Memories of POW days

Salonika - December 1941 and to Freedom 16th May 1945 Submitted by: Pte. Arthur M. Spence NX23703

Six medical officers of the 2/5 AGH, some nursing personnel and other POW's were left behind when the main group of Ex-Kokkinia Hospital Personnel with expatients were transported to German POW Stalag at Thorn - Poland, from the POW transit camp at Salonika. This remaining group worked at the POW Hospital looking after a few injured Army personnel and many sick civilian internees including pregnant females.

Christmas was celebrated with "home brew special", manufactured by the medical officers - with great effect - and for those game enough The poor low standard camp food was supplemented with a little "rabbit" (feline) stew.

On the 22 nd February 1942, the camp was cleared and all POW's were loaded onto the 'cattle express trucks' to Europe, and after an eleven day journey in freezing conditions, we arrived at Lansdorf, Stalag V111B. Due to a Typhus epidemic our train had been diverted to this 'clean' camp, which meant that the few 2/5 personnel were separated from the main group who were in Thorn - Poland.

After a few head to toe shaves and showers which kept us Typhus free, I tired of volunteering to work on the frozen mounds of potatoes and swedes to get a little extra food (the shoots broken off and hidden in clothing to get back into the main camp), so looked around to find something else to do. Being a protected Geneva Convention Prisoner, I was able to avoid any outside drafts to working parties in factories - forests - mines and the like.

Captain Norman Rose (2/5) had done some medical work in the main camp before being sent to a POW Hospital at Cosel O/S and a little later 'arrangements' were made with the authorities for me to join him.

This hospital of several army style huts, was a couple of miles out of the town, which is on the Oder River, in Ober/Silesia - ex west Poland - and was the centre of heavy industry and mining.using POW, and Civilian Internee Working Parties of many nationalities.

The hospital had approximately 800 beds of which 100 were kept for non-Russian prisoners. The Russian prisoners were kept segregated, but all other nationalities were mixed together.

The nursing staff level was 6 Army Doctors - 2 English - 1 New Zealand - 1 French -- 1 Serbian and 1 Australian - Dr. Norman H.Rose 2/5 and eighteen Medical Orderlies -9 English - 7 New Zealanders and 2 Australians (Pte Doug Heyhoe, Subiaco W.A. and Pte Arthur Spence 2/5)

Two rooms of the hospital were set up operating theatres, with very basic equipment from Red Cross and the Germans. A reasonably good Pathology service was provided by a British Army Technician. How basic the equipment was, is underlined when a couple of leg amputations became essential. Doctor Rose was the surgeon and had to resort to the carpenters maintenance tool box for saws and a file. The operations were successful with no post operative problems. On another occasion a brace and bit was used to drill burr holes to relieve pressure on a patient's brain.

In each of the Russian POW wards, were two Russians who supervised the feeding - bed panning and general wants of patients, including some medications. Most of the Russian patients were seriously ill or injured. But the comradeship in helping each other had to be seen to be believed A common bond was strengthened by mutual feelings of disgrace and fear of the future, as Russian soldiers were not expected to be captured. As soon as a Russian patient appeared to be actively mobile, or have recovered a little, he was immediately sent back to his working party by the Germans, who kept a very close watch for possible malingerers etc.

All Russian patients were severely under nourished on arrival at the hospital, and usually had multiple injuries or complaints. The most serious of the patients still living on arrival were those with spinal injuries, generally caused in mine accidents. These patients were mostly quadreplegic and only a few lived for long, despite good surgical and nursing care. The room of twelve patients with the more severe spinal injuries required heavy nursing with very little resources, and morphine injections soon gave little or no relief from pain and suffering - from time to time a patient would beg and plead for help to end it all. Due to lack of medical treatment between the mine accident and admission to hospital - maybe a week or more - and the low general physical condition prior to the accident, the patients also had multiple infections of their body.

