## Thurman Shuller - Saturday Night Banquet Speaker

## 306<sup>th</sup> Bomb Group Reunion, Omaha, Nebraska 1983

## Introduction by Russell Strong:

We have invited this evening to be with us, a close friend of a great many down here. This man, who was not the first Group Surgeon, he was actually the second. But he was the one who went overseas with the group as Group Surgeon and lasted about a year. And then somebody else decided they wanted him some other place and then the 306<sup>th</sup> lost him. As I'm sure all of you know, I was greatly indebted in trying to put together a history of the 306<sup>th</sup> on the diary of Dr. Thurman Shuller, which he kindly let me read. I think he told me at the time that only his father had ever read it. It was a fantastic piece of work. Well, Dr. Shuller has spent some months pouring over the diary again in McAlester, Oklahoma, in between times of treating sick babies and I assume making a house call now and then. Do you still make house calls? He still does. If you have trouble with your grandchildren and house calls, move to McAlester. But it is a real pleasure to have Thurman Shuller with us tonight and to reminisce with us a little bit. I think we'll have a few laughs and some fun and enjoy going back, turning back the pages, to another era. Thurman....

I am delighted to have all this group together. This is the first opportunity I've had to talk to all of you together since we gave those VD lectures in Wendover. We are now in the third stage of life. If you want to know what the stages of life are: youth, middle age, and you're sure looking good.

We've all had a great time the last two days renewing old friendships, reviving old memories and reliving some of the experiences of so long ago. Have you ever wondered why we have retained such deep affection for some of our wartime buddies – why a periodic reunion at this stage in life can be so meaningful, so much more so than a class reunion, for instance? Andy Rooney, who generally hits us with such everyday and simple truths, has in his book A Few Minutes with Andy Rooney included a piece called "An Essay on War" in which he makes a very thoughtful statement... "If war brings out the worst in people, it also brings out the very best. It's the ultimate competition. One lives at full speed finding strength he didn't know he had, accomplishing things he didn't know he could do. Most of us get a warm sense of fellow feeling when we act in close and successful relationships with others, and maybe that happens more in war than any other time".

But I do not intend to continue in such a serious vein. I'm going to be talking about a few of my memories – some amusing, some sad – mostly trivia that doesn't get into history books. I won't mention any names that I don't have permission from. Russ mentioned about the diary that I've written and I am going to read some extracts from the diary. When I pick up one of these cards, you will know that I am reading something that I wrote 40 years ago. (\*)<sup>1</sup> That is not necessarily what I would write now, but I think it is

<sup>1 \*</sup>Asterisk at the beginning of a paragraph means a quote from the diary

a little fun to see what I wrote back then. I do want to say that we are indebted to Russ Strong for this marvelous history that he has written, because it is really a great piece of work. And it has put the 306<sup>th</sup> on the map for good. I shall talk very little about combat missions – these are covered in the history.

How many here are Veterans of Wendover? It is almost frightening to look back at how incredibly green and inexperienced we were at Wendover. I shall never forget reporting in to a very dour looking gentleman named Lt. Col. LeMay sitting behind a desk. He could hardly have looked more formidable, though I'm sure he would have seemed more so had we realized he'd one day be a Four Star General and one day command all the Air Forces. But I'm sure that that sort of advancement was farthest from his mind also at that time having been seemingly banished to the most desolate place in all of Utah, and considering the rag tail personnel that was being sent in for him to help Col. Overaker form into a fighting outfit. I'm sure you've all read Col. Overaker's description of the mass confusion in organization and training of this group in the unit history as well as excerpts from Gen. LeMay's book published in last October's issue of 306<sup>th</sup> Echoes. I didn't know until I read the history just how bad things really were. I thought that it was just standard Army procedure. I can only say that our own medical section organization was just as confused.

There were four of us doctors that had just come in there from Randolph Field. And I will tell you that we knew all about it because we were just out of school, we had read all the books, and we knew just exactly how to examine and determine who was going to be capable of flying. Most of our duties to start with had to do with doing physical examinations on flying personnel. And of course, you remember all those immunizations. Nobody had immunization records and you already had half of them somewhere else. But, of course, we started over and you got them all over again.

