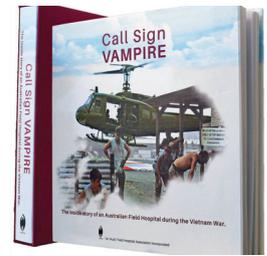


BOOK REVIEW:

Call Sign VAMPIRE

By Rod Searle, Denise Bell, Paul Danaher, Gregory Anderson

1st (Aust) Field Hospital Association Incorporated 2021; 280 pp.; ISBN: 978-0-646-83599-0
(hard cover); RRP \$129.99



Healthcare is fundamental to the maintenance of all fighting forces. The history of warfare reflects its revalidation over time which, in the Australian context, is mirrored in the official histories of our wars and other deployments. *Call Sign VAMPIRE* presents an important human face of this view as it addresses healthcare during the Vietnam War and is a great addition to the Australian military medicine literature.

Fortunately, Australia went into the Vietnam War with the very recent experiences of Korea, then Malaya and Borneo. While those deployments featured coalition arrangements regarding care of the sick and wounded, this book records both the history and the core medical support capabilities provided by the 'all Australian' care facility established from scratch at Vung Tau, miles from the primary fighting base from which most operations of the Vietnam War were conducted. The first major 'helicopter war', the high percentage of anti-personnel mines, IEDs and RPG fragmentation injuries presented unique conditions which changed the face of care in a war zone. New experiences were acquired, challenges confronted and the care of casualties given. This is the story of those who delivered that care, chronicled by those who were there.

Following the deployment of the 2nd Field Ambulance, followed by the 8th Field Ambulance, the expanding Australian forces in Vietnam necessitated the expansion of care to that of the 1st (Aust) Field Hospital and its allied healthcare services. The sequence of the buildup is chronicled as the delivery of the full range of patient care took effect to address the needs of the Australian and New Zealand forces, the enemy and even civilian casualties. Successive chapters unfurl the story of the provision of medical care, moving from the famed 'dust-off' medical evacuation made possible by the helicopter platform synonymous with the Vietnam War, through the critical care steps of triaging, surgery and post-operative care. The many allied health and logistic support components essential to a fully-fledged healthcare facility are also covered.

The ready availability of coloured imagery and a stable environment within which to capture such images enables an unprecedented image component to this book. The authors had over 7,000 images from which to select. It is one of the most visually appealing forms of story-telling I have had the pleasure to study. The authors also capitalise upon the availability of participants whose anecdotal evidence is wonderfully presented to give the human face to the history.

A strong and consistent pattern of pathos permeates *Call Sign VAMPIRE*. Care for the wounded, respectful administration of the dead, treatment of POW and

civilians, all on a triaged basis, stands out as a constant theme. It is an immensely emotive and moving story. There are also many examples of innovation and Aussie ingenuity to adapt to the circumstances of lack of equipment, the identification of/new types of wounding to contend with and unfamiliar issues such as finding live munitions on patients.

Some anecdotes are humorous: getting around officialdom in the procurement of certain supply chain commodities including the time-honoured practice of trading with the comparatively lavishly supplied Americans. Other innovations borne of necessity reflect typical Aussie ingenuity. The focus is always on the patient.

Coverage of non-battle casualties and illnesses is sensitively covered with some of the statistics illuminating. I found the near-50% sexually transmitted disease rate and the very low level of illegal drug usage revealing. Perhaps this suggests where the average Australian serviceman's interests really was when off duty in the Vietnam War.

Vietnam was not the first war in which Australian females played a vital role, but it was perhaps the last during which their deployment as doctors/surgeons and other allied health roles previously barred to females would feature. The coverage of the allied healthcare females serving with the unit is good, as is the realisation that key issues such as weapon safety and the need for their professional skills far outweigh the then-perceived prejudices surrounding gender. It is a credit to the military of today that many practices in this area, as chronicled in this book, have been derived from the contribution of the females. Employment of females along with other advances in procedures, equipment and practices highlighted in *Call Sign VAMPIRE* has since accelerated military field medical practice, reflecting the true team effort characteristic of the 1st (Aust) Field Hospital.

Many readers including former staff and patients featured in the book will draw very favourable comparisons with the quality of care before, during, and since Vietnam. This is the story of how the role of *Call Sign VAMPIRE* played its role in that evolution.

The high quality of layout, excellent proofing, logical sequencing, and a balance of medical terminology with general language makes the book a great and easy read. It is successful in capturing a slice of Australian military medical history for the widest possible audience, something that most medical-themed historical products do not do. It is a 'must read' volume and a professional keepsake suitable for a place on any military history library shelf through which the service of the men and women captured in it is appropriately recorded.

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