



South Australians at war – transcript – D 7558(L)

Bridging the gap between two wars : reminiscences of Ken Darwin : [extracts]

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THE PRISONER-OF-WAR YEARS

THE BURMA - SIAM ('Death') RAILWAY

LATE 1942 TO MID-1944 AND AFTER

As I have mentioned, we had already spent the first three months of our captivity in Changi, then, as 'A' Force (Green Force, under our Major Green), we had spent a further three months at Victoria Point, in the extreme south of Burma (Myanmar), and then another three months at Tavoy, before being shipped to Moulmein, and south again to Thanbyuzayat. This was the place where the new railway line was to branch off for Bangkok, and we were to have the honour of helping build it. Wouldn't that please the Emperor!!

November 1942

We marched through the jungle to our first camp 'on the line' at Kandaw, the 4 km. mark. All the preliminary planning had been done by British engineers, years before. The route had been chosen, levels taken, etc., etc. and the decision had been made that it would be too costly, and the matter was shelved. Along came the Japanese and inherited the plans. Also, they had thousands of prisoners, plus hordes of the locals, whom they had overrun. All these could be put to the task and labour costs would be minimal. And if many died in the effort, so what? What more glorious way to forfeit one's life than in serving Emperor Hirohito? The Japanese even worked out in advance the grand opening day, when the line would open. The line would start from each side and meet in the middle at the Burma/Siam border, extending from the junction with the existing line which ran down the coast of Burma through Thanbyuzayat to Ye and Mergui to the junction with the existing line from Bangkok to Singapore at Banpong. What the Japanese had not allowed for was the death rate of the workers and what that would do to their schedule.

Our first camp was 4 kms. from Thanbyuzayat, and the country was quite level. Each man was accountable for 1 cubic metre of dirt, to be excavated and carried to form the embankment for the railway. But no allowance had been made for men who fell sick. If one halves the work force, the workers then have twice the amount of work to accomplish. The Japanese wouldn't allow food rations for non-workers, so, if half the men were sick and did not work, the food ration was halved. Our people did not agree with that line of reasoning, so all men had to subsist on half rations, or whatever the proportion of workers to non-workers



happened to be. With a completion date fixed, it meant that, for every man who went sick, his work had to be done by the workers. Thus, the volume of soil to be shifted and carried to the line embankment increased to 1.2 cubic metres per man per day, and then 1.4 cu. metres, on and on. I am not now sure just where and when the changes came but I do remember that, just before I left the 105 km. camp to go back to the 55 km. camp to die, we were excavating in excess of 4 cubic metres per man per day, and we were in mountainous country with rocky cuttings and a long 'carry' to deposit the dirt into the gullies for the embankments, but more of that when it occurs! Men worked in groups of three, a surface area of 3 square metres having been marked out by the Japanese engineers, and we dug down to 1 metre deep over that full area, the Japanese measuring to make sure that we gave our pound of flesh! You couldn't 'short-change' the Emperor! In each group of three, one man dug and two men 'carried'. In the early stages, the digging and 'shovelling' was all done with a large 'chunkel' or hoe. The 'carry' was done as follows—a rice bag (just like a jute wheat bag) was put on the ground and the dirt/rock was piled up on that. The two bottom corners of the bag had been joined by a piece of wire about a metre long and the same for the two top corners. After the bag was loaded, the 'carry pole' was inserted through the two wires. The two carriers then lifted the pole onto their shoulders and ran at a fast trot to