\* 23 May 1942 – My Opinion of White I picked up a little of the American fighting spirit today on one of my physical exams for combat crew. This particular man is from Boston, is 26 years old, played football for Duke three years. It is easy to recognize at first glance that he is far above the general run of soldier. I inquired why he didn't take cadet training, and he replied that he had considered it but decided that he'd rather be a gunner. That struck me as being a little out of the ordinary. He said that he volunteered the day war was declared to try to avenge the death of his best pal at Pearl Harbor. He doesn't want one Jap, he wants at least a dozen. And he was just on edge all the way through the examination for fear he might not pass. He appears to be a fine clean lad. I'm going to keep my eye on him to see how he turns out.

\*7 June 1942 Did I ever miss the boat on that guy I was going to keep my eye on a couple of weeks ago! His service record came through yesterday and it revealed that he has been AWOL almost half of the six months he has been in the Army. Did I ever fall for a real snow job!!!

I think that was fortunate that that happened to me right at the beginning, because that sure taught me a lesson that I didn't know as much as I thought I did.

One of my first days at Wendover I certainly remember as one of the exciting things that happened, my first B-17 flight. I'm sure that a lot of you fellows remember the

same thing. It was with Lt. Ryan. He was one of the first pilots at the time that had ever flown a four-engine plane. He was checking out 3 pilots this Sunday afternoon that had just finished flying school and was checking them out in rotation as co-pilots. And they were just as new at it as I was. And I wrote:

\*26 April 1942 – First B-17 Ride Had my first ride in a B-17 today. We flew over the salt flats for a couple of hours. Lt Ryan was pilot and three of the younger pilots were taking turns as co-pilot. I had been looking forward to this first flight a long time. When one looks out over those wings from the air, it looks like a city block flying around.

If any of you got in a B-17 yesterday, you thought how small it is.

\*1 August 1942 - Cost of Living Chanute Field 12 noon - 1400 hours After all the planes landed we were taken to the mess for a late lunch. We were served a huge steak, potatoes and gravy, a nice salad, asparagus, canned pineapple, milk, raisin bread and blackberry pie ala mode ..... for 25 cents.

When we arrived in Thurleigh, I didn't make a proper note at the time, but two years later on that anniversary this is what I wrote:

\*8 Sept 1944 11:00 P.M. – Arrival in England It has occurred to me that at this moment exactly two years ago we were getting out of the G.I. trucks for the first time at Thurleigh. We had first touched foot to English soil in the late afternoon at Grafton-Underwood because the airdrome at Thurleigh was not ready. It was cold and wet, the blackout was rigid and pitch black, we stumbled into all the ditches and hit all the mud puddles trying to find our barracks. There was a large chandelier flare hanging in the sky which had been dropped by a German reconnaissance plane and we knew that Jerry was sending a welcome especially for the 306<sup>th</sup>. This was the war zone and we were all wearing our trusty 45's on our belts. We were prepared to handle any Jerry who dared to show up. We couldn't understand why the English laughed at our gun toting and we were thus convinced that the English didn't know there was a war on. But we were fully prepared to show them how a war should be fought.

As a doctor, I'm naturally going to talk about things from a medical viewpoint. But there must be some general interest in the medical aspect of War, or else MASH wouldn't have been on TV for so many years. That's not to imply we were a MASH unit – far from it. We had neither a Hawkeye nor a Hot Lips, but we did have a Houlihan. But what we did, I think we did well and I make no apologies for doing a little bragging about our Medical Section. Medical coverage was provided by the combined effort and input from a superb group of doctors in the squadrons and the service group supplemented by a most conscientious corps of medical enlisted men. We were simply lucky on the draw, far above that of most Groups.

