

U.S.S. CHARRETTE (DD581)

Care Fleet Post Office
San Francisco, Calif.

17 August 1945.

From: The Medical Officer.
To: The Commanding Officer.
Subject: Report on Japanese Hospital Ship TACHIBANA MARU.

1. This report concerns the Japanese Hospital Ship TACHIBANA MARU, designated by the Japanese Government as AH-31, in October 1943. She is not a large vessel. Her gross weight is seventeen hundred seventy-two (1772) tons, with a length of two hundred forty-nine (249) feet and a beam of forty (40) feet. She is powered by diesel engines and has a maximum speed of sixteen (16) knots and a normal cruising speed of fourteen (14) knots.
2. The TACHIBANA MARU was boarded at 0658 on the morning of 3 August in the Banda Sea north of Timor. The purpose of the boarding was for a routine check on patients and cargo.
3. The senior Japanese medical officer escorted the medical inspecting party, which consisted of the author and one hospital corpsman, thru those parts of the ship quartering the patients. The Japanese doctor, an Army captain, was polite and correct in manner, but declined to elaborate on any questions asked, such as specific methods of treatment and his personal opinion as to the physical condition of the patients. When asked if he had anticipated the death of any patients on the trip, he replied that he had not. All patients lay with eyes closed while the inspecting party was passing thru the wards, no doubt previously instructed to look as sick as possible. No objections were voiced when the inspection party pried into several large boxes marked with red crosses and labeled medical supplies. These were found to contain thousands of ampoules of vitamin preparations. As the inspection progressed the Japanese medical officer became noticeably nervous and it was with relief that our party climbed out of the holds and up to the relative security of the bridge.
4. Contraband of war consisting of arms and ammunition was found by the search party at 0750 and the ship was then taken over by our force and sailed into an Allied port for further investigation.
5. An excellent opportunity for appraisal of the ship as a hospital ship as well as Japanese medical methods was afforded on the trip in. Fortunately, one of the junior medical officers proved very cooperative and most of the following information was obtained from him.

FACTS OF GENERAL INTEREST

1. The junior medical officer came aboard the TACHIBANA MARU on 17 December 1944, at Manila. He had previously served three years aboard Army troop ships. He stated that since he reported aboard, the TACHIBANA MARU had made trips between Saigon, Takao, Java, Singapore, Celebes, Sumatra, and other Japanese occupied islands in the Southwest Pacific. At no time had the ship carried more than seven hundred (700) patients, which was normal maximum capacity. This is an interesting fact, because at the time of interception, more than fifteen hundred (1500) "patients" were aboard.
2. When the TACHIBANA MARU was boarded she was enroute from Toeal, Kai Islands, to Makasses, Celebes, and thence to Soerabaja. The informant stated that to the best of his knowledge the patents aboard had been evacuated by barge and small craft from the Vogelkop Peninsula of New Guinea, and surrounding islands. he said that they had been hospitalized in a large general hospital at Toeal for periods up to six months. The officer also volunteered that only those men in the best physical condition were evacuated on this trip. In as far as he knew, this was the first time a Japanese hospital ship had visited the Kai Islands.
3. Three doctors, all indifferently trained, were aboard the ship and permanently attached to her. The senior medical officer had spent on year as an interne but had no other training. The junior medical officer persisted in referring to

himself as an eye, ear, nose and throat specialist, in spite of the fact that he also had but one year postgraduate training. The third medical officer had been recently inducted into the Army and was still in apprentice status. A total of thirty-three (33) medical corpsmen were aboard. Hardly an impressive staff to care for over 1500 patients.