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whichever side there was to be an embankment. While the two were away on the 'carry', the man doing the excavating tried to have the necessary dirt ready for the next load so that it was a non-stop operation . . . the Japs saw to that! Our morning meal, eaten in the dark, was rice 'pap', rice cooked with too much water, and very similar to that paper paste, 'Clag', which we used in Junior Primary School for sticking paper, as in 'papier mache' work . . . and about as tasty! However, there was one exception. I had masticated my pap for a while and had trouble with a hardish lump composed of solids and straw. I put it aside and as it became more light (as in daylight), I found that I had been chewing a lump of dried fowel manure and straw. We were invariably out at work on the railway line as soon as the first rays of daylight showed, having walked out in the dark. Both the mid-day meal and the evening meal were the same, consisting of boiled rice and 'stew'. And I use the word, 'stew' extremely loosely. Each man received a ladle of rice and a ladle of stew, the ladle being made from a condensed-milk tin wired to a length of stick. The stew varied greatly in its contents. If (rarely) there was meat in the stew, we knew well beforehand because the maggots floated on the top! Mostly, it was a drum of water, coloured with tumeric powder, or with a few turnips boiled in it, or perhaps tapioca root, known as 'white death'. The rice was cooked in large 'kwalis', cast iron containers which were almost a hemisphere, a much bigger model of what we now know as a 'wok', with these being set on a clay fireplace, built as a bed for the container and with plenty of room for the fire underneath. The 'stew' was cooked in 44-gallon petrol drums (200 litres) which still had the appropriate smell and taste, at least for a while! Our food had not been particularly good, plentiful or nutritious since we had first been taken prisoners, but it was deteriorating in all ways with the passing of each day! Meat was, as I said previously, a rarity and usually cows were only sold by the locals if



they had performed all they could before dying naturally. But to return to the work and the digging! . . . we changed around so that everyone had a go at the digging and at the carrying. Un-written law dictated that you made the offer to take over the other man's job . . . you didn't wait to be asked. You FORESAW the need, and volunteered. The man digging excavated the next load while the other two were on the 'carry.' Bludgers were not tolerated. In these early days, the work was not all that unpleasant. Some groups worked harder than they needed and finished their allotted amount by shortly after lunch time and had the whole afternoon to rest in the shade, but this was not a good idea because the Japs soon decided to increase our load, since we were obviously not working to capacity. When everyone had finished, we marched back to camp. At that time, too, we had a day of rest every 10 days and our pay was 10 cents per day, this money being used to buy salt, sugar and smokes, or, if it was available, any fruit, all bought from the natives. Sickness was starting to make its mark on the size of the working parties and also the food ration was being cut because of this. Basically, we were members of a 'kumi' or group of 50 men. This Kumi had a Kumicho in charge. He was supposedly an officer. On the Burma side (our side) all officers were paid whether they worked or not. This created a problem in that most of them decided not to go out on the line when they could stay in camp. But the Japanese decreed that every group of 50 men had to have a Kumicho. If an officer was not available, an N.C.O. was used. i.e. either a sergeant or a corporal. Corporals and sergeants were counted in as working personnel and when the officers failed to act as Kumichos or Hanchos, we, the workers, had to do the extra work for the N.C.Os who were doing the officers' jobs! We were not amused. Some of the officers, admittedly, used their pay to buy food from the natives to supplement the rations to any members of their Units who were sick, and who, therefore, did not earn money to supplement their own rations. Many officers spent their own money on themselves. I have given more than a passing thought to what I would have done, had I been able to accept that stint at Officer's Training School and had been an 'officer and a gentleman' while we were prisoners. Would I have used my own

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pay on myself or would I have been unselfish enough to spend it on men in my Unit? I still do not know! Of course the decision could have been taken out of my hands. For those officers who worked on the Siam (Bangkok) side of the line, there was no choice. All men worked hard for the Emperor, officers and all and there was no question of any other alternative! The famous 'Bridge on the River Kwai' was built by officers . . . in fact, both the bridges there were built by them. The initial bridge, a temporary one, and nothing like the one in the film of that name, was only a stop-gap until the concrete and steel one was finished. Again, I have got ahead of myself!

January 1943

Something I had not mentioned before was that at about this stage, we were spending quite a large part of our rest day (our 'yasmae' day) sitting out in the sun picking the body lice and the bed bugs from our 'G'-strings, our 'bedding' and



our bamboo slats on the deck upon which we slept. We usually built a small fire with plenty of flame and passed the bamboo slats over that. The bugs, hopefully, fell off into the flames and gave no more trouble. We had worked all day on the line and returned to camp to find that we were moving out to a new camp. We gathered our small amount of gear, had the usual mandatory search, numerous counts, and marched off, headed for further up the line. We marched the 10 kms. in the dark to the new camp, Thetkaw, the 14 km. camp. We were out at work at dawn, so no time had been lost in the move. All the huts I was in were of the same construction. A framework of bamboo was put up, all tied together with 'Burma wire' (creeper) and then the sides and roof were covered with atap (overlapping palm-leaves) with the internal decking made of split bamboo, raised less than a metre off the ground. The floor was the natural jungle floor.