Three of us originals are here. We were lucky on the draw because we got six excellent doctors who would work together and did the job. Most groups weren't that fortunate. Dr. Munal is here. He is the one who lasted through the whole time that they were at Thurleigh. He was at the 368<sup>th</sup> for a little over a year until he became Group Surgeon for the rest of the time we were there. An excellent man. Dr. Sam Simpson is with us. He was with the 423<sup>rd</sup> for quite a period and also just an excellent man. The

other doctors are not here. One is deceased, Dr. McKim. Sgt. Houlihan is with us. He was the right hand man to the surgeon of the  $367^{th}$  – an excellent enlisted man, very dependable, and we all have our wives with us, except Dr. Simpson whose wife is deceased.

\*10 Oct 1942 – First Combat Casualty Yesterday Lt. Seelos signaled that he had a casualty aboard. His waist gunner, S/Sgt. Chapman, received a 30-caliber bullet through his chest and has been here in the dispensary in critical condition. The whole attention of the hospital has been focused on him. We filled him full of serum, and last night we called in a British blood transfusion unit to give him blood. It is gratifying to see how our medical corpsmen took hold in a real emergency. It is just the first time that they have seen a seriously injured patient. Three or four of them have practically fought for the opportunity to sit right by his side to watch every movement and administer to his needs. Late this afternoon we had a cargo plane come in to evacuate him to the General Hospital at Oxford. That was quite a super-dramatic event, the first air evacuation in the E.T.O. Capt. Munal and three enlisted men took him down there along with three other patients.

\*11 Oct 1942 Munal is back from Oxford and says the patient is fine and is being made quite a fuss over because he is one of their first real battle casualties, the first to be flown there in a plane, and also because he was injured in a Fortress. I am very proud of our bunch here for the care they gave that man as a patient. Munal ran into a big dance at the Oxford Hospital on Saturday night and had a whale of a time. He was the hero who had brought in the Flying Fortress casualty. (The Sgt. died 4 or 5 days later.)

We had to use the hospital at Oxford for the first three months. It was about 65 miles away and took about 2 ½ to 3 hours to get there by ambulance. It was quite a problem. Several of our patients had to be evacuated by plane. Then a hospital moved into Diddington and we were very happy about that. I have a note here:

\*28 Dec 1942 – New Hospital The new hospital at Diddington is open now and we shouldn't have to be going all the way to Oxford anymore.... Already we have four patients there. Went up there this afternoon to see the place with Capt. Wright, the S-2 officer at the time, and also to look over the nurse situation for our New Year's Eve party. Many of the nurses look pretty bad, but beggars can't be choosers, so they say, so I guess we'll invite some of them to the party.

Which leads into Topic A on most any military installation. From earliest history, ever since the first Army was ever organized, sex has been a matter uppermost in the mind of soldiers and a problem to commanders, particularly in occupied countries – and was England ever occupied! With most young English males away in North Africa, South Asia or on the sea, there was created a vacuum which young Americans were ready and eager to fill.

The concern of commanders in England became acute when V.D. became rampant and began to affect the combat effectiveness of our men. Within a matter of weeks, our hospital was almost overflowing – particularly combat crews – living dangerously and throwing caution to the wind and nor availing themselves of protective measures available. This was true of young flying officers as well as enlisted men. One

non-flying enlisted man was rolled in London for all the money he had and got both gonorrhea and syphilis. Let me add that I have looked over the audience and I don't see a single person that we treated at the hospital for that reason. Some of our own medics were just as active in these amorous pursuits.

\*11 Dec 1942 – Brookins Escapade One of our most dependable medics, a corporal, is considered quite a demon with women. The payoff was some time ago when he went to bed with a married woman in Bedford, whose husband was supposed to be working that night. Unfortunately for him, the husband came home unexpectedly and our corporal went out through the window taking the black-out curtain with him as he ran down the street in his underwear carrying his clothes on his arm. He lost his hat somewhere along the line and hasn't found it yet. It was several days before we learned why he had such a terrible cold for three or four days.

Through a series of lectures, every means of prevention known to us was vigorously promoted.

