a makeshift way they could manage. All furnishings were gone, they were sleeping on piles of hay, and food was very scarce. They were badly affected by their previous fright and grief during the hasty evacuation and also by the poor food and lack of care of the previous three and a half years. The devastated districts were suffering from the scarcity of food caused by the passage of the allied armies through their villages, the unsanitary conditions left by the armies, general low state of resistance caused by bad food, conditions, fright, and nervous tension. The Boche came within a few miles of this district last summer. On top of this, three epidemics swept this country each very severe, and until we came they had been without physicians or medecines, except for the two women physicians of the American Committee for Devastated France who had been working in association with us.

In establishing dispensaries we always took great care not to interfere with the districts of the two elderly French medecins living on the outskirts of the district, although as they were not able to obtain gasolene they were not able to go outside in the small cities in which they resided. Our first act was to establish relations with the maire, major of cantonment and curé, and obtain their assurances that there was need of help.
The town officials never failed to receive us with open arms and many are the testimonials of appreciation and gratitude which the staff has received varying from official documents to fowls, rabbits, butter eggs, flowers, and souvenirs of the battles fought nearby.

The distress was the most dire imaginable. In a nearby town, there we 12 cases of as virulent a typhoid as occurs, all apparently emanating from the same stricken household where the four children all lay sick, two in a bed the windows tightly closed, the courtyard of the house containing manure rubbish of all sorts, flies fairly forming a living tissue, the mother and father frantically nursing first one then another, and helplessly watching them sicken and die. The sickest we brought to the hospital and after three weeks of delirium she recovered. For a month our doctor visited that village every day. We gave anti-typhoid inoculation to the whole countryside, and cleaned up those villages, so that the sick all got well and remained well, and we could transfer our attention elsewhere.

Next came influenza with its pneumonias. It struck the villages progressively, but all the population of a village would have it at the same time, the less sick caring for the more seriously affected. In those times the maire of a village would meet our doctor and carry her bag for her as she went from house to house. During the month of October the record is 1,700 calls and with our small force of three nurses, a fourth came late in the month, we cared for in the hospital 149 patients, 12 of whom were typhoids all delirious at times. It is a fine record for our nurses that in that time we only lost one typhoid. She was the mother of the family with whom the epidemic started, and much exhausted through caring for her children for three weeks before sickening herself. We hated to lose her!

With the signing of the armistice, all hope of military work was given up and the unit settled down into purely civilian relief organization as was originally intended. The building at Luzancy sur Marne has been electrified, coal has arrived from the army as very important point in France this winter, the full unit is there with its full equipment and the hospital is functioning to full capacity medically and surgically. The dispensary service has been extended into the devastated area as far as the inhabitants have been allowed to return. An interesting auxiliary has been opened in La Ferte Milon at the request of the city authorities, in the old "Hospitalet Dieu" owned by a Catholic sisterhood, who are helping with the nursing. It is only another evidence of the steadfast intention of the organization to associate and co-operate with the local customs and institutions.

The organization has been asked by the French government through the American Committee for Devastated France, to remain and continue its work for the next two years. It plans while not neglecting its relief work, to leave as its permanent gift, our systems of sanitation and preventive medicine. The clientele has shown themselves eager to learn new and better ways of living and bringing up their children, and are now looking toward our country with confidence that we will continue to help them in peace as in war. We must not fail them.
February 21, 1919.

The American Women's Hospital at Luzancy continues its many activities. In the ancient little village it is quite the center of life and interest, one of the town's people telling a member that it is the great pleasure of himself and wife after dusk to betake themselves to an upper window of his home, and see back of the trees, the lights of the chateau hospital, and the ambulances coming and going. Many are the evidences of true friendliness which we receive from the villagers, making us feel that they are proud of claiming us as one of their own, and also that we have been adopted by them. Our surgeon has been nicknamed "Docteur Goupé, Goupé" by the villagers, and is intensely admired, her clever operations being discussed as boastfully and proudly by them as if she were a daughter of Luzancy soil itself.

