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Prosecution Division

Dutch Division

2 December 1946

The attached is a copy of letter, dated 4 August 1944, from the Prisoner of War Medical Staff, Japanese POW Camp FUKUOKA No 2, addressed to the Camp Commander, Japanese POW Camp FUKUOKA No 2.

Request your Division contact Mannis WAISFISZ, Officier van Gezondheid, 1^e Klasse, in an effort to obtain the following information:

1. To identify this letter (as the original letter is not in my possession and the copy does not bear any signatures).
2. To answer the following questions:
 - a. Did this letter reach the Camp Commander, Captain NOZAKE?
 - b. Did this letter reach the Camp Doctor, Lt. MATSUMURA?
 - c. To whom was this letter handed?
 - d. Were there any improvements introduced after this letter was forwarded?
3. To make a statement about the medical conditions in FUKUOKA Camp No 2 and the nearby dockyards.

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Capt, RNIA

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The Camp-Commander
Japanese Prisoner of War Camp
Fukuoka No.2.

4th. August 1944.

Sir,

Your attention is drawn to some particular items and recommendations that concern the health of the prisoners in Japan. Most of the items have already been discussed with the Japanese Medical Officer, Your kind cooperation and intervention are earnestly requested.

It is quite clear that the Japanese Medical Officer is most anxious to have a good health record of the prisoners in the Camp on paper, and to send as many prisoners as possible out to work in the dockyard each day. It is also quite clear, from facts quoted under items 1 and 2 below, that he has come to the erroneous conclusion that the best way to achieve this is to ignore the true state of fitness of the prisoners and drive as many as possible out to work each day. The prisoner of war Medical staff strongly protest that his policy is not medically sound and it may well be that even the paper record will improve when the prisoners are treated properly.

Some of the Junior Dockyard Authorities obviously pay more attention to the number of prisoners at work in the dockyard and the number of hours they stay there than the total amount of work done by the prisoners. The P.O.W. Medical Staff is confident that if the highest Dockyard Authorities are consulted they will be found to be more interested in production (total output of work) than in deceptive figures - more interested in true efficiency than records on paper.

The P.O.W. Medical Staff strongly protest that the present treatment of sick and injured prisoners is unfair, prejudicial to the good name of Japan, and inefficient. Similarly they protest that the length of time between the yasumi's (free days) in the camp and the practice of working men more than nine hours a day causes ill health and inefficiency among the prisoners.

The Colonel of the Japanese Army from Fukuoka, who has inspected the camp from time to time has repeatedly instructed the Prisoner of War Medical Staff to maintain the health of the prisoners.

The recommendations following the various items show how these instructions may best be carried out.

Item 1. The treatment of prisoners with fever.

According to the instructions of the Japanese M.O. prisoners with an evening axillary temperature of 38° C. or over are sent to work in the dockyard next morning if their morning temperature is less than 37° C. The highest temperature of the healthy man at rest is 37° when taken in the mouth and his axillary temperature is 0.3-0.4° C. less. There is a temperature variation of about 0.4° C. between the evening- and the morning-temperature in health, the lower temperature occurring in the morning. This variation may be greatly accentuated in disease and a low morning temperature cannot be accepted as a fair test of a man's sickness or health. The following examples show how the present regulations operate:

Example A. No.135. Temperature in the dockyard 18/7 was 40' C. and in the evening 39' C. On the morning of 19/7 his temperature was 36.5' C and the man went out to work unfit. At the dockyard on 20/7 his temperature was 40.2' C. and the man was severely ill with malaria. It is known that early rest and treatment in attacks make the attacks less severe and of shorter duration and help to reduce the number of attacks. The present regulations had prevented this early rest and treatment.

Example B. No. X 212. On the evening of 18/7 he had a temperature of 38' C. and was treated by rest in bed and aspirine until 25/7. He went to work on 26/7 without fever but feeling unwell. His temperature in the evening was 37.6' C. and the evenings of the 27th and the 28th 37.5' C. but under the present regulations no treatment of any kind could be given to complete his case. On the 29th of July after running from the Dockyard at noon he collapsed with a temperature of 41.2' C. which had only dropped to 40' C in the evening and on the morning of the 30th his temperature was still 39.6' C. and the man very ill. He is still in the Nyūshitsu on 4/8. Early rest and treatment would have prevented this.