\*16 Nov 1942 – Longfellow method: Officers don't have V.D. Lt. Col Streeter, 1st Bomb Wing Surgeon, called us Group Surgeons up to Headquarters for a meeting today. The main purpose of the meeting was to tell us that General Longfellow desires that "officers not have venereal disease." In other words, he wants them treated on the sly but called something else so as not to be a reflection on their reputation and affect any allotments that they may have made. This amounts to a direct order and of course I will have to comply, but I find it offensive because it shows partiality to officers in a medical matter that is not available to enlisted men. Officers are declared by Army regulation to be gentlemen, and they should be expected to conduct themselves as such. We have had six officers with gonorrhea, and every single one thus far has volunteered that it was all due to his own carelessness and considers himself a sort of lesson to the other fellows, and blames nobody but himself. I think the big boys are barking up the wrong tree when this sort of "ostrich attitude" is adopted. The rate continues to increase, but hereafter, obviously, the rate of officers will fall to zero and the rate of "colds" will increase.

We entered into a series of lectures which I mentioned a while ago about how to control this situation and to use the preventive measures that were available to the fellows. One of which, to anyone who has been on a military installation in the U.S. knows, is that the major leave or pass centers have a prophylaxis station in an obvious place. Prophylactic stations were denied to us in Bedford because the city fathers said, "That's an insult to our women; they don't have V.D.". So we did the best we could by sending an ambulance into town on liberty nights located at some strategic point to serve as a makeshift prophylactic station.

But one night our two medics who were operating the station in the ambulance took two women into the ambulance for purposes other than prophylaxis. I found out about it the next morning and summarily busted them to private – one all the way from PFC and the other from Corporal. It wasn't that I was a prude about such pursuits when off duty, but we had tried to impress all our men that when on duty they were expected to conduct themselves in a professional manner. This episode pointed up the indication that perhaps it hadn't been made clear which <u>profession</u> we had in mind.

But just as in other sections, some of the romances lead to marriage, a couple within the first year. To one of the wedding receptions we were all invited, held in a large tent on the lawn. You ladies will be interested in the fact that wartime austerity made a proper wedding cake impossible. At this reception, the bride's table was graced with a perfectly gorgeous production constructed of some type of paste material over cardboard boxes, and of course completely inedible.

But sex among armies overseas is not a one way street -

\*30 Sept 1943 – Officer's baby back home A young 2<sup>nd</sup> Lt. came into my room for advice about his wife who had just had a 10 pound baby girl, but it brought him no joy. He was not at home at the time he calculated that conception took place. I suppose this is just one case of many that we'll be seeing before this is over. This poor man was almost beside himself with anguish. I had little to offer him but a sympathetic ear.

As you know, flight surgeons were required to do a minimum of 4 hours flying per month – most often it was more. With a doctor on board, pilots seemed to particularly enjoy buzzing everything in sight and some were real artists at it.

\*7 March 1943 – Flying with McKay Went flying with McKay today. As long as I have known him, I don't believe I have ever flown with him before. He is without a doubt the smoothest pilot I have ever flown with. We "beat up" all the airdromes in the country, flew formation with everything in sight, made tight turns on the wingtips and everything that a B-17 is not supposed to do. But McKay can do it with the greatest skill, and not scare me a bit. It was a pleasant but wild afternoon.

\*17 July 1943 – Sugg's Farewell Flight This afternoon I went for a little flight and it turned out to be the scariest one that I have ever made. It was with Lt. Sugg who was going up to the replacement pool to return to the U.S. after finishing his 25 missions. It was his farewell flight and he was hell bent on beating up the airdrome and hedge hopping everything between here and Burtonwood. He even got down in the open fields and climbed up over the trees at the edge and down on the other side. He climbed up over a 100 foot chimney and down so quickly that it threw us against the roof. That sort of thing is not for me. It just isn't proper to fly a plane weighing 25 tons at 200 miles an hour at zero altitude. I don't intent to ride on any more of these farewell demonstrations. (Lt. Sugg was killed in an aircraft accident back in the states.)

Battle casualties, of course, caused us a great deal of concern. There weren't as many casualties that came back as there were casualties that the Germans had to treat. But still, they caused us a great deal of concern. Frostbite was a real problem to us. We didn't know really how to treat frostbite. And the biggest problem was that we really didn't have good heated clothing at the beginning of the war. And what we did have, our people didn't know how to use too well. Oxygen or anoxia was another problem. We didn't have as good oxygen equipment at the beginning as we had later. And particularly enlisted men would be careless about the use of oxygen. Several of them would pass out and be a real hazard to the whole crew trying to revive them.