Within the last three weeks we have had two successful Cæsarean operations, which have added much to her glory, and when a man with a crushed skull was pronounced dying in a nearby town by a railroad surgeon, she was sent for in the full faith that she could save him. It was a sad story: a young refugee, returning home to Reims to rebuild his shattered home, met with an accident on the railroad, and we found him in a stable to which he had been carried. The case seemed hopeless, but the one chance was taken; at the hospital a clever trepanning was done, fragments of bone were extracted, but he died within twenty four or thirty six hours, leaving his seventeen year old wife and nine months baby. Our curé buried him, and himself paid for the tolling of the bell, though the boy was a Protestant.

Some weeks ago from this same railroad station we had a young American soldier brought to us, who had met with a horrible accident to his hand. It was a mangled, crushed mass, and at first it seemed an utterly impossible case for anything short of speedy amputation. However, realizing that anyone can amputate, but only a clever surgeon can save, an attempt was made at preservation, and by sewing, clipping, peeling and contriving as only a genius can, our surgeon put together the fragments, and the way in which she and our nurses worked over the hand for succeeding weeks only the patient and themselves can tell. After a while the hand began to shape itself, and he was sent for Xray examination to Paris, we feeling that for our one U.S. soldier we had fought a successful fight. The Army surgeon in Paris had no praise too high for the work, marveling much, as the Xray showed that almost every bone in the hand had been crushed, or simply fractured, two in the wrist being twisted completely around, and yet our boy comes out of his accident with a workable hand. What this soldier said about
our hospital gave us great pleasure; he called it "a regular home for a fellow", and such we have aimed to make it, for when does one more need a home than when one is ill, and we believe that the ideal hospital is the one that has no institution to it, that the ideal hospital is the one for patients, not for nurses and doctors, so all our days are visiting days, and when relatives come bringing their own chairs, which they prefer to our benches, we smile and bid them enjoy themselves in their own way in the hospital which we are keeping for them.

A mad dog added to our work two weeks ago, bit many children in several villages ere he was shot, and the rapidity with which those children were brought to us for treatment showed the trust which we have earned throughout the country side. Not only for the injured, but also for the dead is our help invoked. One midnight a fire broke out in a house where lay the body of an aged woman. A call was made at the hospital for a stretcher, and while the villagers with bucket brigade from the Nurse worked putting out the fire, two of our doctors like true heroines entered the burning edifice and carried out the body, taking it to our morgue.

Pathos and fun follow each other rapidly in our life at the hospital. The following scene recently took place at dinner. A doctor returning from a dispensary route, described vividly the dreadful conditions surrounding a boy patient whom she had just brought in, and much sympathy was expressed as she told about the cows almost trampling over the boy in his bed in the stable. Shortly afterwards another member returned, and as she seated herself for dinner said she had just brought in a wretched old man for operation. The Director, aghast, said, "But there are no more beds in the men's ward!" The doctor replied, as she began to eat fanatically her soup, "Oh, that's all right. I had him put in the women's ward,- he's blind". Can you hear the shouts of laughter?

H. Louise Harrell.
American Women's Hospitals,
637 Madison Ave., New York.

To the Executive Committee:

We are awaiting at Luzancy this afternoon the arrival of the three new members, Dr. Kinney, Dr. Ward and Miss Clark, also the new chauffeur, Miss Caldwell. I shall be especially glad of Miss Caldwell as our other girls are worn out and must be relieved. Dr. Kinney told me that the four chauffeurs, about whom you cabled when Dr. Purnell was here, saying the Motor Corps was sending to us, had not been accepted. I am thinking of engaging three or four from some Society now giving up work in France. I shall make it my business on Monday while in Paris to endeavor to see the heads of these Societies about getting girls, as it is absolutely necessary that I have some drivers at once. Expecting these four girls, my hands have been tied. Two of the chauffeurs must have vacations at once, which leaves us for our ambulances only Mrs. O'Brien, who knows nothing of mechanics, Miss Endie, our head chauffeur, being constantly on the road with her camion between here and Paris. The question of transportation in France at the present time is in such a condition that we have not for weeks been able to use the railroad for anything; food, Red Cross supplies, and drugs, all must come by camion.