Example C. No. 196. Had fever in the evenings of 23/7- 38.6' C., 24/7- 38.6' C. and 28/7 - 38' C. Under present regulations he was allowed no treatment by rest and the aspirine he was given failed to keep his temperature down to normal although the action of this drug is to lower the body temperature. Finally he was ill all day on 1/8 (Yasumi) and had an afternoon temperature of 38.8' C. which remained high next morning so that he was allowed to be sick in bed one day (2/8).

Example D. On 28/7 the following men had an evening temperature No. 64- 38' No. 72- 38.4' No. 83- 38.8' No. 196- 38.3' No. 276- 38' No. 850- 38.3' but were sent to work next morning (29/7) because their axillary temperature was below 37' C. (Top normal temperature). Every morning five to ten of these fever patients are sent to work in the dockyard where they usually develop a temperature during the day.

RECOMMENDATION No 1.

that prisoners developing a temperature of 38' C. or over are allowed treatment by rest in bed for at least one day irrespective of what their temperature is in the morning.

Item 2. Treatment of unfit prisoners in the dockyard.

The Japanese M.O. has instructed the Japanese Navy Guard in the dockyard that every prisoner that leaves the camp each morning is fit to work for the whole day.

These instructions were issued without the knowledge of the P.O.W. Medical Staff so that there was no opportunity to point out to the Japanese M.O. that his statement, that all the prisoners who leave camp each morning are fit, is wrong.

As a result of these instructions the Navy Non-commissioned officers have issued orders that no prisoner may rest at all, or be sent back to the camp, under any circumstances even in the case of broken bones or other injuries and that all the prisoners must work the whole day. (Statement by Mr. Ida, Chief Dock-yard interpreter).

The cases quoted under Item 1 illustrate how prisoners with fever are being sent to the dockyard and the following examples show how unfit prisoners are declared fit to work.

Example E. No. 1023. This man has suffered from a severe contusion and possible fracture of the back in a dockyard accident and is still unfit. On 25/7 the Japanese M.O. declared him fit to go to the dockyard without even examining him. In the investigation of this case examination by X ray was refused, so that the diagnosis could not be

fully established.

Example F. No. 1123. who has not recovered from a fracture of the fourth metatarsal bone in his right foot was declared fit on the 26/7.

It is obvious, that, in such cases as these and those quoted under item 1, some prisoners are unfit when they leave camp in the mornings, and the statement that all men who leave the camp each day are fit shows either a lack of good medical judgment or a deliberate and disgraceful distortion of the truth.

There are a few new cases of diarrhoea and abdominal cramps nearly every day. Some of these cases respond to treatment by medicine and improve while others remain chronic recurrent cases which are not allowed to rest, so that their continued work lowers their resistance to other diseases and prolongs their illness. The following examples show how prisoners who developed severe enteritis are treated under the present regulations.

Example G. No. 124. Developed a severe attack of diarrhoea on the morning of 28/7. He reported to the Doctor at the Dockyard Dressing Station (D.D.S.) where there were no supplies for the treatment of diarrhoea. He was taken to the Navy guard and rest advised but this was refused because of the order of the Japanese M.O. from the camp. The man was working under the direct supervision of the Navy Guard and was so obviously ill that the guard allowed him to sit down all day at his working place. On the 29/7 the prisoner was kept in the camp-working party but collapsed in the evening. Treatment by medicine and rest in bed from the morning of the 28/7 would have made his attack shorter and less severe.

Example H. Nos. 221 and 1071/ Both these men have been sick for months with chronic diarrhoea and from time to time they develop severe acute attacks. On 29/7 they were both acutely ill and attended the D.D.S. where there was no medicine for them. The doctor in charge was able to prove to the Navy guard that these prisoners were too sick to work properly and they were sent back to camp after the Navy Guard had telephoned to the camp for instructions. On arrival in the camp the men were put to work in the hot sun. Following this treatment No. 221 collapsed in the dockyard on 31/7 and again while marching to the dockyard 2/8. This treatment is not consistent with ordinary medical practice and is to be severely condemned.

It is obvious, from the examples quoted, that some prisoners are unfit when they go out to work and that others fall sick while at work. It is also obvious that no one can decide that men injured at work (broken bones, deep wounds, head and eye injuries etc.) are fit to work for the rest of the day.

RECOMMENDATION II.