The medical department had one distinction with our own little contribution of the war effort. We had an English stretcher that had been left with us that was designed to mummify a wounded man for removal from the plane. He was more or less handled like a log getting him out of the nose of the plane. We weren't furnished any equipment by the Americans that equaled it and we were able to demonstrate to visitors from the Surgeon General's Office just how smoothly this worked. It became standard equipment and before long we had it as regular issue. Though that was not as big a contribution to the war effort as the development of the chin turret, it still was something that we were proud of in our medical department.

As Russ Strong mentioned in his history, people that were brought back dead caused us really more concern and upset our fliers more than just about anything, even the loss of planes. There was always hope that some would survive, but a fellow who came back dead, that was pretty permanent. The ones who affected us most were Pappy Grimes and Raymond Check. They were older men. They were leaders, everybody looked up to them, everybody knew them and it was really quite a blow when they were killed.

I had a letter just the other day from Maj. General Del Wilson, the first time I'd heard from him in 40 years. One of the things he mentioned was this same thing. He had flown Sgt. Tropiano and me down to Lands End when the people went over St. Nazarre at a low level and the plane landed down there. He mentioned the queasy feeling he got of stepping over the dead body of a man we had to fly back to Thurleigh.

As we got on into 1943 and the trauma of repeatedly facing heavy combat losses from flack and fighters, genuine fear of combat began to take its toll on the flyers physical and emotional stability. It became one of the greatest responsibilities of the medical officers to judge when a man had become truly unsuited to fly. Time after time, flyers might come back in a state of emotional shock after a particularly rough trip, swearing they'd never fly again, yet loyalty to the needs of the group itself made them willing to go on the next mission. Sodium amytal was a medication which we tried to use judiciously to provide sleep for those who needed it. Alcohol was a favorite of many.

I made a mistake in judgment on flying fitness myself that I still think about after these 40 years. One night over a drink at the Officer's Club, Jack Spaulding confessed to me that he had become afraid to fly. So what else was new? I didn't really hear what he was saying even though he was a friend and my very first roommate at Wendover. On his next mission he ran into Capt. James Johnston coming off the target causing 2 planes and crews to go down. I had just put Johnston back on flying status for this trip after a severe cut to his hand which I had myself sewed up about 5 a.m. on New Year's Day after he had cut it trying to open a can with a knife – the only casualty of the New Year's Eve party.

We simply at that time had not the experience of how to deal with this sort of thing. I'm sure my concern over what had happened did a great deal to color my thinking about the developing need to establish procedures to handle combat fatigue. This, I'm sure, led to my boldness in speaking out as time went on about flying fitness and treatment procedures. The development of the use of Rest Homes for battle fatigue or hospitalization when necessary saved a lot of combat men.

Within the next few weeks, the losses and casualties kept piling up and the flyers came to realize and freely discuss the fact that they had only two alternatives – to keep

flying until they were shot down and take a chance on becoming a P.O.W., or just refuse to fly anymore. It is still a source of amazement to me how relatively few chose the latter course under the circumstances. By spring, the Clay Pigeon Squadron, starting out with 9 planes and crews, had lost 27 or 300%.

\*6 March 1943 — After the attack on Lorient today and the loss of the crews of Capt. Ryan and Lt. Tunnell, there is left only one of the original crews in the 367<sup>th</sup> squadron – Capt. Buckey's. I hope they send them back to the states. I can imagine what the psychological effect it would have had on me if I knew I was the last man. The fellows are calling Buckey the last of the Mohicans. A kid I feel sorry for tonight is Sgt. Schamming, one of Ryan's gunners. He missed this mission because he was in the hospital for a minor ailment, and he has just about gone mad. I am snowing him under with sodium amytal. He swears he'll never set foot in another airplane. Time and time again we have had to handle solitary crew members who have been left behind. Most often they would prefer to have gone down with the rest of the crew. A combat crew develops a powerful bond after several months of flying together through the hell of combat.

