

# History Lessons Learned

*Keith Horsley, Guest Editor*

The theme of this edition of JMVH is historical; the *raison d'être* for such an edition is the belief that there are lessons for today from the experiences of yesterday.

This view has not been universally accepted throughout history. The American car-maker and entrepreneur Henry Ford was one who did not see the study of history as useful, famously noting that "history is all bunk".

This journal is one that would disagree, and disagree strenuously, from Ford's view. The study of the history of military and veterans' health reveals that there are common themes that occur again and again, and that we ignore them at our peril.

A few examples can provide substance to this argument.

Any survey of military history reveals that infectious disease is a vital element to any military campaign. From the defeat of Napoleon's Grande Armée in Russia in 1812 (defeated more by typhus than by Alexander or the Russian Winter), the loss of life meticulously documented by Florence Nightingale in the Crimean War (where she showed that poor hygiene killed many more than Russian bullets did) and the horrendous toll that malaria took in the Japanese Imperial Army of World War Two, there are many examples of infectious disease being a vital factor in military conflicts. We learn this truth from history.

Similarly, we know from history that there are many examples of the malicious environment of war giving

rise to post-conflict syndromes. These range from *da Costa's syndrome* after the American Civil War, the *Shell Shock* of World War One, *Combat Fatigue* of World War Two and *PTSD* following the Vietnam War. Other examples abound; they are not countless, but their number is very large. A study of history also shows a predilection to assigning physical causes to these syndromes. A concern here is that our current interest in *Minimal Brain Injury* might not be, at least in part, a further re-iteration of this recurring pattern from history. As with infectious disease, we gain wisdom from our study of history in this area.

Since the introduction of gunpowder into war some half a millennium ago, war has become a noisy place. Since that time, we have noted that military personnel and veterans share a loss of hearing. Indeed, the characteristic pattern of audiometric loss following noise exposure is now known as "the gunner's notch". Napoleon himself, a former artillery man before he was an Emperor, complained that the church bells no longer sounded the same – he could not hear the high notes. Our study of history shows us that sensori-neural hearing loss is a near-universal feature of being in combat.

We have also seen again and again from history that the provision of surgical care for the wounded as soon as is possible after injury greatly reduces mortality and morbidity. Again and again history shows us that forward care, rapid evacuation of the wounded and the provision of effective first-aid is vital in the treatment of the war injured.

"History is all bunk" said Ford. "Ford is all bunk" says History.

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