That the present instructions from the camp to the Navy Guard in the dockyard are countermanded and the following instructions issued:-

1. That all new eye and accident cases are to be allowed to attend the D.D.S. immediately without notifying any authority (but notifying a fellow-worker if possible).
2. That all cases of illness are to be allowed to attend the D.D.S. after notifying their Japanese Hancho and the Navy Guard. That they are to receive treatment or rest or be sent back to the camp as the doctor in charge of the D.D.S. advises.
3. That prisoners presenting a signed and dated request from a P.O.W. Medical Officer may attend the D.D.S. for wounds, abscesses etc., after notifying the Japanese Hancho and the Navy Guard.

At present all large secondary dressings and all minor treatment have to be applied during a period of 1½ hours in the evenings (in the Camp). It is impossible to do all this work efficiently in the time.)

Item 3. The Distribution of Red Cross, Japanese Army and Dockyard Medical Supplies.

Red Cross medical supplies have been in the camp for several months but the P.O.W. Medical Staff have been prevented from making the best use of these medicines by the Japanese M.O. At first no supplies were released at all, with the result that several prisoners suffering from mild deficiency diseases were allowed to become much more seriously ill. After a protest had been made to you, Sir, these supplies were released to some of the patients but refused to others equally sick for no medical reason and without examination by the Japanese M.O. While refusing the use of Red Cross supplies the Japanese M.O. gave some of the prisoners expensive injections from the Japanese Army supplies which were not necessary, having regard to the condition of the patients and the fact that less expensive and more effective medicine were available.

Prompt release of the Red Cross medical supplies when they first came to camp would have prevented much ill health which affects the working efficiency of prisoners going to the dockyard. Furthermore the P.O.W. Medical Staff consider that they have the right to expect Red Cross supplies to be released promptly on request.

Japanese Army medical supplies are insufficient both the discrepancy between the amounts issued and the amounts needed would be greatly reduced if their recommendations (prompt treatment both in camp and dockyard and sufficient rest to allow patients to recover rapidly and fully) are adopted. Under the present regulations both material and time are insufficient for proper treatment of wounds and sickness.

Example I. On 1/8 the Japanese M.O. was asked for some medicine (Ephedrine powder or Adrenalin injection) with which to treat No. 1006 who had had a severe attack of asthma for 56 hours. Medicine was refused, without examination of the patient, on the grounds that this officer is not a dockyard worker and that the medicine might be needed in the winter.

Dockyard-Authorities are responsible for the medical supplies issued to the D.D.S., but these supplies have to be delivered through the Camp Japanese sick-bay and there is often a delay of ten days or more before supplies delivered from the dockyard-hospital are allowed to go to the D.D.S. and on many occasions the amounts of supplies released have been less than the amounts collected from the dockyard hospital with the result that fresh accidents and secondary dressings cases have not been able to be treated properly at the D.D.S.

RECOMMENDATION III

(1) That Red Cross medicines are issued promptly to the patient himself (who should sign for his supply) upon presentation of a signed request from a prisoner of War Medical Officer.

(2) That adequate amounts of medical supplies are released regularly (and if possible the Prisoner of War Medical Staff may be informed of the amounts to be released before-hand) so that the consumption of the supplies may be as smooth as possible.

(3) That a small supply of emergency medicines (such as ephedrine, adrenalin, morphia, atropine, digitalin etc.) shall be kept in the Byoinshitsu and promptly renewed when a signed, statement as to how the supplies have been used is presented.

(4) That all the materials supplied by the Dock-Yard Authorities from the Dockyard-hospital for use in the D.D.S. be issued promptly.

(5) That the Japanese M.O. should concern himself more with the provision and smooth issue of adequate medical supplies and the records concerning their consumption rather than with attempting to produce a falsely satisfactory health report for the camp by medically unjustifiable manoeuvres such as those mentioned under items 1 en 2.

Item 4. Rest, as treatment and to prevent sickness and maintain the health of the prisoners.

The examples A. and B., item 1 pag.1, show how depriving sick men of adequate treatment by rest increases the severity and length of their illnesses. Referring again to example C., item 1 pag.1, No.196 was sick and certainly an inefficient worker in the dockyard, a danger to himself and others, for nine days although by rest in bed for one day at the beginning of his illness he could probably have been returned a fit and efficient worker on 25/7.

Some of the prisoners suffering from enterites in the camp working-party are, by ordinary medical standards, too sick to work, while many others have their illnesses prolonged, and in cases of injury their wounds delayed from healing by lack of rest.

It is true that in other cases sick prisoners are benefitted by the partial rest that inclusion in the camp working party affords them.