If we were lucky, sometimes there was a river close handy where-in we could bathe after the day's work. Thetkaw was one such camp. It was here that several of our group were standing beside the hut when one fellow noticed a hornet disappear into the bamboo. He apparently decided that a hornets nest so close was not desirable, so he picked up a stick and banged on the hollow bamboo. Apparently the nest was already established and well populated. The whole population came out and attacked the group. The unfortunate thing was that the fellow who had banged on the bamboo ran away in one direction, while all the others fled to the nearby river and dived in. Most of the swarm followed the one fellow and he received so many stings that he died because of the swelling around the face and throat, which in turn blocked off his breathing. Hornets, unlike bees, can inflict multiple stings without adversely affecting themselves. When our Doctors conducted a post mortem on the body, they counted over 200 stings on the upper torso and face. He had died of asphyxiation. Again, because the terrain was fairly level, the job was not that difficult. We dug out each side of the track to build a low embankment for the line to be built on.

Separate working parties followed us and laid the sleepers, the actual lines and did the ballasting. We only made the bed ready. It was while we were here at Thetkaw that I bit on my (usually) soft mid-day meal and, horror, I heard a 'CRACK.' I'd bitten on a piece of rock and broken the side out of a back tooth. Our nearest dentist was back the 14 kms. at base camp, Thanbyuzayat. I went on 'sick parade' and was sent back a couple of days later on the ration truck. The experience was of interest. I was one of quite a few for dental treatment. The patient in front of me had a back tooth which had to be pulled. But it was one of those stubborn ones and would not come out. The four 'legs' had wrapped themselves around the jaw. Also, to add some interest to the manoeuvre, there was no anaesthetic! As the next patient in line, I was asked to assist. I have never been a dentist's assistant before, and if that was any indication, I hope never to be one again! My job was to clasp my hands together by interlocking my fingers, then I stood behind the bamboo 'chair' with my hands on the

patient's forehead, forcing his head back so he couldn't escape! Then in 'cold blood', with a thing like a small cold-chisel and hammer, the dentist split the



tooth into 4 pieces and extracted each piece separately! I still get goose-bumps when I think of it.

And I repeat . . . no anaesthetic. Isn't it amazing what queer noises one makes when trying to yell with the mouth wide open!! My filling was a non-event after this. The dentist probed and dug, then filled the sloping surface with, I think he said, a mixture of plaster and shellac (as in French Polishing). He told me it would probably last until I got home, and it DID! And yet, he probably didn't think that would be about 2_ years! He did warn me to treat it as gently as I could, to help it.

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July 1 1943

I arrived at the notorious 55 km. camp. I have absolutely no knowledge of how I got there. It could have been by truck; it could have been by train; I do not know! I was in No. 5 hut for a while, but graduated to No. 8 hut where those about to have an amputation were kept. My new doctor was Major Alan F. Hobbs from Adelaide. Hut No. 8 was so full that there were no spare spaces within the hut itself, which was open all along one side. I was obviously sick and some kind fellow, who had built a bed for himself out of two rice bags told me if I had 2 rice bags, he and I could build a similar bed as a top bunk, right above his. I had one bag and he somehow procured another. The bed was built as a double-decker and I slept there for the rest of the time I was at the 55. This friendly fellow was Jack Ruddle, he was a married man from Melbourne, had a son, John and a daughter, Fay. In 1995, Fay and her husband, Stewart (Taylor) are still very good friends of Joyce's and mine. Jack and Muriel