EVALUATION AS A HOSPITAL SHIP

1. While approaching and still several hundred yards away, the stench from the TACHIBANA MARU was very much in evidence. Urine and feces from cats and monkeys, of which there were numbers aboard, as well as excrement from the patients and crew were noted in the scuppers. There were two large heads on the port side of the ship aft, one on the main deck and one on the first platform deck. Many of the toilets were inoperable and the urinals had no flushing systems. Evidently they had not been cleaned for months and their odor was overpowering.
2. The patients were quartered in three wards, two of them actually being holds. One was situated on the main deck forward and two built in two of the holds, halfway between the deck and the overhead. Patients were lying on these platforms and on the decks beneath them, in conditions so crowded that they were actually stretched out over each other. A few higher ranking officers were placed in staterooms, three to a room. The officers had mattresses and pillows but the enlisted men had neither. Lighting facilities on the wards were so poor that the opposite end of the ward could not be seen without a flashlight.
3. The ship had no forced ventilation system and the heat below decks was stifling. The ship did not have evaporators. Fresh water was carried in storage tanks and doled out in small amounts for drinking purposes only. No water was allowed for bathing or personal hygiene. Samples of water were taken from all tanks after reaching port. None of the water was potable, being heavily contaminated with E. coli. Fortunately, the boarding party had been forewarned and avoided all ship's water.
4. There were no operating rooms on the ship. Neither were there dental facilities, treatment rooms, X-ray facilities, or isolation wards. There was no laboratory and no diet kitchen.

CARE OF THE PATIENTS

1. The patients were fed twice daily, at 0830 and at 1600. Japanese medical corpsmen prepared the food under guard and carried it to the wards. The diet consisted exclusively of boiled white rice and dried fish chips. The rice was dumped into large wooden kegs and the fish into smaller buckets and carried to the wards. These containers were passed from patient to patient and each grabbed a double handful of rice and fish which he fashioned into a large ball and ate with his fingers. No vitamin supplements were given, in spite of the fact that many of the patients allegedly suffered from beriberi and malnutrition.
2. Conditions in the galley were in keeping with the rest of the ship. The only cooking facilities were large kettles heated by steam from the engine room. Roaches two inches long swarmed over everything and no attempt was made to curb them. Rats nested in the raw rice bins and monkeys and cats played in them.
3. All patients were ambulatory and went to the head unassisted. No bedside care was given, although apparently no patients were sick enough to require it.

TABULATION OF DISEASES

1. A roster of the patients and a diagnosis for each was aboard. According to the junior medical officer this roster had been compiled while the group was in the hospital at Toeal. The ship's doctors were not familiar with the patients.
2. The following breakdown according to diseases shows a total of 1538 patients, leaving a few unaccounted for. The junior medical officer with the aid of an interpreter tabulated the cases as follows:

Beriberi	550
Malaria	400

Malaria and Beriberi	212
Tuberculosis, pulmonary	60
Pleurisy, chronic	59
Infestation, Ascaris	34
Bronchitis, chronic	32
Enteritis, chronic	16
Neurasthenia	11
Ulcer, stomach	11
Dengue Fever	10
Dysentery, Amoebic	5
Dysentery, Bacillary	1
Catarrh, acute (coryza)	1
Kidney stone	4
Icterus	8
Malaria and Icterus	4
Malaria and Dengue Fever	5
Beriberi and Asthma	8
Contusions, back	4
Lumbago	7
Sciatica	6
Beriberi and Sciatica	4
Malaria and Tropical Ulcers, Leg	9
Amputation, finger	1
Beriberi and Kidney Stone	4
Hemorrhoids	4
Malaria and Enteritis, acute	12
Prolapse of Rectum	7
Appendicitis, chronic	8
Ulcer, duodenum	4
Tuberculosis, spine	4
Eczema, chronic	11
Otitis Media	3
Beriberi and Tropical Ulcer, Leg	8
Tuberculosis, pul., and Beriberi	1
Beriberi and Gastritis, chronic	4

3. When the ship was docked at an Allied port, all the "patients" were marched off the ship and obediently formed ranks. They were cheerful and made no attempt to cause trouble. It is the opinion of this medical officer that these Japanese should be more accurately referred to as troops, for their physical condition did not warrant the term "patient".

4. By our standards the TACHIBANA MARU resembled a hospital ship only in the respect that she was marked as one.

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ENCLOSURE (A) TO CO, USS CHARRETTE SECRET LTR. A16-3, SERIAL 003 of 8/17/45.

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