

Chapter 11

Second World War

The Legacy of Lieutenant Colonel (Sir) Albert Coates

Keeping the men alive

*They went with songs to the battle, they were young,
Straight of limb, true of eye, steady and aglow.
They were staunch to the end against odds uncounted;
They fell with their faces to the foe.*

*They shall grow not old, as we that are left grow old:
Age shall not weary them, nor the years condemn.
At the going down of the sun and in the morning
We will remember them.*

*They mingle not with their laughing comrades again;
They sit no more at familiar tables of home;
They have no lot in our labour of the day-time;
They sleep beyond England's foam.*

For the Fallen

Laurence Binyon

Albert Coates (later Sir Albert Coates) never worked for the CRB or any of its successors but he did have a couple of tenuous connections as I describe later. I want to give special praise to this prominent Australian surgeon, Albert Ernest Coates for the leadership, wisdom, skill and heroism he displayed in saving hundreds of Australian lives in the horror of the Thai-Burma Railway camps.

The first connection is through his eldest daughter, Margaret, who married Peter Roberts, the youngest daughter of Caleb Roberts. As described above, Caleb was a giant in the CRB's history being Chief Engineer and Chairman. Both Sir Albert and Caleb made huge contributions in both World Wars in vastly different circumstances. The second connection is that it was alleged that Coates operated on Bill Dolamore's ankle (mentioned earlier).

When we think of medical heroes in the Japanese prisoner of war camps, we immediately think of Ernest Edward 'Weary' Dunlop – later Sir Edward. Dunlop was a man of many talents. He graduated from the University of Melbourne with first class honours in pharmacy and medicine. Although he played Australian Rules football as a youth, he turned to Rugby Union at university and became the first Victorian ever to play for the Australian Wallabies. He was a member of the first Wallaby squad to win the Bledisloe Cup away from New Zealand. He was captured in Java in 1942 and was briefly transferred to Changi before being sent to the Thai sector of the Burma-Thailand railway – where the Japanese so cruelly treated their captives. Conditions were primitive and horrific — food was totally inadequate, beatings were frequent and severe, there were no medical supplies, and tropical diseases were rampant.

A courageous leader and compassionate doctor, he restored morale in those terrible prison camps and jungle hospitals. Dunlop defied his captors, gave hope to the sick and eased the anguish of the dying. He became, in the words of one of his men, "a lighthouse of sanity in a universe of madness and suffering".

But there was another Australian surgeon – Albert Coates - of shorter stature but, dare I say it, superior skill, whose history was similar to Weary's. In case you think I am somewhat deluded, let me quote Dunlop's own assessment of Albert in *The War Diaries of Weary Dunlop*.

Lt Colonel Albert Coates was immensely my professional superior, a veteran of Gallipoli, who had taught me in medical school, and whilst my military rank was actually higher as Lt. Col. T/Col., there was no way I could be induced to ‘pull rank’ on him. He had become legendary in Burma and Sumatra.’



Albert Coates and Weary Dunlop at the Recovered Allied Prisoner-of-War and Internees Unit in 1945.

At the Australian War memorial in Canberra, Sir Albert is one of 50 Australians commemorated. This is what it says:

“Born into modest circumstances, and after leaving school at an early age, Albert Coates undertook night study and excelled as a student. In 1914 he enlisted in the 7th Battalion as a medical orderly and the following year served on Gallipoli. Later, on the Western Front, he transferred to the intelligence staff at corps headquarters.

Back in Australia following the war, he studied medicine and over the next decade established himself as a leading surgeon and academic. He was also a Captain in the Australian Army Medical Corps. Then war came again; in 1941 he was appointed Lieutenant Colonel and Senior Surgeon to the second AIF in Malaya.

Following the Japanese landings on the Malay Peninsula, Coates moved with the 2/10th Australian General Hospital to Singapore. A few days before the city surrendered he was a part of a group ordered to Java. Their convoy was bombed; Coates was rescued and reached Sumatra. There he treated casualties and declined opportunities to leave. He became a prisoner of the Japanese and in May 1942 was sent to Burma.

Short and nuggetty, Albert Coates was courageous, honourable, and unpretentious; he became renowned for his dedication, skill and wisdom. He worked tirelessly to help the sick and dying prisoners of war on the notorious Burma–Thailand Railway.