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have been dead for quite a few years, Jack pre-deceasing Muriel by several years. Jack would rank amongst the best people I have ever known, and I don't have to think about it! Jack was a stevedore on the Melbourne docks before the war and was working for the Bentleigh Council at retirement. Soon after the war, Jack and the family moved into a new house in Landles St., McKinnon, just off Jasper Road, where we stayed many times, the first time being in 1956 when we had the Austin A70 Hereford. We had visited earlier, in 1948 when Dad's 1948 Austin 16 was new but then, we only called in. This time (1956) Jack had just bought a new T.V. (black and white, because T.V. was in its infancy). His reason was that he reckoned that he and the family would see more of the Melbourne Olympic Games with the T.V. than if they paid for all four to go to various events. **And now back to the story and the 55 km. Camp.** Lloyd Ridge was already here waiting to have his right leg amputated above the knee. Johnny Jacka was here with chronic dysentery and malaria. The 'modus operandi' here was that Major Hobbs and his team came along each morning and evening. All tropical ulcers were curetted twice a day and dressed. The curetting process was most traumatic. Major Hobbs's team held you down and the curetting started. This was done with an ordinary Army table knife which had been heated and dished like a spoon,



then the edges on the bowl sharpened. There were no anaesthetics available so it was all done in cold blood. The idea was to make the ulcer bleed. Then a cloth pad from the only available source, men's clothing, was applied over the raw wound. This pad was liberally coated with raw salt, and after it had been applied, it was damped down with boiled water. The 'gouging' of the ulcers started at one end of the hut in the morning and at the other end in the evening. Meade Henry, who was sleeping on the deck not far from where I was, had a similar ulcer in about the same place on his left leg. Meade and I were done twice a day for over 3 months. Major Hobbs was a well-known North Terrace surgeon after the war, and an active Prisoners of War Association member for many years where he was our elected Patron. He would have died during the early 1990's, aged in his 80's. But to return to the story! Several different methods of removing the puss and treating the ulcers were tried, but none of the others were successful. One of the methods tried was to allow the ulcer to be fly-blown and let the maggots keep the crater cleaned out. In theory, this was good but the patients were unable to stand the constant feeling of movement in the already sensitive area, so the experiment was discontinued. Another treatment was using a stirrup pump, the type used for spraying fruit trees in an orchard, wherein a luke warm solution of potassium per-manganate (condys crystals) was pumped under pressure into the ulcer crater to clean it out. I was one upon whom this was tried and the pain was unbelievable. It, also, was discontinued and the gouging remained the only treatment. Some men had their favourite stick upon which to bite. I clasped my left leg just above the knee while I was held down. Later, I noticed that I had five bruises about the size of a 20 cent piece on my leg. They were the exact spots where I was holding my leg, apparently so tightly that bruising was occurring. Some men screamed, just as a way of letting off steam. Anything was allowable! Infected toes and ham-strings were cut away with a pair of scissors without either warning or anaesthetic. Meade Henry's ulcer had deteriorated faster than mine and he had already had the ham-string cut away. Meade was a timber-truck driver in civilian life and he'd lived at Coff's Harbour, hauling timber up in the Dorrigo district. He had the left leg amputated, survived the P.O.W years, returned to Australia and worked in the N.S.W. artificial limb factory in Sydney. He lived at North Ryde when, at Xmas 1950 we called to see him in our 1948 Austin A40, while staying with Howard and Mavis, and again in January 1953, in company with Jeff and Heather Read, travelling in our Austin A70 'Hereford', we called there again to see the family. He died soon after this. He had two daughters, both born after the War. I was now confined to walking with the aid of bamboo crutches, and it was at about this time that I received a message from Lloyd Ridge in Hut No.1.

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It was a request that I come up in the morning to the operating theatre and help hold him down while he had his right leg amputated above the knee. One didn't refuse such a request! The operating theatre was only a small lean-to structure of bamboo and atap attached to the end of Hut No. 1, the hut where all the amputees were housed, and the operating table was made of bamboo, also. So next morning, after my ulcer was curretted, I went up to see Lloyd on my crutches. The following may have a few spelling errors, but it is as close as I can go. As a result