We doctors had been talking to anybody who would listen to us that it was imperative to offer a third alternative to the combat crews – a stated tour of duty – a goal to strive for. The reply always was they couldn't be spared. My genuine fear was of a wholesale breakdown in morale. Col. Putnam heard what I was saying and was sympathetic, but helpless because of pressure from above. I wanted to document some facts about the situation and Col. Putnam encouraged me to do so, put it down in writing and he would send it on to higher headquarters. With Col. Putnam's help, we found in his file a remarkable directive from General Eaker, of Bomber Command, and signed by him, dated 3 weeks before the first combat mission was ever run, as follows:

\*18 Sept 1942 – General Eaker Quote "Of this I am certain, and you can count upon it, that as long as I retain command of this organization, a combat crew must be told what their combat expectancy is, and further they must be told that when they have completed that period, they will never again be required to man a combat crew station in an airplane on operations against the enemy".

So on 12 March 1943, I made this the first paragraph of a letter to General Eaker and more or less said, "General, Sir, you said this six months ago and haven't done anything about it. What are you going to do? And I quoted another page or so of statistics to explain the situation. Of course, I was not a military officer. I was a civilian in the military, and didn't know any better than to challenge the brass. Sometimes that's fortunate when you don't know that you can't do something then you can go ahead and get it done. To everybody's surprise, when it hit Gen. Eaker's desk, a favorable discussion was held on this subject. About three weeks later, a combat tour of 25 missions was established. I can't take all the credit for that because coincidently, the pipeline for replacement crews began to flow a little better, so the opportunity was there to release the combat veterans.

Another problem that concerned us doctors was pure flying fatigue, also exhaustion of the ground maintenance crews.

\*3 May 1943 – Fatigue The Captain who served as the lead bombardier on the last mission was found in his room last night crying like a baby. He was complaining of being tired and "fed up". All week he had been flying quite a bit. Friday he went on a high altitude practice mission, Friday night he sat up most of the night figuring out the problem for the mission next day, got up early for briefing, then flew in the lead ship. He stated that for the first time he didn't even put on his parachute because it was "too heavy". He said that part of the time he didn't even fire his gun at enemy planes within range because it was "too much trouble". We put him in the hospital here and will get him off to the rest home for a week tomorrow.

About noon, Lt. McGoffin came in complaining that he was just plain tired and wanted to spend a day or so in the hospital getting rested up. Mac is considered one of the most stable and reliable fellows in the 369<sup>th</sup>, and when he breaks down like that, there has to be something wrong. Although he has had some harrowing experiences lately, I don't feel that it is from fear at all but that he is having just real flying fatigue. Mac feels it's because they have been flying too many practice missions lately. Everybody is dragging around taking very little interest in anything. Also the maintenance crews. I took a long gamble and asked Col. Putnam to come down to the hospital to talk to McGoffin to see if Mac would tell him what he told me about too much flying, etc. I don't know whether Mac has the answer or not, but I figure if I can bring the Group Commander and a respected leader among the pilots together on neutral ground to talk things over, then I have done my best to get to the bottom of this thing. I do have a feeling that we are sitting on top of a bombshell from a psychological standpoint.

In May, 1943, command got to calling most missions "maximum efforts" and canceling all passes and calling people back from passes. This counteracted all procedures we had developed for treatment of individuals who were truly suffering from combat or flying fatigue and for prevention of same. So after much discussion among my medical associates I fired off another letter up through channels, which is quoted in the history, condemning the practice of calling back crews from passes for missions that were not truly an emergency. Again this letter got considerable discussion but little action at the time. We did learn that the so-called maximum effort pressure was coming all the way from General Arnold in Washington.

Manning had warned me that those letters would get me kicked upstairs and this proved to be prophetic.