Conditions were deplorable, the treatment brutal, and the death rate enormous. He later described his daily work as “segregating the sick from the very sick ... curretting seventy or eighty ulcers ... and, in the afternoon, proceeding to amputate nine or ten legs”. In 1944 he became responsible for a major prisoners’ hospital in Thailand.

After the war Coates returned to Melbourne and resumed his distinguished medical career. In 1953 he was made a fellow of the Royal College of Surgeons, London, and in 1955 received a knighthood. Throughout his ordeals and achievements, he “was proud to be involved in great causes as a soldier and a citizen”.

Albert Coates was born in 1895 at Ballarat. He was the eldest of seven children His father was a postman. Albert was raised in a warm and loving family in which the virtues of service, honesty and industry were instilled. He obtained his Merit certificate at the age of 11 and became a butcher's apprentice. When he was 14 he became an apprentice bookbinder; this would, no doubt, have satisfied his lust for learning by enabling him to read widely.

His former primary school teacher opened a night school in Ballarat and he encouraged young Albert to attend with spectacular results. The teacher¹ coached him two nights a week in Latin,

¹ The teacher who established the school was Leslie Morshead – later Sir Leslie Morshead – who played a huge role in both World Wars. He served as a captain at the Gallipoli landings on 25 April 1915 and as a major in the bitter fighting at Lone Pine in August. He was promoted to Lieutenant Colonel in command of the 33rd Battalion under (Sir) John Monash. A successful leader in the battles of Messines and Passchendaele in Belgium, and Villers-Bretonneux and Amiens in France, Morshead was awarded the Distinguished Service Order and mentioned in dispatches five times; in 1919 he was appointed CMG (Order of St Michael and St George) and to the French Légion d'honneur.

In the Second World War, Morshead was promoted to Major General and commanded forces in Libya and under General Rommel's advance they eventually withdrew to Tobruk. He was the only officer to avoid capture. He commanded the fortress at Tobruk where the Australian, British, Indian and Polish troops won the important defensive battle after which they moved on to El Alamein where the Nazi juggernaut was finally defeated for the first time in the war. He came home to Australia in 1943, where he commanded forces in the north.

French, History, English Literature and Maths, all for three guineas a term. He passed the junior public examination with distinctions in five subjects, including French and German. By this time, Albert had decided to study medicine, but he had to take a job in the Postmaster-General's Department in Wangaratta in order to earn some money.

Albert Coates enlisted in August 1914 and became a medical orderly in the 7th Battalion of the AIF. He served on Gallipoli and was one of the last to leave the peninsula on the night of 19/20 December 1915. His battalion was transferred to France in March 1916 and fought in the battle of the Somme. His skill as a linguist was the reason he was transferred to the intelligence staff of the 1 Anzac Corps as the Battalion's interpreter. At the end of the war, he was invited to apply for a commission in the British Army but he preferred to return to Australia where he found employment in the office of the Commonwealth Censor in Melbourne.



Albert Coates in Egypt and a studio portrait – World War 1.

From Peter and Margaret Robert's collection.

Albert transferred from the Censor's Department to the GPO in Spencer Street as a postal assistant on the 10 pm to 6 am shift. This enabled him to commence his medical studies at the University of Melbourne between 1919 and 1924 and in 1924 he was offered the Stewart Lectureship in anatomy. This changed the course of his career. It was a gateway to more study, and an opportunity to develop his teaching ability.

He gained degrees in Doctor of Medicine in 1926 and Master of Surgery in 1927 and was appointed Honorary Surgeon to Outpatients at the Melbourne Hospital in the same year. Through the depression, the outpatients work and emergency surgery proved a heavy load, but as well as this, he developed his reputation as a surgeon and a teacher. Coates' interest in neurosurgery led him to travel overseas in the mid 1930s. On his return he helped form a neurosurgical unit, and later in 1940 with a group of surgeons, the Neurosurgical Society of Australia.

At the outbreak of the Second World War Coates, who was nearly 45, enlisted and was refused but, when the centre of action shifted closer to Australia, he was called up on 1 January 1941. A few weeks later he sailed for Singapore with the 8th Australian Division attached to a medical unit as Senior Surgeon with the rank of Lieut. Colonel.