Dr. Ward I shall place at once to finish up Dr. Doherty's work here in Luzancy, as Dr. Doherty leaves this week for her vacation at Nice. She has worked most faithfully here at Luzancy and given great satisfaction. Her work can go on in Dr. Ward's hands. Dr. Kinney will for the present stay in Paris, coming out simply to do extractions and care for the work of members of the staff.

The autos are in France but we are far are unable to get hold of them. I have asked the aid of Mrs. Dike and Miss Morgan to get them from Bordeaux. I am told that it would be of no use to send our chauffeurs to Bordeaux as there are no means of assembling the cars nor of unboxing, for all the cars must remain on the wharf until they are transported by train to Paris, the still hopeless question of
transportation in France. However, with the Franco-American Line and the Committee American for Devastated France, together with our constant nagging, we hope sometime to see them.

The Red Cross recalled their four nurses, who were girls with no interest in civil work and who consequently were in a constant state of unrest. In relieving them, however, they sent us six other girls who seem more the type of our other nurses and have assured us we can have them until the first of April. Dr. Shields has begun the organization of her dispensaries at León and I am sending to work with her Mlle. Binet, a French aid, who has been with us since the fall. We are very anxious, of course, to get an ambulance to send for her help. Dr. Stastny has been giving the anesthetics, and our operating room being busy most of the time, keeps her busy. I have not forgotten your request for information for the April number, and will send you a resume of the work and plans for the future as soon as I have them. I have given today over to our photographer from LaFerte, who has been taking pictures of the different pieces here under the direction of the staff.

I now come to the most exciting and important part of my letter. Rumors having reached me within the last two weeks that the doctors were being demobilized and returning to nearby towns, I made up my mind that I must find out definitely how much of the work here could be taken care of by the doctors now back. I am very glad to say that I made my decision and called upon these doctors before they called upon us, which evidently from what they told us, they had in mind to do. Mrs. Lehman and myself called upon the mayor of LaFerte, found out that there were three doctors back in LaFerte, discussed with him the method by which we could keep out the pay patients from the dispensary. We found out that in LaFerte the poor are taken care of by the doctors on the spot and paid by the government. We explained that we would take no people at the dispensary unless they brought a letter from one of the doctors or the mayor. We then called upon the doctors at Saacy, the next town, found that he and his confesseur had returned a few days before and that they were on the point of calling on us. We agreed to take no patients coming from six or seven towns near here, which he claims as his territory, amongst which towns he four times emphasized that Luxancy belonged. We found that there was another doctor with himself in Saacy and that the two of them had taken up the question of our having their clientele and had intended to write us.

We then went to Charly, where we found that two doctors had returned and the one upon whom we called said that he and his confesseur had had a meeting about our being in their territory. We explained the same situation to him, that we would take no patients without his authorization, or the mayor's, and would operate upon the cases promised during our stay here. As we have booked some 25 or 30 cases, exclusive of tonsils, which grow like apples in France, we have enough to keep us busy for several weeks. As a result of my day's enlightenment, I called a staff meeting, and all the members agreed with me that our work south of Chateau Thierry is over, and we sat in righteous congratulation over the fact that I had seen the situation and called upon them before they had had the opportunity to call upon us. This demobilization has taken place within the last week or ten days, so that we can say that if the French in some matters are slow, in the matter of their clientele they are particularly swift.
This afternoon I had Mrs. Lehman interview the mayor of Luzzan. We told him what we had done. He congratulated us upon the manner in which we had approached the subject and said that a week ago one of these French doctors had met him, and had asked him how long those American women were to take the bread out of the French doctors' mouths. Our mayor told him in emphatic terms that he, the prefect and the people throughout the country knew that if we had not come here when we did the people of this community would be dead and buried, the large majority of them; that we had the prefect and the people back of us, that he had perfect confidence in us that when we saw our assistance was not needed, we ourselves would take the initial step. Mrs. Lehman, Miss Tobitt and myself had been invited to the mayor's to dinner, and it happened that the night we went to the mayor's was the day after this doctor had interviewed him. He told Mrs. Lehman that he had been awake most of the night, worrying over the problem facing us, that he once or twice thought he would mention it to us that night, but decided that he would let us take the first step, so said nothing. He was particularly pleased and proud of us over the confirmation of his belief in us.

