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*Medicine and Duty: The World War I Memoir of Captain Harold W. McGill, Medical Officer, 31st Battalion CEF.* Edited by Marjorie Barron Norris. (Calgary: Calgary University Press, 2007. xxii + 379 p., ill., maps, tab., index. ISBN 978-1-55238-193-9 \$39.95)

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Avec ces nouvelles pages, Rawling livre un brillant exercice d'histoire des mentalités. Il évite le cynisme, car son art est d'exposer en laissant le lecteur juge, au risque d'être mal interprété. Il faut donc remplacer la première édition de la *Mort pour ennemi* par la seconde.

YVES TREMBLAY

*Ministère de la Défense nationale*

***Medicine and Duty: The World War I Memoir of Captain Harold W. McGill, Medical Officer, 31st Battalion CEF.* Edited by Marjorie Barron Norris.** (Calgary: Calgary University Press, 2007. xxii + 379 p., ill., maps, tab., index. ISBN 978-1-55238-193-9 \$39.95).

A growing number of First World War memoirs and private correspondence collections have surfaced or resurfaced in Canada during the past two decades. Although widely varied in detail, scope, and depth, each of these sources enhances our understanding of how the conflict was perceived by contemporaries. Dr. Harold McGill penned his war memoirs in the 1930s, but for economic reasons, his book was not published at that time. Marjorie Barron Norris, the author of *Sister Heroines: The Roseate Glow of Wartime Nursing, 1914-1918* (Calgary: Bunker to Bunker, 2002), came upon an early draft of McGill's manuscript at the Glenbow Archives nearly seventy years after it was first composed. Further searching revealed the existence of a more advanced version of the manuscript in the possession of one of McGill's children. This second discovery was the basis for Norris's edition, prepared with the assistance of Professor Patrick Brennan, a First World War historian at the University of Calgary.

McGill, who after the war served as a Conservative Member of Parliament and Minister of Indian Affairs, found the time to record with unrivalled lucidity his war experience as a battalion medical officer. Obviously based on wartime diaries or notes, McGill's account of his service with the 31st Battalion, spanning the years 1915 through 1917, is characterized by a steady rhythm that beats in unison with the collective pulse of the battalion. As medical officer, McGill was in an especially good position to get to know the 900 or so men who filled its ranks at any point in time. With great humility he recalled displays of strength and weakness, courage and fear, victory and heartbreak.

Like so many of his compatriots in the Canadian Expeditionary Force, McGill was not a professional soldier, but it is clear that he took his duty very seriously, and his belief in the Allied cause remained unshaken even several years after the war—at a time when many began to question its

purpose. Indeed, McGill reminds us that it was possible to dread the sight and smell of smashed bodies and to mourn lost friends without losing one's faith in the belief that Imperial Germany must be defeated at virtually any cost. McGill himself saw more than his share of men draw their last breath, but he did not question the fundamental purpose of the war. Like so many other Canadian soldiers of the time, he lived from day to day and even hour to hour in the front lines. With the knowledge that his own life might well be lost with little warning, McGill learned to appreciate the peaceful moments that punctuated combat on the Western Front.

*Medicine and Duty* has much to say about key issues that are now subjects of debate in First World War historiography. One example is the theme of combat stress. We read in the memoir that cowards rarely suffered from 'true' shell shock. Instead, McGill explained, shell shock was a condition that normally affected only the most courageous soldiers, men who continued to subject themselves to danger at the same time that their bodies naturally felt the urge to break and run. Thus, while McGill strongly believed in traditional notions of courage and cowardice, he also accepted that there were limits to what ordinary men could endure. His views contrasted somewhat sharply with other medical officers, such as Sir Andrew Macphail, who famously wrote that shell shock was "a manifestation of childishness and femininity. Against such there is no remedy."<sup>2</sup>

Today many Canadians espouse the mythology that their country achieved the transformation from colony to nation on the slopes of Vimy Ridge. McGill implies that soldiers of First World War may not necessarily have shared this belief, even if veterans of the war later embraced it after the 1936 completion of Walter Allward's monument atop Hill 145. McGill noted, quite correctly, that Canadian troops did not capture the ridge in a vacuum. Not only was the Canadian effort part of the much larger British battle of Arras, but even the four Canadian divisions that stormed the ridge were bolstered by direct Imperial support, including elements of the 5th British Division. "I take pains to explain this," McGill wrote, "because I feel that we Canadians have not been over generous in giving the due and proper share of credit to the men of this fine division from the Old Land for the part they played..." (p.261).

Anyone with a general interest in Canada and the First World War will find *Medicine and Duty* well worthwhile. In the academic sphere, medical historians and military historians who are interested in soldiers' culture and trench life will likely consider the memoir to be especially helpful as a research source.

ANDREW IAROCCI  
*Canadian War Museum*

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2. Andrew Macphail, *The Medical Services* (Ottawa: F.A. Acland, 1925), 278.