When Singapore fell, he embarked on a coastal steamer bound for Java with patients and hospital staff. The ship was sunk and the survivors ended up in Sumatra. Coates had a number of opportunities to escape before capture. Twice he was ordered to leave by the military but he chose to stay on with his patients. In March, 1942 Sumatra surrendered to the Japanese and Coates' ordeal as a prisoner of war began.

In May 1942 Coates moved to Burma. He was stationed at the Kilo-30 and Kilo-55 camps on the Burma-Thailand Railway where he cared for hundreds of prisoners of war under deplorable conditions. He subsequently described his medical practice at Kilo-55 to the International Military Tribunal for the Far East - in a bamboo lean-to, with his only instruments a knife, two pairs of artery forceps and a saw used by the camp butchers and carpenters.

According to some researchers, Coates saved more POW lives than any of the other doctors in the prison camps, through his use of improvised techniques and amputations. Many more were saved by his leadership, encouragement and example. To the brutalized POWs he was simply known as Bertie.

The Australian born American historian, Gavan Daws, in his history '*Prisoners of the Japanese; POWs of World War II in the Pacific*' described Coates thus:

'The greatest surgeon on the railroad was an Australian named Albert Coates. He knew the history of amputations. The ancient Romans amputated, and in Europe, battlefield amputations with saw, forceps and ligatures went back to the 16th Century. Coates had done wartime amputations himself. He was on Sumatra when the Japanese

invaded. It was medical chaos. Coates was down to next to nothing in the way of surgical instruments; he had to take off legs with a chopper.

When the Japanese moved him to Burma, they told him he would have a fully equipped hospital. That was a standard Japanese lie. Coates had thousands of sick men to look after and next to nothing to work with. For several months he was moved up and down the railroad. Looking after the sick, he got sick himself, with amoebic dysentery and scrub typhus. When he was down in weight from 168 lbs to 98 lbs (7 stone or 44 kilos), the Japanese sent him to 55 Kilo, an abandoned work camp, a cluster of filthy bamboo huts but nothing more than a dump for the worst sick off the railroad (sic). He did his early rounds on a stretcher.

Mornings he spent curetting – his curette was a gynaecological one given to him by a Japanese doctor as a kind of joke. Badly ulcerated toes he cut off using scissors without anaesthetic. Morning was his time for morale building telling funny stories in between the screams coming down the row. For hygiene he had no surgical mask, and no rubber gloves, just some alcohol distilled from Burmese brandy to disinfect his hands. He had a helper, an Australian Sapper named Edward Dixon, who was a genius at improvising useful things. He had no anaesthesia, but he had a Dutch captain, C.J. van Boxtel, who was a genius at chemistry. Coates came by a small bottle of dental cocaine tablets, and van Boxtel worked out a way to make up a solution that could be injected as a spinal anaesthetic.

When to amputate, or whether to amputate at all – this was a judgment call for the POW surgeon. Coates was for action, for intervention. If anything, he was for early amputation, and on this crucial point of medical doctrine he would not have heard much argument from most other Australian doctors on the railroad, British doctors either. In their thinking, with a long delay the patient was a dead man anyway. Amputate and at least he would have a chance. Even if a man died after the operation, at least he would be leaving life in less pain, and with more dignity, his leg a clean cut stump instead of a foul, gangrenous horror.'

Coates' mantra was 'Your ticket home is in the bottom of your dixie.' As construction progressed on the Thai-Burma railway line, men and medics were moved to other camps so that Coates' wisdom became a much used dictum for survival. He sometimes described it as 'Your passport home,' stressing that 'whenever you eat rice and vomit it, eat some more. Even if you get a bad egg, eat it.' Some of the men thought that he had gone troppo, but he had watched the men as they lined up to wash their dixies and saw that many dixies still contained quantities of food. Finishing their rations, he told them, would enable their bodies to absorb a modicum of sustenance which, for some of the men, would be crucial to their survival.

Late in January 1944, Coates, with his orderlies and others, was sent to the Nakhon Pathom camp in Thailand where the Japanese had built fifty wooden huts to accommodate ten thousand men.