The morning after my interview with these doctors I took the early train and went in the see Mrs. Dike and Miss Morgan, to place the matter before them. Two weeks previously I had seen them, and had urged that they attempt, through their influence, to keep the chateau here for us as a surgical hospital. This was before these doctors were demobilized. When Mrs. Dike saw me and I put the matter before her, she told me that Gen. Lemone had suggested to her that we have barracks, which he could be the means of obtaining for us, and put them up in the devastated region of the Aisne. While this entails a vast amount of work, and a vast increase of expense, there seemed nothing else to do, so I accepted the offer, and am now waiting for a telephone from Mrs. Dike.

Dr. Fairbanks has agreed to stay as our surgeon until the fall with our Unit, if we can assure her a hospital of at least 75 beds for work in the summer. The rapid demobilization of the doctors makes me feel that a surgical hospital of 75 beds being kept in the Aisne until the fall will answer the necessity of medical relief in the Aisne, as by that time doctors will be returning. Two or three dispensary centers could be continued through the winter, and the hospital could close its work in the fall. There will be four doctors in the city of Laon, and the Soissons suggest as well as the doctors are returning to take up their own work; but I feel that we could do a tremendous six month's work in the devastated regions, and if at the end of that time the same thing could be said of the prefect of the locality in the northern part of the Aisne, which was said about our work in the southern part today, our organization could be well content with its work. This coming week, the executive committee, with Mrs. Dike's suggestions, will look over the territory. We undoubtedly will have to buy one or perhaps two heavy camions for the transportation of food. These are details which will have to be worked out later. It is my wish that we leave the hospital as near the first of April as possible. There will be enough operating with what we have promised to keep us busy until then. Everyone is most enthusiastic in helping in the change of location, as we all feel that our work here is over, that it has been well done and that we are eager for another six month's work in a locality where there is now no other medical or surgical aid. We know that we shall have many longings for our beautiful old chateau on the Marne, and that the future will hold hardships for us, but we are an unusually happy, harmonious set of people as was well shown in the staff meetings which I have held.
the last two evenings. I wish I could be able to tell you about the spirit of enthusiasm, conscientiousness and unity which impresses every new member who comes into our midst.

Respectfully yours,

M. Irene Harrell
Director.
AME R I C A N W O M E N S H O S P I T A L S
Hospital Benevole, No. 92 bis

March 12, 1919.

The American Womens Hospital, which began its life at Neufmoutiers, busied itself with the poor refugees who had fled from their homes near Chateau Thierry, caring for the dysentery and the various skin diseases which poor food and poor sanitation had caused.

Then, as the need for a hospital in that vicinity decreased, and increased further north in proportion to the return of the refugees who crept back to their homes as soon as the roar of the guns became distant, the chateau at Luzancy became its home. There an epidemic of typhoid and one of dysentery were raging in the fall of 1918, when the hospital moved, and for six weeks rarely a day passed that some one of the A.W.H. doctors was not called upon to write a certificate of death for some poor unfortunate who had not even been seen in life by a physician. Such was the need when we arrived. Sanitation and vaccination stopped the typhoid, but winter came and we had the grippe and pneumonia sufferers in all their forms for the poor unfortunates with inadequate clothing, food and fuel. Those were busy days and the doctors, nurses and chauffeurs thought not of rest. That epidemic, too, was conquered.

Our surgeon arrived, and the much needed surgery for the civilians of the Aisne, neglected for four years, was taken in hand. Operations followed until our fame has spread even to Paris. The list of February cases shows the range of operations, and shows the amount of work we have been doing here in our Luzancy home. Now the doctors are returning and we are planning to move again.

By invitation of the Prefet of the Aisne we are to take care of the Commune of Coucy, in the most devastated part of France, and where refugees are returning for the second time to ruined homes for it is here where reconstruction had been begun two years ago and from where the poor dwellers had been twice driven. It is here where help is most needed; where sympathy must be given, for it is here that despair is blackest. We hope to work ahead of the epidemics which are sure to come this summer, because not five kilometres away from the village where we plan to place our hospital are still unburied bodies of men and beasts. It is our hope to begin a wholesale vaccination of the people, and a campaign of personal health lessons as soon as we can place ourselves.

