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DISEASES OF MEN AND HORSES

EXPERIENCED BY THE TROOPS IN RUSSIA

[-1-] The following accounts are to be interpreted as the commanding officer's viewpoint; from a medical standpoint they are of no value.

I. Men

Russia has an exceedingly healthful and vigorous climate.

Cases of influenza and the common diseases of the respiratory system, which in France for instance afflicted several hundred soldiers of a division during spring and fall, were infrequent in Russia.

Strangely enough, rheumatic diseases, or the aggravation of existing cases, were rare, even in the wooded and swampy areas. On the contrary, I heard from various people who had suffered from rheumatism or sciatica; that in Russia they recovered completely from these ailments. This also held true in my own case.

The people of Russia and of the East in general are greatly plagued by vermin. Bedbugs, which can be found not so much on the human ⁱⁿ body as/houses, are unpleasant, but as carriers of diseases they are harmless. The flea which was present in large numbers during World War I seems to be dying out. It was encountered very rarely. But the louse is dangerous. It nests on the human body, in personal effects, and also in dwellings. It is not important for this study to discuss the two types of lice, since the layman could hardly differentiate between them. What matters is that every louse is dangerous.

[-1-]

The louse is the carrier of typhus, the most dangerous disease of the East. But even that disease must not be overrated. Isolated cases can appear at any time of the year, but it is most frequent in the spring, when the snows begin to melt. Persons over 50 years of age hardly ever survive it, but the death rate among the young is also high. At that time vaccine could be produced only by a very complicated and expensive process. Since November 1941 only nurses and attendants in typhus hospitals, doctors, people in important positions, and those over 50 years of age could be vaccinated; later on the age group was lowered to 45 years. Thus, only a small group was protected.

[-2-]

The troops used a delousing powder; it was sprinkled on body and underwear. But the results were not too promising.

The best method of prevention would be to avoid close contact with the local population and their dwellings. The first would be possible, but not the latter. Houses could perhaps be avoided during the warm season and and if sufficient tents were on hand. But it is out of question during the winter, the autumn rains, and the muddy period of spring. Only in the case of static fronts, where units have their shelters within the positions, can troops get along without houses. However, this does not hold true in case of large reserve units. It was impossible to construct winter quarters for them. Sudden changes in the tactical situation, shifting of troops, and the like occurred frequently and new quarters could not be prepared in time. Especially when the troops are on the move they are forced to use the houses. What, for instance, could possibly have kept troops from occupying the houses of a village during the winter battles of 1941/42 and 1942/43, when the thermometer registered -35° C or lower? Villages were of decisive importance

[-2-] in the setting of march objectives and in the disposition of troops. Quarters were frequently cramped to such an extent that on several occasions even I had to share the same room with the four officers of my immediate staff and the orderlies. The villages often became the objective of the fighting, as both sides tried to gain shelters against the cold. But we frequently occupied the houses also in the summertime.

Living in crowded quarters and positions furthered the rapid increase of lice. Although somewhat less during mobile operations, our troops were constantly lice-ridden. This, of course, increased the threat of typhus. [-3-] During position warfare delousing stations were installed (as a rule one for each regiment, which was not enough); the troops bathed there and received clean underwear, and their clothing, disinfected by heat, was returned to them. (The louse perishes at temperatures between 70° and 80° C.)

There are some regions in Russia where the population is frequently plagued by typhus epidemics. One of these regions is located between ROSLAWL and JOUCHNOW (on one of the main highways to MOSCOW). As commander of the 62d Infantry Division, I was in the area west and northwest of JUCHNOW from the beginning of February to July 1942. During that time the division had about 140 cases of typhus; this was a small number compared to other divisions. I remember that in some the number reached 300 - 400.

Another disease is the typhoid fever. All troops were inoculated against it. There were only a few cases of that disease. The danger is in the water which is polluted almost everywhere. In Russia water is available only from rivers or open wells. The water purification equipment, carried by every battalion, was inadequate. Filters were used up rapidly and new ones were seldom delivered. The water had to be boiled. In the summer the

[-3-] troops were supplied, wherever possible, with increased rations of coffee or tea. Drinking of unboiled water was prohibited under punishment, but many ignored this order and drank water even from swamps. Despite all reasoning, this could not be prevented. Just the same, there were hardly any cases of typhoid fever.

Cases of dysentery occurred only in a few instances, although inoculation against it was begun only in the middle of 1942. The disease had spread among the troops very seriously during the Polish campaign of 1939. At that time the cause was undoubtedly the eating of spoiled or unripe fruit. This danger does not exist in Central or Northern Russia, because practically no fruit grows there; it is more likely to appear in Southern Russia.

[-4-] A disease which caused some casualties was the epidemic jaundice. Its cause was unknown to the doctors at the time. The sick, greatly weakened by the disease, had to be removed to hospitals and required several weeks of convalescence. As I remember, epidemic jaundice occurred only in the summertime.

The trench fever (Volhynian fever) confronted us with similar problems. In the summer of 1942 it caused the division about 200 casualties over a period of 6 - 8 weeks. Its cause was also not clearly determined at that time.

Rather numerous were the casualties brought on by the so-called "rodent disease" [Nagerkrankheit]. It was transmitted by food that had been contaminated or gnawed on by mice. On fighting mice I refer to statements in the study "Field Expedients."* This disease lasts several weeks and

*Ed: See MS #D-020

[-4-] causes considerable weakening of the organism. Measures for combating mice are important under any circumstances.

