Summary-Part 1 The War

WW1 broke out in 1914 when Germany invaded France through Belgium. The French and British armies stopped the Germans from reaching Paris at the Battle of the Marne in the Autumn of 1914, and a stalemate developed in which neither side could win enough of an advantage in battle win. Both sides dug into the ground t protect themselves from the new weapons such as the machine gun that made the fighting so deadly. The result was a long line of trenches, running from the Belgium coast to the border between France and Switzerland. This became known as the "Western Front" and our course concentrates on the sector of this front defended by the British Army, which was in Belgium and Northern France. The soldiers endured terrible living conditions in the trenches and also the effects of the fighting, including the three Battles for Ypres and the Battle of the Somme. There were many deaths and casualties and as a result new innovations in surgery and treatments such as the use of X Rays and blood transfusions. Following a huge Allied attack the German army surrendered to the Allies in November 1918 and the fighting stopped at 11am on 11th November

Extra resources

https://www.bbc.co.uk/programmes/p00xb4ch

https://www.bbc.co.uk/teach/class-clips-video/history-ks4-gcsehow-did-reconstructive-surgery-develop-in-world-war-one/ zmfvd6f

4th August **1914:** Britain declares war on Germany

Oct/Nov 1914:

First Battle of Ypres. Allies keep control of channel ports, but lose 50, 000 men

April/May 1915 Second Battle of Ypres. First use of Chlorine gas. British losses 59,000

July 1916: Battle of the Somme The Allies advance 5 miles using artillery bombardment to break through enemy lines. This leads to much higher casualties (400,000 men).

April 1917:USA enters the war. Blow to German morale and a decisive turning point in the war.

Key Vocabulary	
Barbed wire	Metal wire with sharp points used in no-man's-land to pro-
	tect from enemy attack. It made it difficult for men to get
	through without being trapped by the wire
Blighty Wound	A wound serious enough to get a soldier away from
	the fighting and back to Britain.
Brodie Helmet	Steel helmet held with a strap. Introduced in 1915, it re-
	duced fatal head wounds by 80%
Chlorine Gas	Causes burning pain in throat and eyes and can lead to
	death by suffocation. First used by Germans in the second
	battle of Ypres, 1915.
First Aid Nursing Yeo-	A women's voluntary organisation which provided medical
manry- FANY	services on the frontlines such as driving ambulances and
	emergency first aid.
Machine Guns	Guns that could fire 450 rounds a minute; their bullets
	could fracture bones or pierce organs.
Mustard Gas	Odourless gas which passes through clothing to burn the
	skin, causing internal and external blisters. Gas masks offer
	little protection against mustard gas, as it goes through
	clothing. First used by the Germans in 1917.
No Mans Land	The area between two opposing lines of trenches.
Phosgene Gas	Similar to chlorine gas but faster acting and can kill exposed
	person within 2 days. First used end of 1915.
Royal Army Medical	The branch of the army responsible for medical care.
Corps RAMC	
Salient	An area of a battlefield that is surrounded by enemy territo-
	ry on 3 sides.
Trench System	A complex network of trenches in which men could live and
	fight. Trenches were dug to a depth of about 2.5m in a zig-
	zag pattern to confuse the enemy.
Shrapnel	Fragments of metal from exploded shells.





Key Treatments and Key Medical conditions		
X rays	X-rays were used in the war to identify shrapnel and bullets in wounds.	
Blood Trans- fusions	Discovery of blood group 0 and blood storage methods made transfusions possible at the battle of Cambrai in 1917.	
Brain Sur- gery	20% of all wounds on the Western Front were to the head, face and neck. Harvey Cushing, a neurosurgeon, developed new techniques in brain surgery using a magnet to remove metal fragments from the brain with local anaesthetic, to reduce swelling.	
Plastic Sur- gery	Harold Gillies pioneered facial reconstruction for soldiers who had suffered head wounds.	
Thomas Splint	Improved survival rates from fractures from 20% to 82%. The splints stopped the bones from moving.	
Carrel-Dakin Method.	Carrel-Dakin Method: A method for treating wounds with a sterilised salt solution through a tube to prevent infection.	
Aseptic Sur- gery	Surgery performed under sterilised conditions to prevent infection from germs	
Shell Shock	Soldiers experienced headaches, nightmares, loss of speech, shaking and complete mental breakdown.	
Trench Foot	Painful swelling of the feet caused by standing in cold mud and water, which could lead to gangrene	
Trench Fever	Flu-like condition spread by lice in the trenches.	
Gangrene	Gangrene infects injuries and affects toes, feet and hands. Treated by amputation. Gas gangrene is an infection that produces gas in the gangrenous wound.	
Shrapnel wounds	When shells exploded, shrapnel (metal fragments from the shells) travelled at fast speeds over wide areas, causing injuries to anyone in their way.	

	with at Casualty Clearing Stations and not at base hospitals to combat gangrene. Base hospitals cared for the wounded before they were sent home or returned to
	progressed, soldiers' wounds were increasingly dealt
Base hospi- tals	These hospitals were located near the French or Belgian coast for easy transport back to Britain. As the war
Casualty Clearing Sta- tions (CCS)	Located far enough from the frontline to provide safety but close enough to be accessible to ambulance wagons. Medical officers would operate on critical injuries at the CCS. When arriving, wounded soldiers were divided into 3 groups (triage) for treatment: 1) walking wounded 2) those in need of hospital treatment 3)
Dressing sta- tion	Located in abandoned buildings or dugouts about half a mile from the front line. Staffed by medical officers, stretcher bearers and nurses. Injured men would walk to the dressing station or be carried there by stretcher
Regimental Aid Post (RAP)	Within 200m of the front line, in deserted buildings or communication trenches. A medical officer and stretcher bearers with first-aid knowledge would give immediate first aid and get men back to the fighting if possible.

Challenge-

Which was the most far reaching new treatment pioneered during WW1?

Chain of Evacuation—main stages

Research the role of Marie Curie in WW1.

April/May 1917: The Battle of Arras. British advance 8 miles; 160,000 casualties.

Oct 1917: Battle of Cambrai. First large scale use of tanks.

July 1918; The Hundred Days
Offensive. Allies launch a series of
sustained attacks against the Germans which leads to Germany's
surrender

11th Nov 1918:WW1 ends following German surrender.
End of World War I at 11.00 am.

Y10 Schoology page