The hospital of the American Womens Hospital thus runs into three epochs; medical, surgical, and sanitary preventative. We hope to make our last epoch by no means the least glorious.

M. L. Hurrell.
To The Executive Committee:

The following statistics represent the work accomplished in France by the American Women's Hospitals, Unit #1, from the opening of its Hospital July 26, 1918, to August 17, 1919 - 10½ months - the other month and a half being used for the moving of the hospital. 7½ months of this time belong to the first director and 7 to myself.

Under the first director are recorded the following:

- Total number of hospital patients: 116
- Total number of days of hospitalization: 1065
- Total number of patients seen in dispensaries: 1407
- Total number of house calls, physicians being Drs. Hurrell and Fraser: 1323
- Total number of surgical operations: 14
  - Major: 2
  - Minor: 3
  - Tonsillectomies by Dr. Laura Hunt: 9

My own directorship extends from November 19, 1918 to August 17, 1919 and includes the following:

- Total number of hospital patients: 965
- Total " " days of hospitalization: 10350
- Total " " dispensary patients, Dispensary doctors being Drs. Fraser, Menwaring, MacLachlin, Shields, Bonness and Cover: 4658
- Total number of house calls, physicians being Drs. Fraser, Menwaring, MacLachlin, Shields, Bonness & Cover: 8348
Total number of surgical operations 852
   Major  165
   Minor  92
   Tonsillectomies  604
   Surgeon being Dr. Fairbanks

Total number of dental cases seen during the year 2423
Total number of villages cared for 192
Total number of dispensary centers 53
Total number of hospital installations 5
Neufmoutiers, Luzancy, La Ferte Milon, Elerancourt
   a - Tents
   b - Barracks
Total number of epidemics 5
Dysentry, typhoid, grippe and pneumonia, measles and scarlet fever.

Total amount expended $87,862
Average cost per call per patient - approximately 6½ francs
   In terms of U.S. money slightly less than $1.00

The hospital has had three centers during its existence:

First, the chateau at Neufmoutiers, where it began its work caring for the summer illnesses of the refugees.
Second, the chateau at Luzancy, where the epidemics of dysentry, typhoid, grippe and pneumonia were fought, and where the neglected surgery of the Aisne received attention.
Third, the tent hospital and barrack at Elerancourt where preventive medical care has been the primary object - vaccination for typhoid and smallpox, isolation for scarlet fever and measles, examination of school children, dental work, and removal of adenoids and tonsils.

The repair of the chateau at Luzancy and the renewed life of the hospital at La Ferte Milon are two distinctly permanent bits of service for France of which the unit is justly proud, and with the reconstruction of the latter Dr. Fraser's name will long be remembered for her devoted work there and in the surrounding countryside.

The dispensary routes began in September by Dr. Hurrell and continued by Drs. Fraser, Ewing, MacEachlan, Evans, and later further up in the Aisne by Drs. Shields, Bonnaes, and Cover, have carried the work over an area of many many square miles - across battlefields and into battered villages - always with help
for the stricken and fame for the unit. Here have been cases ranging from old people with bed hearts and with old leg ulcers to children with scabies and whooping cough.

To the regret of the unit, Dr. Anna Garnier, who had been serving in France for some time with another organization and who was with us for a short time, felt herself unable to remain. She was a distinct loss to the unit.

Dr. Inez Bentley's work in securing Red Cross supplies from Paris and in superintending the work of the hospitals and the work of Dr. Mary Evans, who had charge of the pharmacy and who kept both of the hospitals and all of the dispensary centers supplied with drugs and dressings, have been of the greatest efficiency.

Dr. Mary Getty, the oculist, returned early in the year, work in her department not being urgent as in others.