\*14 August 1943 – Impending Disaster A couple of days ago I remarked to Capt. Erb that I had a feeling of impending disaster. Last night I found out what it is. Longworth told me that Lt. Col Streeter is about to be relieved of his duties as Surgeon at First Bomb Wing and that I am one of three that are being considered and argued over for the job and that I am in the lead at present. I can't think of a worse job in the Air Force than being Wing Surgeon, except maybe medical inspector. It would carry a promotion, but I would much prefer to be a major in my present assignment than Lt. Col. at Wing. I did something this morning that I have never done before. Col. Putnam had been transferred to Bomber Wing as Operations Officer. I wrote Col. Putnam to ask him to use his influence up at Wing to block any consideration of my transfer. I don't know if

that may have been a mistake. One who interferes with assignments in the Army usually comes out at the little end of the horn.

When I reported in to Gen. Williams, he said to me he didn't care if I knew even how to put a damn bandage on a finger, what he wanted from me was to keep him advised about the flying condition of the combat flyers. My thought was that he had put me in the wrong position to do that, but he did give me assurance that crews would no longer be called back off passes to fly missions. I found out about two weeks later that Col. Putnam was the one who was agitating for me to be transferred to Wing Headquarters. So I had appealed to the wrong individual.

We were concerned about what happened to returnees when they went home. One thing that happened was that some of these fellows had just decided to quit for no good reason. We found in some instances that these quitters were going back and the Chamber of Commerce would organize a parade and treat them like conquering heroes returning from the war. That had a very bad effect on the morale of our fine people here. But there was another type also:

\*23 May 1944 - Youree's Dishonorable Discharge We have just received the disheartening news that Capt. Pervis Youree has been given a dishonorable discharge for flying formation with a commercial airliner back in the States. Youree was the seventh officer in the 306th to finish his 25 missions, and that was back in the days when it was a real distinction to live and to tell about it. On several occasions, his plane was very badly shot up and on his 21st mission almost didn't make it, after which he cursed all flying and swore he'd never fly again. Yet within a week he was right back at it again and finished up in spite of a real case of operational exhaustion. He died a thousand deaths for his country just like a lot of other fellows. But now a court of officers back in the States called him a disgrace and a dishonor to the service because he daringly flew close to a commercial airliner. Even though he was young and immature in some respects, and occasionally exhibited poor judgment, he was an excellent flyer and did a fine job in the capacity for which he was trained - fighting the enemy. And it seems to us over here that it should take a much more serious offense than flying near a civilian aircraft to make him a dishonor to his country. The governor of Oklahoma has appealed to the President to set aside the sentence and I sincerely hope he does. This seems to me just an example of increasing tension between the chairborne Army back home and the soldiers returning from combat. However, I realize some of our returnees are making public nuisances of themselves, it works both ways. I'm a little blue about how some of these fellows will ever adjust to a normal society. We have spent three years now and billions of dollars training our lads to be killers and live by their daring. Can we reasonably expect them to return home and become good little boys overnight - or ever?

Now, I'm happy to report that all Capt. Youree needed in maturity was just about three more years. He became an attorney and has been an attorney for 31 years in the small town of Wagner, Oklahoma. And just recently his daughter has joined him in the practice of law.

\*5 July 1943 – No Observance July 4<sup>th</sup> Celebration A mission was run that day but the actual unofficial celebration of the holiday took place last night. About 11:30 somebody fired off a rifle. Somebody else came out and answered him, and before it

ended there seemed like dozens of them. They were even firing Tommy guns. But surprising as it may seem, nobody was hurt, and they ended up by going into the barracks, singing the "Star Spangled Banner" (soberly) and going quietly off to bed.

There was considerable discussion about the second anniversary party. I have a comment or two about that from the medical standpoint.

