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HEADQUARTERS,  
U.S. STRATEGIC BOMBING SURVEY  
(PACIFIC)  
APO 234



c/o POSTMASTER, SAN FRANCISCO

Place: Tokyo  
Date: 30 Oct. 1945

DIVISION OF ORIGIN: Military Analysis  
SUBJECT: Evacuation of Casualties and Hospitalization.

Personnel Interrogated and Background of Each:

Lt. General K. WATANABE, Medical Affairs Bureau, War Ministry  
Major G. AKIZUKI, Medical Affairs Bureau, War Ministry  
Major T. Matzunaga, Medical Affairs Bureau, War Ministry

Where Interviewed: Room 238, Meiji Building, Tokyo

Interrogator: Captain Walter M. Drozd.

Interpreter: Mr. N. YOKUKAWA.

Allied Officers Present: Lt. Colonel Hilton

Note: The three Japanese Medical officers interrogated were able to furnish only the following information at the time of the interview. They have been given, however, a questionnaire which they will answer and forward to this section. In addition they will prepare a complete statistical study of casualties sustained during the course of the war.

A. HOSPITALIZATION

1. Until April 1945, the control of wounded and sick military personnel evacuated to hospitals in Japan from overseas theatres was centralized in the Medical Affairs Bureau of the War Ministry. After April 1945, the system of hospitalization was decentralized and Japan's District Armies were charged with the operation of all but two of the Army Hospitals.

2. The War Ministry retained its control of the 1st and 3rd Tokyo Army Hospitals. The 1st Tokyo Army Hospital functioned as a Special Hospital in the handling of the most difficult surgical cases; the 3rd Tokyo Army Hospital functioned as a Recuperation Hospital.

3. All other medical and surgical cases were routed from the Accommodation Hospitals which were located at debarkation points to Special or General Hospitals in the area of the district Army nearest the home of the casualty. Special Hospitals were divided into three classes. Advanced surgical cases, Tubercular cases, and Mental cases. General Hospitals were Recuperation Hospitals.

4. Military personnel casualties were frequently forwarded to National Welfare Ministry Hospitals (non-military); these hospitals served as recuperation and convalescent institutions, giving general treatment to casualties and preparing disabled personnel for their return to civilian activities.

B. STATISTICS ON CASUALTIES

L. The following are statistics supplied by Major MATSUNAGA indicating troop casualties sustained in the Central and SW Pacific Areas, and in SE Asia through the period December 1941 to August 1944.

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The total sick casualties for this period was 1,073, 515

This figure was broken down as follows:

Recovered and returned to duty	944,804	88.0%
Evacuated to Japan Proper	63,731	5.9%
Died in hospitals overseas	17,511	1.6%
In overseas hospitals at time of report	47,469	4.4%

2. Of the 63,731 sick evacuated to hospitals in Japan proper.

Recovered and returned to duty	30,342	47.6%
Died in hospitals	2,201	3.5%
Discharged as permanently disabled	5,062	7.9%
Discharged to National Welfare Ministry Hospitals or sent home to recuperate	15,156	23.8%
In hospitals at time of report	10,970	17.2%

3. The total wounded for the period December 1941 to August 1944 in the Central and SW Pacific Ocean and SE Asia through the period December 1941 to August 1944 was 65,322.

Of the total wounded		
Recovered and returned to duty	12,159	18.6%
Evacuated to Japan proper	13,620	20.9%
Died in hospitals overseas	34,939	53.5%
In overseas hospitals at time of report	4,604	7.0%

4. Of the 13,620 wounded evacuated to hospitals in Japan proper.

Recovered and returned to duty	3,630	26.7%
Died in hospitals	165	1.2%
Discharged as permanently disabled	2,362	17.3%
Discharged to National Welfare Ministry Hospitals or sent home to recuperate	4,344	31.9%
In hospitals at time of report	3,119	22.9%

5. The following statistics cover the period December 1941 to March 1943 and consider the 27,864 military personnel casualties evacuated to Japan proper from the Central, SW Pacific Areas, and SE Asia. This analysis is only fragmentary, but was the total information available at the interrogation. The indicated disease created the greatest casualty problem generally.

Of the 27,864 casualties evacuated  
444 had infectious diseases (typhoid fever, Dysentery)

3,811 had Malaria  
4,126 had Tuberculosis  
1,894 had Plueresy

### C. Transport of Casualties in Overseas Areas.

1. The transport of casualties from front lines to rear areas was accomplished by special medical transport units. Litter units carried casualties unable to walk as far back as the Line of Communications Hospital. Ambulances also functioned in the evacuation of casualties, and picked up casualties as far forward as the Battalion Dressing Station for evacuation to rear installations.

The "Casualty Transport Unit", a functionary of the Army Headquarters was used along the line of evacuation as the situation demanded.

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2. Shortages in transport facilities were experienced, however it could not be determined from the interrogation how acute these shortages were. It was indicated that improvisations of litters and ambulances were not uncommon. Truck and animal carts were frequently used to transport casualties to the rear. Rail transportation was utilized when available.

3. Hospital ships were the chief form of transport used for the evacuation of casualties to Japan proper. Capacities for these vessels averaged between 800 and 1200. Merchant vessels also evacuated casualties on return trips to Japan after discharge of cargo.

4. Shipping difficulties started in September 1944 and very few vessels were running between the Central and SW Pacific Areas and Japan. The method of evacuating however continued from ports in SE Asia up through China, Manchuria, and Korea by rail and across the Tsushima Strait by vessel to hospitals in the homeland.

5. Total casualties evacuated by air plane numbered 1000 for the period of the war. From Singapore in April 1944, 300 casualties were transported by air to Japan. In March 1945, 300 more were transported. The route by which these 600 casualties were evacuated was: Singapore, (Malaya); Labuan, (Borneo); Manilla, (Philippines); Taihoku, (Formosa) to Kyushu. 400 more were evacuated by plane to Japan intermittently through the period of the war from Manilla, Keelung, and Saigon.

6. Statistics showing average percentages of casualties evacuated rearward by varying means of transport between the several medical installations are as follows:

From the front line to Battalion Dressing Station, 60% walked, 40% were carried on stretchers, or on backs of other men, etc.

From Battalion Dressing Station to Division Field Hospital.

40% walked  
40% transported by ambulances, trucks, etc.  
20% carried on stretchers

From the Division Field Hospital to Line of Communications Hospital.

17% walked  
60% transported by ambulance, trucks, etc.  
23% carried on stretchers.

Other details and statistics are being prepared by Lt. General WATANABE, Major MATZUNAGA, and Major AKI-ZUKI. Another interrogation has been arranged for 5 November 1945 at 1400.