The surgical record under Dr. Charlotte Fairbanks is a famous one—352 operations. In this series there were properly but four deaths as two who died were practically hopeless when touched—a fractured skull and a perforated strangulated umbilical hernia. The operative scope included, beside ordinary abdominal work, thyroidectomy, radical mastoid, trephining, Cesareans, leg amputations, prostatectomy. The wonderful surgical record we attribute as much to our fine nursing corps as to our surgeon. Miss Pettingill, head nurse and Miss Purvis, head surgical nurse, both A.W.H. nurses, deserve special mention for their ability formaking under adverse circumstances and in primitive surroundings, a record of such work. The Red Cross nurses, who joined the unit in May and who had been previously detailed to the hospital are girls who represent the highest ideals of their profession and with whom it was the greatest pleasure to work. Their loyalty to our unit has been a joy.

The development of the dental work continues under the three dentists remaining with the hospital, Drs. Doherty, Ward, and Kinney. Dr. Doherty, who has now given fourteen months of hard work in the cause, has herself in that time accomplished the following:

4480 operations in a total of 1195 patients.

A systematic line of work is now being carried out by the dentists whereby it is hoped to be able to attend to the teeth of all children in all the schools in three communes, in each of which is stationed a dentist, this work being educational, prophylactic and corrective. There is a big work for dentists among the youth in France and our dentists are
equal to the task.

The efficiency of a hospital such as ours depends much upon its motor service, and we all agree that to none of the workers is so much credit due as to our girl chauffeurs, and in this report I wish to emphasize our debt to them. Miss Edie, the head chauffeur, is a Scotch girl of rare ability. She has been ably aided by our A.W.H. girls, Miss Florence Chapman, Miss Wilhelmina Drummond and Miss Douglas and later by Mrs. O'Brien and Miss Caldwell, whose worth grows daily. To these we have added three fine English girls who remain at Blerancourt.

Miss Ada Tobitt, the financial secretary, has combined with a wonderful adaptability to figures and statistics an ever watchful eye to the money entrusted to the unit and her management of the finances has made accurate that bugbear of professional people, the accounts of the unit, and to her and Mrs. Lehman, our official business head, belongs all the credit of having spent our money with a thrift that belongs not at all to us as individuals. Mrs. Lehman has been invaluable in every department, whether it has been in buying provisions, in burying the dead or interviewing some high official or in mothering us through fits of homesickness.

For the completion of our contract in France are left two able women physicians, Dr. Bonnass and Dr. Cover, both women who have had years service with the Red Cross abroad; the three dentists, Dr. Ward, Doherty and Kinney; Miss Clark, the superintendent; and a small corps of other workers, a thoroughly adequate staff for the work now presented.

This Unit No. 1 of the American Women's Hospitals is united in expressing through me its appreciation of the opportunity given it of participating in this most satisfactory year of work, which in a sentence means 1,083 patients, representing 12,215 hospital days; 13,442 patients received medical care; a round 20,000 people at least, if chance patients seen on the road be included, of whom no record was kept.

Respectfully submitted,

(signed) Louise Hurrall.
Dr. Hazel D. Bonness  
Director American Women's Hospitals  
Elerancourt (Aisne), France.

My dear Dr. Bonness:

In confirmation of our conversation regarding the medical work in the four cantons of the American Committee for Devastated France, I wish to briefly state my sentiments concerning the future work of your splendid organization.

The situation as it stands at present, caused by the presence of certain licensed French practitioners who are not willing to give you the fullest cooperation, has created, no doubt, a very embarrassing situation.

The visit of Dr. Martial of the Prefecture, and that of M. Ouvré, Secrétaire General of Reconstruction, of the Prefecture, has opened the eyes of the Prefecture, not only to the magnificent work done by the American Women's Hospital, but the inestimable value of conserving your interest in the population, at least through the winter. They are both in accord on this point, that this winter we shall have a very great deal of illness, probably an epidemic of grippe, influenza, and pneumonia, which will tax the resources of the French licensed practitioners, as well as the hospital, to its utmost capacity.

But the hospital cannot be given full play until the authorities have paved the way to a complete cooperation by the French doctors and yourselves. This is a delicate matter and requires careful handling. The American Committee has been able to step in, however, by providing the region of Vic-sur-Aisne with a French doctor, on the payment of 500 francs per month, on condition that he gives us his fullest cooperation. We are prepared to do the same for the canton of Anizy.

