Medicine in WWII

Medical treatment during World War II built upon the advances that were mad in the Great War. Preventative measures of during the war included the use of DDT on civilian and military personnel for delousing and preventing typhus: To fight malaria quinacrine hydrocholride was given to soldiers with their rations four times a week: Soldiers were taught proper sanitation in regards to food, water purification and waste disposal.

The chain of treatment offered in WW II started with the soldiers, who carried with them first aid packets that contained sulfanilamide (sulfa) powder, tablets and field dressings. Combat medics also treatedmsoldiers at the site of injury and then sent them on to the aid stations, located 300 to 500 yards behind the front line. At the aid stations litter bearers aided the soldiers in reaching the clearing stations. At the clearing station, the patents were triaged; less serious patents were sent to evacuation hospitals, and the more serious were sent to the field hospitals.

World War II saw advances in blood transfusions. No longer were direct transfusions needed, as it was learned that blood could be stored for an extended time. To aid in this process, the blood donor Service of the Red Cross was organized in 1941.

Penicillin was discovered in 1928, but WWII brought about a need for companies to develop a way of making the medicine on an industrial scale. Penicillin was used in mass after D-Day. A Kentucky solider reported using penicillin for the first time in a POW camp on the eastern front in 1945.

WWII brought about a better understanding of how to treat shock. Colonel Edward Churchill discovered that shock was not only due to the loss of blood, but also to the loss of electrolytes.