Malaria appears in Central Russia and far into northern Russia. It is more frequent in certain regions. For example, the ROSLAVL---JOUCHNOW typhus area is also malaria-infested. There are two types of malaria, but I did not encounter any case of malaria tropica, only the common malaria ternaria, and that only in very few instances. From spring to fall, every man in this region had to take one tablet of atabrine every night as a preventive; this remedy does not produce the after-effects of quinine, even if taken for any length of time. There were only few soldiers who were allergic to atabrine. As a protection against the swarms of mosquitoes, especially in the swamp regions, it is wise to provide the troops with mosquito nets and window screens for shelters (also as a protection against the numerous flies).

[-5-] I am not acquainted with Russia south of the line KURSK---VORONESH. I have been given to understand that malaria tropica occurs more frequently in the areas where the rivers empty into the Black Sea. From my experiences with the army which I commanded in the Balkans, where malaria tropica is widespread especially in Albania, I know that an early diagnosis is important for the treatment of this disease. Since most of our medical officers were not too well acquainted with the disease, we instituted courses in which all doctors were instructed in the diagnosis and initial treatment of malaria tropica. This proved to be useful, although it pertains only to Southern Russia.

Because malaria is disseminated only by a certain genus of the mosquito, the Anopheles, Army High Command distributed posters among the troops showing enlarged drawings of the common mosquito and the Anopheles, emphasizing the characteristics of the latter -- the peculiar position of the abdomen. It is difficult to recognize this difference in reality, only in some exceptional cases. The instructions were quite interesting but had no practical value.

I did not encounter any cases of cholera or smallpox throughout the entire period.

Inoculations: Initially the German armed forces in the east were inoculated only against typhoid. My pay book shows that I was first inoculated in 1942 against the following: cholera in the spring, dysentery in the summer, and smallpox in the fall. Only a small group, as mentioned above, was inoculated against typhus.

In conclusion I wish to call attention to the fact that the Russian summer is marked by the great heat of the continental climate and that the rains cause a sharp drop in temperature. Many soldiers could not adjust themselves to the sudden climatic changes, and as a result suffered from diarrhea. Therefore, it was necessary even in the summer to equip the men with waist bands and to keep on hand a supply of rum, so that tea with rum could be served to the troops on rainy days.

II. Horses

The most dangerous and widespread horse disease in Russia is the mange. It is caused by mites, and for a long time remains confined to a small portion of the skin without affecting the working capacity of the

[-6-] horse. The lack of remounts made it necessary to retain horses that were mildly infected by the mange, but certain precautionary measures had to be taken. However, the presence of these horses often caused the disease to spread. In mild cases the troops treated the horses locally by rubbing the infected parts with a tar preparation. Before this preparation was supplied, the troops substituted kerosene, available locally and normally used for lighting purposes; although effective, it strongly affected the skin.

Mangy horses were isolated in special stables. An order was issued to the effect that these stables be marked distinctly, so that they would not be occupied by healthy animals after the unit moved to another locality. This order was not always carried out conscientiously.

The organic veterinary company of the division was not adequately equipped for receiving a large number of mangy horses. Only severe cases were turned over to that company, and the most effective and quickest treatment consisted in placing the horse's entire body -- except for the head which was left sticking out in the air -- into a gas chamber and exposing it to a gas which killed the mites. But the veterinary company had only one gas chamber; that was not enough. It succeeded in improvizing a second one, but the improvization of gas-tight chambers is particularly difficult in the field.

Special precautions must be taken when horses are procured locally. One can assume with certainty that mangy horses will be among them.

[-7-] More than 1,000 of the 5,800 horses in my division, the 52d Infantry Division, were mangy in the spring of 1942. This number decreased considerably during the summer. But the mange could not be wiped out completely.

[-7-]

A large reserve of horses for extensive replacement of diseased horses is a necessary provision for the prevention of a mange epidemic. However, the division never had more than 150 horses in reserve. These also had to serve as replacements for horses that had been lost because of other diseases, accidents, or enemy action.

In the summer of 1942 we found that many horses in the SHISDRA area (about 100 km. northwest of OREL) suffered from large festering boils, that were caused by the bite of certain flies. This disease had been unknown until then. Many horses that had boils in the region of the harness traces or the saddle were thus disabled for some time. Later on, the disease disappeared.

The much feared tuberculosis or the pulmonary murrain, which had paralyzed entire batteries after the French campaign in 1940, and also had appeared quite frequently in garrisons during peacetime, was confined only to a few cases in Russia.

Horses withstood the severe winters well, even though for long periods they had no stables. This can be said also of the fairly heavy breed of French and Belgian horses that were employed as draft horses for the artillery pieces.

Finally, attention should be called to two experiences made during the war in the East. The first, that sufficient fodder, rather than good stables, is the most important prerequisite for maintaining the efficiency of the horses. That was frequently lacking. The second, that it is necessary to take into account, whenever possible, the demands made on the horses, because of existing road conditions.

[-7-]

Not only the troops but also the command must show no less concern for the well-being of the horses than that of the men. Otherwise the infantry would soon be immobilized.

(Signed): Dr. Rendulic, Generaloberst

19 March 1947