The sick lay on grass mats on wooden platforms. Coates was in charge of this hospital and he and his medical team and voluntary aids had worked near-miracles with rudimentary methods which all too frequently involved little more than water and encouragement.

It was here that his war ended. Supplies were dropped by planes and with a good supply of food there was an immediate and discernible improvement in the health of the prisoners. As the camp opened up to visitors, villagers poured in to see for themselves the legacy of the camps. They were amazed that humans could suffer so much and survive to tell of their experiences. Sadly, many of the POWs were not so fortunate.

Albert Coates testified at the War Crimes Trials in Tokyo. In his evidence he said, *“At the 55K camp I had the opportunity to visit a jungle hospital for the Japanese troops and found it lavishly supplied with drugs and medicine of every kind. Yet, Higuchi, the so-called Japanese doctor, once issued six two-inch bandages to a hospital containing 1,200 patients.”*

He also said that until early 1943 he saw his captors’ attitude as ‘easy-going’ neglect. He then compared it with the conditions of 1943; *‘Deliberate neglect, deprivation, starvation, denial of drugs, denial of all equipment, and denial of facilities.’*

He went on to say, *‘... the spectacle of emaciated skeletons of men on the one hand, and the oedematous, water-logged wrecks on the other, many with rotting, gangrenous ulcers of the legs, emitting a nauseating stench, lying in their pain and misery, was such as I never wish to witness again. The daily procession to the graveyard was a reminder to those still alive that death would soon ease their suffering. The memory of it is not easily obliterated.’*



Albert Coates serving as Principal Medical Witness for the Allies at the Major War Crimes Trials, Tokyo.



Louis Kahan's portrait of Sir Albert Coates.

Family collection.

A friend of mine, Dr Peter Renou, recalled his father's recollections about Albert Coates. His father, Lieutenant Colonel Cecil Renou, was a surgeon at the 2nd/4th Australian General Hospital at Tobruk and later served in New Guinea. Peter said that Albert Coates was his father's hero as well as the hero of the Japanese camps. His father rarely spoke about the war. However, he did elaborate on Albert Coates saying his discipline, his organizational ability, improvisation, and immense surgical skill saved hundreds of lives. He was the main reason the Australians fared better than the British in the camps.

Weary Dunlop's reputation for greatness was earned in another way. He was not as skilled a surgeon as Coates but once, when Peter was a medical student, he expressed this view to his father over the dinner table, his father got quite angry and Peter later realised that Weary was also a hero. His heroism was based on his standing up to the Japanese on behalf of his men. He was a tall, red-headed man of Irish stock who had a feisty temper and this brought him close to execution on occasions. Once, a Japanese soldier had a sword raised above Weary's neck but, thankfully, he desisted. Weary saved many prisoners' lives through his own courage in standing up to his Japanese captors.

Albert Coates was, in fact, a medical mentor to Weary Dunlop. Weary pays tribute to him in his diaries. In his eulogy at Coates' memorial service Sir Edward Dunlop said:

“So we have this man, a master surgeon, soldier, teacher, orator, ambassador extraordinary ... a man so gifted, so full of spirit and endeavour and so courageous and who gave so much of himself to the public good and our good that his whole life is on a plane so far above the average man ... All in all I think we can say ‘There was a man, we may not see his like again’”

In an on-line article (pows-of-japan.net), Albert Coates' grandson, himself an army surgeon, Lt Colonel Peter Winstanley OAM, RFD, wrote about the medical teams in the POW camps. He said:

There are obviously several reasons that cause us to lionise these special medical men. They provided an opportunity for life and survival in a place where death was a daily reality. They provided succour for the distress of the ill, injured and dying, and they formed a barrier of sorts between the Japanese and the men. They provided a constant example of dogged application and unreserved commitment to the support of every POW, to the interests of every

single man as a person. And they became the leaders of the camps in seniority, in skills and in compassion. They encouraged great innovation and perseverance.

These 43 doctors, with their colleagues in support, nurses, medical orderlies, chemists and mechanics, demonstrated a rare heroism. They worked for their comrades, they saved lives, they made personal sacrifices, and some died, but they continued to inspire and create order amongst chaos.