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Epidemic Jaundice:
Harvard’s 5th General Hospital at Musgrave Park in World War II

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U.S. DEPLOYMENT TO ULSTER AND EIRE

On September 2, 1939, Winston Churchill joined Chamberlain’s cabinet. Nine days later Franklin D Roosevelt wrote as follows:

“My dear Churchill:

It is because you and I occupied similar positions in the World War that I want you to know how glad I am that you are back again in the Admiralty. Your problems are, I realize, complicated by new factors but the essential is not very different. What I want you and the Prime Minister to know is that I shall at all times welcome it if you will keep me in touch personally with anything you want me to know about. You can always send sealed letters through your pouch or my pouch.

I am glad you did the Marlboro [sic] volumes before this thing started – and I much enjoyed reading them.

“With my sincere regards, Faithfully yours,
[Franklin D Roosevelt]”

On November 16, 1939, the US Surgeon General wrote to Dean C Sidney Burwell (MD, 1919) of the Harvard Medical School about responsibility for reactivating Harvard’s Hospital No. 5. “Thus perpetuating the fine traditions of World War I of (Harvard’s) United States Base Hospital No. 5.”

On June 13, 1940, Churchill had suggested in a letter to Roosevelt that US forces be moved to Ulster and Eire. On February 20, 1941, the 5th General Hospital met at the Harvard Club, 320 Commonwealth Avenue, Boston, with Elliott Cutler, Moseley Professor of Surgery and Chief at the Peter Bent Brigham, as Acting Director. Cutler had served in the same designated Harvard Hospital No. 5 in World War I, which had been under the directorship of Harvey Cushing, his predecessor as Moseley Professor. Plans were being made in the United States and the United Kingdom for the still neutral US forces to be stationed in Ulster. In April 1941, the US War Department issued RAINBOW-5 which detailed the deployment of thirty thousand US troops in Ulster. On June 12, 1941, the British Government signed a contract with GA Fuller-RR Merritt Chapman Corporation to begin constructing US bases in Ulster. My father, now commanding officer of the 31st British Military General Hospital at Musgrave Park outside Belfast, was told that the 31st was to be taken over by the Harvard-affiliated 5th US General Hospital, the first unit of its kind scheduled for deployment under Operation MAGNET planned by RAINBOW. The activation of Operation MAGNET was agreed by President Roosevelt and Churchill and the Joint Chiefs at the Arcadia Conference held in late December 1941 through early January in Washington, DC, shortly after the US entry into World War II in early December 1941.

CUNARD LINER SUNK

My father was commander of the British Hospital, because although a Territorial, he had distinguished himself in France. A senior surgeon at the Royal Victoria Infirmary at Newcastle-upon-Tyne, from June 3 through June 17, 1940, while in command of the rear guard of the 8th British General Hospital at Rennes, he did much war surgery. When the enemy attacked with high explosive bombs and machine guns on June 15th, he obtained trucks and ambulances

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and the patients and staff headed south. On Monday, June 17, 1940, the Cunard Liner, the Lancastria, was at anchor a few miles off St. Nazaire. According to The New York Times of July 26, 1940, one officer declared “We were so tightly packed on board that we could not move when the planes came over, so the men just jeered.” Then came the bombing and the sinking and “At what seemed a prearranged signal the bomber started releasing incendiaries which set fire to the oil. Within a few minutes some of the rescue craft were in flames.” In St. Nazaire harbor on June 17, 1940 my father evacuated the remains of his hospital and 52 survivors of the Lancastria sinking, on board the SS Glenaffric (launched 1920, 4,900 tons, maximum speed 11 knots) and they later made Plymouth. When he heard of the sinking of the Lancastria, Churchill burst into tears and slapped a D (secrecy) order on the news. Nevertheless, The New York Times learned of the disaster and the loss of five to nine thousand lives.

My father would never speak of the voyage on the Glenaffric. On landing, he received an immediate award of the Distinguished Service Order (DSO). The evidence for the Prime Minister’s tears comes from a junior secretary of Churchill, who was recently interviewed about her experiences on a United States Public Broadcasting Service program. She said it was the only time she saw him cry.

Churchill, during the years 1940-1956, held an annual dinner party limited to himself and the twelve Harrow Monitors (School Prefects) in the headmaster’s dining room and library, after which he used to indulge in hours of post-prandial conversation. He would try out punch lines and anecdotes for his future speeches and answer questions. On Friday, December 7, 1951, again Prime Minister, he was asked if he had ever thought the Allies would lose World War II. “No,” he replied, “Because from September 1939 I trusted the American President and people in seeing to victory.” Then we heard of the Jeromes’ relationships to the Roosevelt kin. He said it had improved with his birth at Blenheim. The tears in his eyes after my question about the Lancastria were when his brandy bottle was half full – the cigar was never smoked, but gestured like a conductor’s baton.

5TH HARVARD AND 31ST BRITISH

The 5th Harvard US General Hospital arrived in unscheduled installments at Musgrave Park without intended equipment. On January 26, 1942, about 4,000 members of the US 34th Infantry Division landed in Northern Ireland. Seven physicians of the Harvard 5th General Hospital, 26 nurses and 14 enlisted men, arrived at Musgrave Park the first week in March, but the rest of the 5th Harvard Hospital having initially embarked from New York on February 19, 1942, did not arrive. Their USAT, American Legion had to turn back to Halifax on February 21, due to engine trouble.

