MOORFIELDS EYE HOSPITAL IN THE "BLITZ"*

BY

ARTHUR J. M. TARRANT

SECRETARY, ROYAL LONDON OPHTHALMIC
HOSPITAL (MOORFIELDS)

THE year 1938 found Moorfields Eye Hospital in a very happy position. A comprehensive extension scheme had been carried to completion; the old building had been "overhauled" at all points; the postgraduate medical school was flourishing and the hospital was free from debt. Both lay and medical staffs could justifiably look forward to a decade of very useful work.

In the autumn of the year, European events cast their shadow over this pleasant state of affairs and the seriousness of the situation was brought home to us by our receiving instructions as to the part the hospital was to play in the event of hostilities. The coming of war did not, therefore, find us entirely unprepared and in accordance with prior arrangements eighty-two beds were immediately reserved for the reception of air-raid and Service casualties. In the unavoidable reorganisation of the medical service, the problem of the civilian sick presented several difficulties, the chief of which was the danger of a rapidly growing "waiting list."

When the first shock had passed, we had to consider how best "Moorfields" could play its part in the new order of things. It is never easy to make decisions when facing a situation containing several unknown factors. As far as our own problem went, two facts cleared themselves from the background of "ifs and buts." The first was that we could not make much headway with our greatly reduced bed complement, and the second was that the hospital was in a vulnerable area. Both these facts pointed to the advisability of finding a temporary hospital outside London to supplement the work that could be done at "Moorfields." We were fortunate in being able to take over a small institution at Edgware and as early as October, 1939, we had converted it into a fifty-bed ophthalmic hospital, complete with an operating theatre. This country branch was able to deal adequately with cataracts, detached retinas, glaucomas and squints, leaving the eighty "eye" beds that we were able to keep at the main building to deal with accident and emergency cases. The out-patient attendances temporarily dropped during the uncertain days immediately following the out-

* Reprinted by permission of the Editor from *The Medical Press and Circular*, January 27, 1943. We are also much indebted to the Editor for the loan of the blocks for illustration.

break of war, but in the absence of air-raids, the numbers steadily increased. In those early days of the war we were thus able to carry on a hospital service which, although inevitably to some extent a compromise, was nevertheless very satisfactory. Some sense of security was given by the providing in the basement of a specially constructed air-raid shelter with an air-conditioning apparatus and auxiliary lighting plant.

FIG. 1.

... And so to Bed.

On a sunny Saturday afternoon in September, 1940, the Luftwaffe succeeded in firing the dockside district of London. In the evening the red fires of destruction could be seen from the roof of "Moorfields" as a terrifying spectacle. During the night the bombs came closer and nearby buildings were hit. Within three nights, two neighbouring hospitals received direct hits. It became necessary to reduce the number of "eye" beds at "Moorfields" for it was evident that only that number of in-patients could be

admitted, which, together with the required nursing staff, could be housed each night in the air-raid shelter, and so, in the winter of 1940-41, we settled down to a routine underground night life. Perhaps the best impression of that period can be got from the following account written at the time:—

“In this winter of 1940, the good people who work in the City of London go hurrying homewards before the twilight fades into night. For a while, a silence such as the city has not known for a century, settles on its ancient thoroughfares. It is a sinister silence into which at any moment may come the wailing of a siren, the droning of aeroplanes, the barking of guns and the destructive crump of bombs.

FIG. 2.

Good Night!

"At 'Moorfields,' where the work still goes on, we now have a definite 'night life.' Patients, house-surgeons, nursing staff, cooks, engineers, maids, porters, all sleep in shelters in the basement of the hospital and each evening, as a matter of routine, there is a steady, well-ordered trek to the 'dug-outs.' Come and watch

FIG 3.

Matron has a last look round.

for a while! Nurses and porters are bringing patients from the wards. A little group has gathered, waiting for the lift. The woman in the wheeled chair is a case of acute glaucoma. Her eye condition has been precipitated by excitement due to air-raids. The man on the trolley was brought in as a casualty. He was operated upon this morning. A stream of 'walking cases' passes us, guided by a nurse. They are mostly the more serious type of treatment case. As you watch, one thing is certain. You cease to

be an onlooker : you simply must lend a hand. You find yourself taking the arm of an old fellow and saying : ' Come along, granddad.' You find yourself going back to help with a trolley or maybe to take the hand of a wee laddie who somehow manages to smile at you under his bandages. In the basement corridor, you catch up with the main body, in time to witness something in the nature

FIG. 4.