\*10 Sept 1944 – Second Anniversary Party Last night several of us officers from 1st Air Division Hq. went to the big Second Anniversary party at Thurleigh. It was a knock down and drag out in more ways than one. It is said that they spent 2,000 pounds on that party and I don't doubt it. The Group was stood down for the day and all the officers and enlisted men really cut loose. Capt. Nugent from Bassingbourn was over there to take care of the medical situation while the local medics joined in the celebration. And there were plenty of medical situations to be handled. A jeep turned over and cracked a skull, there was a broken clavicle, all sorts of cuts, bruises and bloody noses. To top it all off one man committed suicide. It isn't known what was behind that, but it is said that he put on his best uniform, went out into a dispersal area and shot himself. He was a 2-year man. There were so few combat crew people there that I knew of who started out with the group. It would have been so much more meaningful if we could have had our fellows back from the German prison camps for the party. In later years when veterans get together and discuss the various parties that were held in the E.T.O., the 306th can top them all with the "cuttin' and shootin" they had at the Second Anniversary party. May the next one be held in the USA.

I am glad to say that our parties are no longer as wild as that Second Anniversary.

Just to illustrate how people can sometimes operate really by the book and maybe go too strong:

\*12 May 1944 – Ambulance to Crash At Thurleigh the other day there was a crash just off the runway, and the flying control officer called the dispensary and requested that Major Munal send an ambulance to the crash immediately, which he did. After things settled down, Munal called the control officer and asked why he didn't utilize the ambulance which was already sitting right by the control tower, whereupon the control officer replied, "The regulation says that an ambulance is to stay by the control tower at all times."

This next directive was in the last year that we were there. It came down from higher headquarters. It wasn't my idea, but I had the responsibility to administrate it in our division.

\*14 Feb 1945 — Sulfadiazine Prophylaxis — We have now been giving sulfadiazine on a compulsory basis ½ gram per day as prophylaxis for colds for about 3 weeks. Naturally, as with anything new, there are bound to be all sorts of objections and complaints attributed to the drug. At one station they were avoiding using it because it was found to make the flyers sleepy during their afternoon classes. The adjacent base wasn't using it because it kept the men awake at night. It has been responsible for poor landings, loss of weight, and marked obesity. A lad at Kimbolton was AWOL because he missed his bus due to shortness of breath from having taken sulfadiazine. But what is killing the program at most bases is the rumor that is getting around that it has a

depressing effect on a bodily function of great concern to virile young men. When the idea gets around that it might decrease their sexual capacity, true or not, the program is dead.

And I might add, that it was just as well, because it had no beneficial effect. We know no more about preventing colds now than we did 40 years ago.

Now the last one I'm going to read is on a more serious note. In checking back, I found that I had made 7 pages of notes of things that went through my mind on Memorial Day, 1943. Comments about my personal feelings about people that I knew, my friends, that had been shot down. Of course, some of them we knew were dead, others we didn't know if they were dead or alive. We didn't have much information at that time about who was in prison-of-war camps. And this is not some of the glamour boys, but this is about the enlisted men. This has to do with doctor - patient relationship, and it transcends the difference in rank from a Sergeant to a Major:

Wilson Elliott – A High Compliment I shall never forget that morning just before he left on a mission that Sgt. Wilson Elliott pressed a bar of chocolate into my hand and insisted that I accept it in appreciation for some small treatment that I had given him, and added that he wanted me for his "family doctor" when we all got back home. He was such a kid. He worshiped the very ground Casey walked on. You have to be a doctor to appreciate such a high compliment from a 19 year-old enlisted man.

And this is one of my memories, little treasures, that I thought of on that Memorial Day in 1943.

In closing, let me say that I am proud to have served with the 306<sup>th</sup> Bomb Group. You are proud too, or else you wouldn't be here. Chances are that not one of us asked for duty with the 306<sup>th</sup>. Probably, like me, you had never heard of it when you were assigned back at Wendover or as a replacement in England.

I learned to work with people far different from me. I learned how to work with people I didn't like and use the capabilities that they had – it's our differences that enrich us – it affected my life. Some of you may have been unfortunate to draw dead-end jobs where there was little chance for advancement. Others like myself were pushed into jobs and responsibilities bigger than we were and were forced by circumstances to grow into the job. Whether you were a squadron clerk, a cook, a medic, an ordinance man, an intelligence officer or had the ultimate duty assignment – that of a combat flyer, either enlisted man or officer, we accepted the responsibility of our job and did the best we could. That's why we are proud to have served with the 306<sup>th</sup>. God Bless America.....