The March arrivals were put to work at the 31st General Hospital and entertained by my parents nearby at our house, “Windyridge”, which they had rented from the Toppings. The majority of the 5th General Hospital reembarked on 30th April 1942 and reached Belfast on the 12th of May. The 5th General Hospital started operation on 21st of May at Musgrave Park. Tom Lanman, the Chief of Surgery of the 5th, arrived with the delayed main body and his War Diary entry for May 12, 1942, describes his first walk that day down “a beautiful Irish lane”. He joined Ted Badger, the Chief of Medicine who had arrived in March.

Fig 1. Colonel Thomas Lanman, Chief of Surgery, Harvard’s 5th General Hospital, with Colonel Angus Hedley-Whyte, commanding officer of the British 31st General Hospital, walking the grounds of Musgrave Park, May 1942. Colonel Lanman was appointed Clinical Professor of Surgery, Harvard Medical School, in 1947 and was Director of Harvard Medical School Alumni Relations from 1951 until his death on March 25, 1961. Photo courtesy of Col Magnus Smedal, Head of Radiology, 5th General Hospital, gift to author.
Thomas Hinckley Lanman (Figure 1) was the son of Charles B. Lanman, Wales Professor of Sanskrit at Harvard, and Mary Hinckley Lanman. Thomas' sniffling at least once upset Henry James.5

During May 1942, a serum hepatitis outbreak was traced to contaminated yellow fever vaccine. The British 31st General, with my father still as commanding officer, worked together with the 5th Harvard Hospital (Figure 2). In late May, 1942, the hepatitis in US troops became epidemic. In June 1942, the 5th General hospital opened a 900-bed annex in Waringfield and in August the combined patient occupancy of Musgrave Park and Waringfield exceeded 1,500. In late July, 1,950 soldiers were jaundiced but only two died, although about one hundred4 suffered permanent liver damage. This excellent overall result was achieved with help from the US 2nd General Hospital staff expeditiously transferred from Oxford, and continued cooperation from the 31st General Hospital's staff which had been delayed in their move to Hatfield House.

At the British to U.S., command handover ceremony, on May 20, 1942, my mother was amused when I saluted the raising of Old Glory and not the lowering of the Union Jack. Most of the 31st General was then moved from Musgrave Park to Hatfield House. The 800-bed 5th General (Harvard) hospital was four times extended to a fully occupied 1,500 beds. First, in Ulster because of the epidemic, secondly in Carentan, Normandy to treat battle casualties before and during the breakout. The hospital had landed over Omaha beach on the 6th of July. Thirdly, after the Battle of the Bulge in Toul, in Meurthe-et-Moselle province, northeastern France, where it moved on the 22nd of November 1944, and lastly, to treat civilian victims of the concentration camps and Allied bombing. There it ended World War II with Col Robert Zollinger6 as commanding officer, Col Zollinger having succeeded Colonel Maxwell G Keeler.4 The hospital treated 35,400 casualties and patients in the period May 20, 1942, until its disbandment on August 26, 1945.

After World War II the Harvard Medical School faculty who had been at Musgrave Park would frequently ask when I was coming to Harvard. So after I qualified from the University of Cambridge Medical School and was engaged to a University of Durham medical student the move seemed opportune. My fiancée was transferred to medical school at St. George's Hospital, London — the Assistant Dean, Donald Teare, had been a guest at my parents-in-law's wedding. Charles Percy Pinckney, Pediatrician-in-Chief of St. George's Hospital,

Fig 2. The staff of the combined Harvard 5th General Hospital and British 31st General hospital in front of Musgrave Park, the former boys reformatory outside Belfast, May 1942. Note the relatively few British officer nurses and the bereted US officer nurses who fought the yellow fever vaccine-associated hepatitis epidemic which sickened 1,950 US soldiers, in Ulster.

Photo courtesy of Col Magnus Smedal, Head of Radiology, 5th General Hospital, gift to author.
arranged for Charles A. Janeway who had been Head of Laboratories in the 5th Harvard General Hospital and was now Chief of Medicine and Thomas M. Rotch Professor at Boston’s Children’s Hospital, to give a Hunterian Lecture. “No dinner after your lecture,” said Pinckney, unless you promise an internship.” Tessa, now my medical student wife, was seated next to Professor Janeway at the dinner and they seemed to get on well. Subsequently, Tessa failed to get the Brackenbury Prize as the top medical student only because of her low marks in Pathology. This ignorance is still being corrected in her position as Head of Neuropathology at the Massachusetts General Hospital and Professor at Harvard where she is a close colleague of Ulsterman Robert (Robin) Young, Director of Anatomic Pathology.

In 1971, my father’s obituary in The Lancet, written by Sir Ian Fraser, DSO,7 stated “Outwardly he gave the impression of being an easygoing country gentleman. Very few surgeons over 70 years of age are out on horseback two or three times a week, as he was until recently.” The British Journal of Surgery concluded its In Memoriam, “Harvard gave Angus an excuse to visit America whenever possible.”

REFERENCES


