



History GCSE Western Front Knowledge Organiser

Context of the British sector of the Western Front		Conditions requiring treatment on the Western Front
<p>The Ypres Salient: Germans had the advantage with being on the higher ground. Tunnelling and mines were used by the British at Hill 60. First Battle of Ypres - 1914. Second Battle of Ypres - 1915. Third Battle of Ypres - 1917.</p> <p>Arras: Battle of Arras - 1917. Before the battle, Allied soldiers dug tunnels below Arras. Tunnels led to rooms and included an underground hospital.</p> <p>Impact of terrain on helping the wounded: Difficult to move around, + night, communication was difficult, collecting wounded from No Man's Land was dangerous. Stretcher bearers found it difficult to move around corners and transport of the wounded was difficult because of this.</p>	<p>The Somme: Battle of the Somme - July-November 1917. 1st day of battle, 60,000 casualties and 20,000 died. In total, 400,000 Allied casualties and this put pressure on medical services on the Western Front.</p> <p>Cambrai: Battle of Cambrai -1917. 450 tanks used to advance on the German position, however, plan did not work because there was not enough infantry to support.</p>	<p>Ill health: Trench fever: caused by body lice and included flu-like symptoms including high temperature. Treatment: Passing electric current through infected area was effective. Prevention: Clothes disinfected and delousing stations were set up. Affected 0.5 million.</p> <p>Trench foot: caused by soldiers standing in mud/waterlogged trenches. Treatment: soldiers advised to keep clean but worst cases, amputation. Prevention: Changing socks + keeping feet dry and rubbing whale oil into feet. Affected 20,000 in winter of 1914-1915.</p> <p>Shell-shock: caused by stressful conditions of war and symptoms included tiredness, nightmares, headaches and uncontrollable shacking. Treatment: Not well understood. Prevention: rest and some received treatment in UK. Affected 80,000 and some were shot!</p> <p>Weapons of war: Rifles: fired one at a time/loaded from cartridge case creating rapid fire. Machine guns: Fired 500 rounds a minutes. Pierced organs and fracture bones. Artillery: Bombardments were continuous, Artillery fire caused half of all casualties.</p> <p>Shrapnel: Caused maximum damage exploded mid-air above enemy. Killed/injured. Chlorine Gas: Led to death by suffocation. 1915, gas masks given to all British soldiers. Phosgene Gas: Faster acting than Chlorine but with similar effects. Could kill within 2 days. Mustard Gas: Odourless gas, worked in 12 hours. Caused blisters, burn the skin easily.</p>
Key words	Key words	Key words
<p>No Man's Land: Land between Allied and German trenches in WW1.</p> <p>Trenches: Long, narrow ditches dug during the First World War.</p> <p>Ypres Salient: Area around Ypres where many battles took place in WW1.</p>	<p>Gangrene: When a body decomposes due to a loss of bloody supply.</p> <p>Shrapnel: A hollow shell filled with steel balls or lead, with gunpowder and a time fuse.</p>	
Helping the wounded on the Western Front	The impact of the Western Front on Medicine	
<p>Evacuation route: Survival depended on speed of treatment. Care improved as war progressed. 1914 – 0 motor ambulances but by 1915, it was 250. Ambulance trains were introduced, as well as, ambulance barges used along River Somme.</p> <p>Stretcher bearers: Collect wounded, 16 in each battalion + 4 for each stretcher.</p> <p>Regimental Aid Post: Always close to the front line and staffed by a Medical officer selected those who were lightly wounded/needed more attention.</p> <p>Field Ambulance and Dressing Station: Emergency treatment for wounded.</p> <p>Casualty Clearing Station: Large, well equipped station, 10 miles from trenches.</p> <p>Base Hospitals: X-ray, operating theatre and areas to deal with gas poisoning.</p> <p>Underground hospital at Arras: Running water, 700 beds and operating theatre.</p> <p>RAMC: Involved medical officers and learnt about wounds never seen before.</p> <p>FANY: Volunteer nurses, who helped the wounded and also drove ambulances.</p>	<p>The Thomas Splint: Stopped joints moving and increased survival rates from 20 to 82%. Reduced infection from compound fractures.</p> <p>X-rays: Developed in 1895, X-rays used to diagnose issues before operations. But there were some problems: X-ray could not detect all problems, were fragile and overheat.</p> <p>Mobile X-rays: 6 operated on the front line, used to locate shrapnel and bullet wounds. Transported around in a truck and enabled soldiers to be treated more quickly.</p> <p>Blood Transfusions: Blood loss = major problem. Blood transfusions used at Base Hospitals by a syringe and tube to transfer blood from patient to donor. Extended to CCS from 1917.</p> <p>Blood bank at Cambrai: Adding Sodium Citrate allowed blood to be stored for longer. Blood was stored in glass bottles at a blood bank and used to treat wounded soldiers.</p> <p>Brain surgery: Magnets used to remove metal fragments from the brain. Local anaesthetic.</p> <p>Plastic surgery: Harold Gillies developed new techniques, skin drafts developed for grafts.</p>	
Key words	Key words	
<p>FANY: First Aid Nursing Yeomanry. Founded in 1907 by a soldier who hoped they would be a nursing cavalry to help the wounded in battle.</p> <p>RAMC: Royal Army Medical Corps. This organisation organised and provided medical care. It consisted of all ranks from doctors to ambulance drivers and stretcher bearers.</p> <p>Triage: A system of splitting the wounded into groups according to who needed the most urgent attention.</p>	<p>Compound Fracture: Broken bones pierces the skin + increases risk of infection in wound.</p> <p>Debridement: Cutting away of dead and infected tissue from around the wound.</p> <p>Gas Gangrene: Infection that produced gas in gangrenous wounds.</p> <p>Mobile X-ray unit: Portable X-ray unit that could be moved around the Western Front.</p> <p>Radiology department: Hospital department where X-rays are carried out.</p> <p>Blood transfusions: Blood taken from a healthy person and given to another person.</p> <p>General anaesthetic: Putting a patient to sleep during an operation.</p> <p>Local anaesthetic: Area being operated on is numbed to prevent pain + patient awake.</p>	

Paper 1:

The British Sector of the Western Front, 1914 – 1918.