It was impossible to get away from the stench, and during wound dressings, which were done about once a week because of shortage of materials, the patient was taken outside the ward. We were forced to chainsmoke - with medical officer approval - for the two or three hour dressing period. The pain tolerance of the Russians was far beyond any other nationalities - on dental parades, teeth were extracted without any anaesthetics, even when severely abscessed. Also Doctor Bogdan Stoijic, a Serbian Army Colonel prisoner, and highly rated European prewar surgeon, would use local anaesthetics to remove appendices, and the patient made walk back to his ward. All with no adverse effects and enabled a safer recovery. The German guards were terrified at the thought of being exposed to infectious diseases or epidemics, and at times the POW medical officers declared such a condition to enable the patients to have a few extra days before going back to work. But this ploy had adverse effects a couple of times, so the practise stopped, as the Germans would hold sick and injured at Working Party sites, until the hospital area was declared clear again, and ready to admit new patients.

On a few occasions severe Typhus outbreaks did occur despite the strict admission precautions. Patients were isolated as far as was practical, and a couple of volunteer medical orderlies were given booster anti-typhus injections and sent in to do the best they could, staying in isolation with the patients. Deaths were not reported till after the daily count by the guards, as this meant extra food to be shared among the surviving. During an epidemic the guards would not come into the camp, so a physical count was not possible, and it was only when bodies had to be removed that the 'Roll' was adjusted. Food and supplies would be placed just inside the outer gates by the guards, and when they had retreated a safe distance, we would be allowed to collect them. Empty food containers were autoclaved and placed back near the outer gate for collection.

Another ploy used, particularly by Dr. Norman Rose - Captain 2/5 - was to arrange a tour by himself, of the working parties and selected patients, who the Germans declared not sick enough to be sent away to a Hospital. They were 'specially treated' by him, which ensured their hurried transfer out of the working party camp. This 'special treatment' was injections of Atrebin, and eye drops of Acriflavine, which gave the patients a jaundiced appearance. This enabled a diagnosis of Hepatitis or other likely infectious conditions. - the 'treatment' was continued by the Medical Orderly for a few days in the hospital. On the outskirts of Cosel O/S, there was a very large factory on the banks of the Oder River, and the British / European POW's walked the three miles to the hospital for a sick parade, if the first aid orderly - Sgt Bunny Austin - (Sydney NSW.) could not handle the medical problem, or unless the German guards agreed.

The Cosel O/S POW Hospital was limited in speciality medicine, because of facilities and the qualifications of its Medical Officers. As the Germans centralised their own limited resources, it became necessary from time to time for POW patients to be transferred to a Speciality Hospital, in say Berlin - Munich - Cracow and similar centre for treatment. And /or surgery for Opthalmic - Orthopaedic and Internal conditions.

The only permissable transport was civilian train and / or walking, not withstanding many patients were genuine stretcher cases. The patients were transferred in groups to the appropriate Speciality Hospital, with one or two guards and two medical orderlies to carry each stretcher. As I had learnt German and Russian, I went on most of these 'tours' to act as interpreter as well as to carry patients. The most interesting was one three day trip to the outskirts of Berlin. The group comprised two guards - six patients with severe chest and internal problems - one other medical orderly and myself. We travelled in a civilian train and as we neared Dresden later in the morning, an air raid warning was given and the train pulled into the middle of the railway junction - making an ideal bombing target. All the German passengers fled the train to nearby Air Raid shelters, and were followed by our two guards. We were told to stay on the train and would be shot if we attempted to get off, even if bombing started.

After an hour, the All Clear was given and everyone returned to the train. The guards explained to us later that we were left exposed to the bombing as they thought it safer than in the air raid shelter, with the mood the civilians were in towards the enemy. The previous week they had lynched two British airmen who had been shot down, and were taken in to the shelter while the night air raids continued. Early the same afternoon we were to witness the first daylight air raid on Berlin, and it was these planes meeting at rendezvous points that explained why our train had not been bombed. The return journey was uneventful and after three days of no sleep, bed was more than welcome after circulating the 'Bombing of Berlin' news.

Special occasions such as Christmas - New Year etc. were celebrated with home brew made in the camp from bread - raisins - sugar - water and other ingredients.It was quite potent. The Russian POW's made a brew of their own with their limited resources, and which was even more potent and dangerous. Food supplied to the hospital by the Germans was reasonable, although the nutritional values were doubtful at times. The British - Australian and New Zealand POW's were fortunate in having Red Cross parcels to supplement their diet from time to time.

During my stay at Cosel, many thousand Russian POW's passed through the hospital, and were of all ages from sixteen to seventy plus, and from all walks of life, from peasants to professors. Being able to talk to them in their own language and having obtained their confidence whilst nursing them, enabled me to have meaningful and interesting discussions with individuals, hearing the real day to day thoughts of the people of Russia - vastly different from the media propaganda.