It seems to me vital in the interest of the population who have suffered so much, that you and your staff would meet us half way on this important question of playing for time until we get both of these doctors into full cooperation with you. If they prove to be of the right type, time will point out some satisfactory plan to you, ourselves, and the people, by which the hospital could remain as a source of relief and help, by the replacement of French assistants when you feel the time has come for you to leave. I feel very strongly that that time is not yet.
You know the conditions of devastated France as thoroughly as I do, and that since the Armistice, practically nothing has been done beyond actual emergency work, the upheaval and uprooting has been so complete, it will be a long and slow process to replace the social and civil conditions which existed before the War. You appreciate as much as I, the courage of these people who have returned to the remaking of pre-war conditions, and that at the moment of writing, they have as yet, received very little support from the Government, and are therefore greatly in need of help from their Allies.

Until Peace is ratified and the whole administration of devastated France reorganized, it is doubtful if much progress can be made, and this winter particularly, the suffering will be great and my letter is an appeal to your directors to continue to give us your generous support until such time as the population is not so desperately in need of medical assistance.

The proposition of Dr. Cohen to turn the hospital over to the Prefecture is one which the Prefecture itself said to me, would be most inadvisable, because it would be merely putting the welfare of the inhabitants into the power of the French administration, which is not able or willing to see the needs of the population as we see and understand them.

Moreover, the property on which the barracks have been mounted has been leased for two years to the American Committee, and therefore, it is not in the power of your directors to hand it over to the Prefecture. Secondly, the barracks were given to us by the Ministry of War for the express purpose of creating a free hospital for the unhappy population of Devastated France, though the construction and reparations belong entirely to the American Women's Hospital.

If you think it wise not to keep your hospital open on such a large scale, then it is simply a matter of adjustment and arrangement, which we could very easily settle.

I have sent you already a copy of the letter from the Prefet in regard to our work with the hospital under your direction, and have today received another letter from Dr. Martial, asking for another interview at the end of this week.

I hope my letter in no way will be interpreted as a claim upon the further generosity of the American Women's Hospitals. It is a strong appeal from me to a group of women for whom I have the greatest admiration, to continue, as far as it is in their power, their work during the coming winter.

I will send you a copy of the agreement between the American Committee and the doctor at Vic, and hope to see you on Saturday, dear Dr. Bonness.

Very sincerely yours,

Anne Dike
Presidente
AWH ambulance with stretcher
1st row: Dr. Garnier, Dr. Fraser, Dr. Hurrell, Dr. Hunt (medicin chef), Dr. Manwaring.
2nd row: Mme deBordeon, Dr. Duncan (head nurse), Mrs. Lehman, Dr. Getty, Dr. MacLachlan, Dr. Evans, Miss Whittaker (surgeon nurse), Miss Drummond (chauffeur), Miss Eddie (chauffeur).
3rd row Miss Purvis (nurse), Miss Tobitt (registrar), Miss Chapman (chauffeur)
Women's Ward, AWH #1, Luzancy, France.
Dr. M. Louise Hurrell & Dr. Inez C. Bentley
Mealtime in the ward, Luzancy
American Women's Hospitals
Hospital No. 1
Hôpital Auxiliaire No.
Comité Américain
Pour les Régions Dévastées de la France
CHILDREN DISPENSARY FRANCE.

Calisthenics and breathing exercises are a part of the health program of the dispensaries in connection with which recreation days are established. Before they are permitted to join the play and calisthenics groups, the children are required to be clean.
Workers of
American Women's Hospital No. 1
Luzancy, France.
All over France, this Easter time, there are new graves, graves far away from the homeland. Some of the graves are marked, some of them are just lonely little rounds beside some road that any army once marched along. But, whether they are marked or unmarked, they are graves that our hearts turn to on this Easter Day. For they hold the bodies of our heroes, our boys who died in action for a great cause. The graves in this picture are in a little quiet space behind the American Women's Hospital at Luzancy.