Treatment in the Air Raid Shelter.

of a minor miracle. For one moment you see a medley of trolleys, wheeled chairs, walking patients, nurses, porters, and maids carrying bundles of bedding. Then suddenly, as though someone had waved a magic wand, the corridor is clear, the patients are in their shelters, and the little table with its drugs and dressings is in its place. Over all is an air of calmness. We have gone to earth for the night ! At six o'clock supper is served. In such unusual circumstances it could hardly fail to be a jolly meal, for it is typical

of these patients that they are ever ready to cover their personal anxieties with a veil of light-heartedness. When the meal has been cleared away, one or two dressings have to be done, and the patients are made comfortable for the night. Matron has a last look round and has a word for those who have not yet gone to sleep. In other 'dug-outs' those who are off duty amuse themselves in a variety of ways, but one by one go off to bed, and save for those whose duty it is to watch, this oddly-assorted little community settles down for the night."

So the work at "Moorfields" went on, the nightly air-raid warning sounding as a matter of course. From time to time we received air-raid casualties with eye injuries. It may be of passing interest to note how such injuries differed from those seen in ordinary civilian practice. The Senior Resident Officer of the hospital summarised the differences thus: "First, there was a large number of cases of gross traumatic conjunctivitis and keratitis that are unusual in civilian practice. Secondly, there were many instances of injuries due to glass splinters. It is interesting to note that a piece of glass in the eye could remain in it without causing any irritation and is better left alone if the eye is not inflamed. Thirdly, intra-ocular foreign bodies in these war-time casualties were very often non-magnetic. The patients were generally so extremely shocked that it was unwise to proceed to operation as quickly as one usually does in ordinary civilian work."

A very great demand was made on the hospital on the night of December 29, 1940, the night of the great fire of London. No less than 128 firemen were seen as casualties and all but four of them had corneal or conjunctival foreign bodies. One interesting thing about these cases was the intense degree of blepharospasm. This was due to a staining of the cornea following, no doubt, irritation by smoke. A temporary casualty department was set up in the comparative safety of the air-raid shelter, but as the number of injured firemen increased, it became impossible to cope with them under temporary conditions. The work, therefore, had to be continued in the hospital's usual casualty department, a ground floor room surrounded by glass. Although following the fire raid high explosives were being dropped, surgeons and nurses worked continuously through the night. All these firemen were cured within a few hours, none of them had to be admitted as an in-patient, and only one required attention for more than four days.

On January 11, 1941, "Moorfields" was badly damaged by blast. It is an astonishing sight to see blast damage on a large scale. That which has stood in its customary place for years is shattered in the twinkling of an eye. Rooms and corridors throughout the hospital were strewn with splintered wood and glass. The patients were below in the air-raid shelter. All of them

were serious cases. In such circumstances it need hardly be stressed that the demeanour of the nurse reacts immediately upon her patients. Whilst the raid was in progress, we saw a nurse,

FIG. 5.

The morning after a raid.

half-sitting on the mattress of an elderly woman, with her arm reassuringly round the patient's shoulder. (If this were "un-professional" we are sure that Matron forgave her). Together

they were looking at a book. If we remember rightly, it was called "The Year's Photography" and was a collection of pictures. Each one was being quite seriously discussed. With such an example, it is needless to add that everybody seemed perfectly calm in that section of the shelter. When the day broke, the staff of the operating theatre made their way over the debris to the theatre and found it apparently in a hopeless state. They worked all through the day until a minor miracle had been achieved and order restored out of chaos. Finally, men were found to put temporary coverings over the window spaces and by the evening the theatre was ready for use again and an operation was actually done. "First-aid" repairs were started immediately. After ensuring that the work of "Moorfields" could still go on, we put back the front door and drew up a rough priority list for temporary repairs which were all eventually carried out. The night of April 15, 1941, was a night of fires in the neighbourhood of the hospital. Several adjacent buildings were burnt out and at one time it seemed impossible for "Moorfields" to escape the tongues of fire. The incendiary bombs which fell on the building were extinguished by the engineering staff and by the fire watchers on duty. On May 10, the hospital was again damaged by blast and repair work started all over again!

In any account of these days at "Moorfields" a word of praise must be given to the kitchen and domestic staffs. They are so easily forgotten and yet the part they play is no small one. On a number of occasions there was neither electricity nor gas, yet these unsung heroines never failed to produce a meal of some sort at the right time. For one spell it meant the improvisation of a coke fire in the courtyard of the hospital.

Perhaps the writer, who is a layman, may also be allowed to pay tribute to the resident medical staff and to the nursing staff of the hospital for their conduct during this trying period. It is readily admitted that the stories told here lack the lustre of the exceptional heroic deeds of which we hear from time to time. They do, however, emphasise the sense of service which animates the nursing profession. This high conception of their calling which in peacetime finds expression in a nurse's cheerful devotion to duty, explains why in war-time she will unhesitatingly shield her patients, if need be with her own body.