of the ulcers, men were unable to walk. The circulation in legs, where most of the ulcers occurred, was virtually zero, gangrene set in. The victims were going to die anyhow, so Colonel Coates decided on drastic measures. He was a noted surgeon from Melbourne, who had been carried into the 55 on a stretcher, in a bad way with dysentery. In collaboration with a Dutch Captain, a Captain von Boxor (?) from Java, who was a pharmaceutical chemist in civilian life and had joined the Dutch resistance to combat the Japanese, they had extracted novocain (?) from something by distillation, all this on improvised equipment. This novocain (?) was then to be used as a spinal injection. The first patient upon whom it was tried died . . . Post mortem tests suggested it had paralysed his heart, but he would have died from gangrene, anyhow. The theory was that the effects of the injection had worked upwards from the point of injection in the lower spine, to the heart, so the next patient to have the injection was given his spinal then immediately strapped to a bamboo stretcher which was placed head down against the wall. Fifteen minutes later, he was paralysed from the waist downwards (or upwards, depending on which way you look at it) and was ready for the amputation. By the time Lloyd came up for surgery, the injection was fairly well tried and tested. The 'modus operandi' was as follows—Lloyd was given his spinal injection. This was administered while he sat on the 'operating table' of split bamboo slats, his knees drawn up under his chin and his arms embracing his legs, after which he was strapped to the bamboo stretcher and placed leaning against the wall, almost perpendicular, with his feet uppermost and his head down. A 'runner' went to the kitchen to borrow the only saw in camp, an old tenon saw ('back' saw) with several teeth missing, a saw normally used for cutting any bones and meat from cows, which happened to find their way into the kitchen for inclusion in the stew, usually a forlorn hope. The saw and all other equipment was sterilised in readiness, by which time the spinal injection had worked. Lloyd was now taken down from the feet-up position, placed on the operating table and four of us were directed to hold an arm each, his 'good' leg and his head. I had his head and it was my job to keep his Burma cheroot (cigar) alight, because, under the circumstances, the patient tended to forget to draw at times and the cigar went out. All the necessary blood vessels were tied off with animal gut which was taken from any animal that had been slaughtered recently for kitchen use. Apparently, this gut rots away and, in the meantime, the blood vessels lay down a deposit which closes off the end of the blood vessel. Our diet was apparently quite deficient in natural nutrients, with the result that the animal gut rotted away before the body's natural efforts had closed off the blood vessels. Lloyd had 4 separate haemorrhages during the next few days, and each time he had to be tied off higher up in the groin. After the fourth haemorrhage, he was told that that was it; the very next one would be fatal because they could not tie him off any higher. He had no further haemorrhages! Lloyd's amputation above the knee took just 5 minutes. He currently lives in Canberra (Xmas 1997) with his wife, Ruth, and has celebrated his 78th birthday last September 11th. Colonel Coates died a few years ago in Melbourne. His life story is available in book form.

October 10 1943

Today is my 23rd birthday. Major Hobbs and his entourage curretted my ulcer before breakfast, I ate my 'pap' like a good boy and then set about beheading my



200 odd pussy sores, after which I rubbed ointment into them. This ointment was made by using

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citronella cream (mosquito cream) as the base and then adding crushed rock sulphur. My dysentery probably dictated that I made several (probably 12 - 15) hasty visits to the open-trench latrines, I probably ground some charcoal, to be taken with boiled water for my dysentery. By then, it was time for the rice and stew (?) for lunch. Never a dull moment! I noted with some interest that Johnny Jacka had not been around! I supposed that he was having another severe malaria attack . . . I'd go around to Hut 5 and see him later, if possible! Soon after lunch, he arrived. Because it was my birthday, he had baked me a cake! He had kneaded some of his breakfast 'pap' into a thin pastry with which he had lined an old tin (about the size of a salmon tin). He had then waited until lunch-time, so he could strain the bean-dahl out of his 'stew'. He had used this to put in the middle of the 'cake,' after which he had put a top on it, made from more 'pap' and then rolled 'pap' into strings, with which he had spelled 'KEN' on the top. The tin and all was then put into the coals of a fire and baked. The result was a birthday cake, probably the most memorable I will ever receive. What is more, Johnny could ill afford to part with so much of his food, even if he did eat half of the 'cake.' Before leaving this part concerning Johnny Jacka, it was shortly after this that Johnny contracted pneumonia, which, without any help, resulted in pleurosy. The fluid had to be taken off, and, without anaesthetic, Johnny sat on the operating table, knees up and clasped tightly by his arms while the Doctor probed in through his back with a hypodermic syringe and withdrew the fluid.