At the beginning of 1944, with the Eastern Front advancing westward, several working parties in the Cosel O/S area were transferred for security purposes, and the hospital workload lessened, also new Russian POW's were getting fewer and fewer. Due to this and the repatriation of many POW's and medical personnel, I sought to move on, and when I heard medical orderlies were required elsewhere on working parties and POW hospitals in Austria, I volunteered. Accompanied by a guard, I was transferred to Haid -Traun O/D POW hospital and Russian workforce camp of many thousands and a few miles west of Linz.

The patients were mainly Italian - British Desert Warfare and Americans - British Air Force personnel shot down on bombing / strafing raids on adjacent ball bearing and tank factories. Two American Air force personnel brought to the hospital after a major raid on Wells / Linz and had been blown out of their plane at twenty thousand feet - their parachutes did not open. They crashed to earth which was well covered with snow, and only suffered fractured ankles to both their legs, with some exposure to cold.

Another feature of this hospital and camp was that medical personnel were given

passes to leave camp on off duty days. In the earlier days, even train passes were issued to travel to nearby towns. But these were withdrawn after some problems with German army personnel stationed in the towns on front line convalescent leave.

Captain Cribb of the British Medical Corps was in charge of the hospital and was a strict disciplinarian, particularly when privileges were sought.

Being Australian, I found this British army discipline hard to take, so when an opportunity came, I transferred as sole medical orderly to a Forestry working party in the Austrian Alps.. So on the 21 st February 1945, accompanied by a guard, I travelled to Grunau by train, which took a full day, due to troop movements being given priority over civilian trains. Then followed a fourteen mile walk through thigh high snow to the camp on the shores of Lake Almsee, which was on the other side of the mountain to Hitler's Berchesgarten retreat. All the POW's in this working party were British, and being the lone 'Colonial' it took a while to be accepted. Medical work was minimal, mainly cuts and chest conditions from the cold exposure.

Equipment and medications were over plentiful, better than the hospitals that I had worked in. Food was good and plentiful, in addition to a full Red Cross parcel as this was classified as a heavy duty working party. Felling - trimming and stacking large Fir trees at the foot of the mountains, from where they were collected during the three months the tracks were open, was the main work.

A small but powerful radio 'found' its way into the camp, and as I understand Russian - German - basic Italian - as well as English (BBC), it fell to me to listen in during the night while volunteers stayed up to look out for prowling guards. Thus we were able to keep up-to-date with the approaching American and Russian armies.

On the 4 th May 1945, the news was such that we knew that American tanks were only a few miles away, as fleeing German soldiers were passing into the mountains to hide. Our guards were told to let us go free, and tell us to march the fourteen miles into town, but as it was not official, they refused. This was fortunate, as we found out later that it had been a plan to ambush us as escapees, in retalitation for autrocities allegedly carried out by marauding Russian Patrols nearby. The local German / Austrian cicilians, as well as soldiers, were terrified the Russian soldiers would capture them, and not the Americans.

The American Destroyer tanks were the first to arrive on Sunday the 6 th May 1945. I joined them to act as interpreter, as they proceeded around various villages. The main objective was to round up fleeing German SS soldiers and escort them to a general centre, and for civilians to stay put, which they seemed prepared to do, on receiving assurances that the Russian soldiers would not be coming to this area.

Of course the Americans were more than interested in collecting arms, particularly good telescopic sight hunting rifles as souveniers.

On VE Day, I celebrated with the Americans who had found and confiscated liquor, including 1940 Scotch whisky. We had arrived back in Linz to join the main American Army Centre. There was no available transport to return to England, so I returned to the nearby Hospital and Civilians Internee Workers Camp, which had been freed. I worked as Interpreter to the American Commandant, who was collecting data about autrocities carried out by the Internees on their German guards, as the American tanks arrived. The next day, 11 th May 1945, orders came through that all ex-POW's were to be flown to Le Havre for repatriation to the U.K. but as I had developed double pnuemonia, I was not allowed to fly. Instead I was admitted to an American Field Hospital from which I was repatriated to White Lodge Hospital, Newmarket, U.K. where I arrived on the 17 th May 1945, five stone under my enlistment weight.