Among the so-called healthy prisoners in the camp there is a great deal of chronic over-tiredness which makes them inefficient workers. This is partly due to the huge numbers of bed-bugs in some of the rooms. The present method of dealing with these by the use of steam is probably as effective as any method short of burning the buildings and the prisoners are very grateful for your help in obtaining these facilities, but the work of destroying the bed-bugs is often slowed down by the unnecessary cutting off of the steam by order of the Galley-hancho.

The health and efficiency of the prisoners is upset by the excessive number of working days. In Europe and America employers of labour who are only interested in efficiency and production, maintain that more work is done when men are kept well rested and healthy than when they are overworked and ill. The 48-hour week (working for 8 hours a day for six days and resting on the seventh day) has been used successfully even in worst times of wartime crisis.

RECOMMENDATION IV

(1) That prisoners are given treatment by rest or light camp-work promptly on the advice of the P.O.W. Medical staff.

(2) That prisoners are not made to work more than nine hours a day and for not more than six out of seven, the seventh being a yasumi-day in camp.

(3) That steam for de-bugging be made available for as long as possible each day.

Item 5. Prevention of accidents in the dockyard.

Many prisoners have suffered from entirely preventable injuries in the dockyard, No.1183 was killed and No.1302 was seriously injured while working without any safety devices on a very dangerous thin and weak asbestos roof.

Many prisoners receive eye-injuries while caulking or grinding without protective goggles and two prisoners have each lost the sight of one eye. The working time lost from preventable eye-injuries alone, if spent in helping the recovery of other sick and injured prisoners would have immensely improved the record of the health of the prisoners of war in the camp. Many attempts have been made to arrange for the Dockyard-authorities to provide protective goggles for prisoners employed at caulking and grinding but only five pairs (fitted with ordinary window-glass) have been provided.

The cost of goggles for all these workers would be negligible compared with the cost of the tools they use. Attempts to arrange for goggles to be put on sale in the camp-canteen have also failed.

RECOMMENDATION V.

(1) That the Dockyard -Authorities are requested by the Camp^a Authorities to provide adequate safety devices for prisoners working in especially dangerous places, such as on the roof mentioned.

(2) That the dockyard Authorities are requested by the Camp Authorities to provide adequate protective goggles for prisoners working at caulking or grinding, or that goggles are put on sale in the camp-canteen (about a hundred pairs are required). This point has already been discussed with the camp-interpreter.

Item 6. Diet of Prisoners and Preparation of their food.

There are many individual cases of severe loss of weight among the prisoners although the average for the whole camp shows a loss of less than 2 kilograms since last winter. This is partly due to the way the rations of raw foodstuff are prepared and partly to the character of the food provided. The amount of "daikon" supplied is so great that the prisoners cannot digest it and many sick with diarrhoea and gastric symptoms because this vegetable, which is of very poor food value, is so coarse. Sometimes whalemeat has been issued in such a state of decomposition that prisoners have been sick after eating it. When it is fresh it is very palatable and very much appreciated.

During the hot weather when the prisoners lose so much salt by perspiring while at work, more salt is needed in the diet than is provided at present.

RECOMMENDATION VI

(1) That the P.O.W. staff in the galley should take full responsibility for the preparation of the food from the raw foodstuffs supplied from the stores.

(2) That the supply of "daikon" should be replaced by supply of a more valuable vegetable.

(3) That a greater amount of salt should be provided during the hot weather.

Item 7. Washing facilities in the camp.

The prisoners are very grateful for the excellent hot bath provided for them. When the washing facilities in the camp are poor there is a marked increase in the number and severity of the cases of skin-diseases among the prisoners. Salt water is very much inferior to fresh water for cleaning the body or clothes.

RECOMMENDATION VII

That facilities for washing the body and clothes in fresh water are made available as often as possible.

CONCLUSION.

It is obvious from the facts quoted under 1 to 3 that the POW Medical Staff no longer have any confidence in the medical judgment or supervision of the Japanese Medical Officer and they respectfully request that the Japanese M.O. be instructed to concern himself only with medical supplies and records, and leave the regulation and treatment of the sick and injured prisoners entirely in the hands of the POW medical staff as is done in some other Japanese POW camps.

The POW Medical staff is confident that if all these recommendations are adopted there will be a great increase in the general health and efficiency of the prisoners of War in the camp.

Prisoner of War Medical Staff

Respectfully submitted.

Japanese P.O.W. Camp Fukuoka No.2.