

Antarctic Deep Freeze Oral History Project
Interview with Edward N. Ehrlich, MD
conducted on December 1, 1998, by Dian O. Belanger

DOB: Today is the first of December, 1998. This is Dian Belanger and I'm speaking with Dr. Edward Ehrlich about his experiences in Antarctica during Deep Freeze I at Little America.

Good afternoon, Ed, and thanks so much for talking with me.

EE: Good afternoon. I'm ready to go.

DOB: All right. Tell me something about your background: where you grew up, where you went to school, what you decided to do with your life. I'm particularly interested in any of these experiences that might have pointed you in a direction as exotic as Antarctica.

EE: Nothing in my early background would have pointed in that direction. I grew up in a big city environment in Detroit, and I was just one of the kids in the neighborhood. None of us had very far-reaching aspirations. I think most of us—we were good kids in those days. We used to play ball in the alley and stuff like that, go to the movies on Saturday as a gang.

Somewhere along the way, I think in high school, we became interested in science, joined the science club, wrote in their science magazine in high school. And it seemed that with that sort of interest that one naturally would gravitate toward going into medicine or some related field, and that's the way it worked out with me.

I didn't go very far afield. I grew up in Detroit, and I thought in terms of going to a college, I didn't think any further than going to the University of Michigan in Ann Arbor, which is only about thirty-five miles away.

College was kind of interesting at the time because I just missed the draft for World War II, and when I went to college everyone was away—the men were away. The University of Michigan at that time, most of the men there were in the military, the ASTP program, the V-12 program, and there were two dorms that were there for those of us children scholars.

I went to the university when I was only sixteen years old. At that time they had an accelerated program because of the war, and so they had three semesters a year. They weren't quarters, they were really semesters, and by the end of the first year when the war was over, I already was a second year sophomore and I was only seventeen years old.

I think that gives a person kind of a sense of having an awful lot of time. You don't have to really be in a hurry when you're that much the youngest in the crowd.

I graduated from the University of Michigan—I was pretty young when I graduated—went on to med school, and I guess by today's standards I would be a pretty young medical

graduate. I was only twenty-three years old when I graduated from the University of Michigan.

And again, I don't think that I had any thoughts about any kind of grand adventure. I don't think that I had that kind of an itch. I was a pretty conventional kind of guy.

So that to get started in my medical career, I had a problem making up my mind what I wanted to do. At one time I thought I wanted to go into surgery, and I had doubts when I began to work with surgeons in med school and stand for long hours holding retractors, and then going and lifting bandages and smelling bad wounds. And also I don't think I liked the early hours that surgeons seemed to keep. They started rounds at six o'clock in the morning, and I'm not that kind of morning person.

In those days, the common internship was a rotating internship. Now we go into specialty internships starting right from the outset. So I was in a rotating internship. I asked to take surgery as my first rotation, and I decided then I wasn't going to be a surgeon and went into internal medicine and spent another year at a county hospital.

And then, I think, I became dissatisfied with the educational experience at the county hospital. We didn't have much supervision, and we had a lot of responsibility. I think that bothered me a little bit. And one has to make advance plans if you're thinking in terms of post-graduate training, and the draft was breathing down my back, and I thought, well that isn't such a bad thing because if I go into the military, then I would have some opportunity to make arrangements for doing something better in regard to my post-graduate training.

And that's the way it actually worked out because I got called up—I had joined the Naval Reserve—and got called up somewhere around July of 1954 and was assigned immediately to a ship that was operating out of Long Beach, California. I spent a year on the ship, and then they were going to put the ship out of commission. We were involved in the decommissioning, a kind of a boring thing particularly for a medical officer, but I had to think in terms of my next duty assignment.

I saw a notice about the Antarctic expedition, and just in passing said to my captain, "Gee, that would be kind of interesting." He said, "Well, why don't you do it?" And he said something about a lot of people always say "It's kind of interesting but," and they have all sorts of practical reasons. I guess even today I take a look at people who have bumper stickers that say, "I would rather be fishing," and think, well why in the hell aren't you fishing?

So I think that was what he gave me back in those days. You know, if you think it would be interesting, why not check it out? You know, I've got a career and I've got to finish my training, and all sorts of practical reasons. He says, "That's the trouble with a lot of people is that you see the opportunity for something that's different, something for adventure, and

it does involve some bit of chance, some bit of sacrifice, uncertainties, and you find all these practical reasons for saying no."

Well anyway, his goading got me to respond in a positive way, I guess, and I said, "Okay, I'll go take a look and see what it's all about." So I volunteered, and they called.

I was surprised because in the Navy they have a lot of medical officers in the regular Navy that are much better qualified in regard to Antarctic duty than a guy who's hardly wet behind the ears and has had nothing but a year of internship and a year of internal medicine experience. I don't think those qualifications would necessarily be suitable to a situation of isolation where I'd think some additional skills would be needed, particularly surgical skills.

Anyway, they called me up. They accepted me for the expedition and said that they were going to have me go to—

DOB: How old were you at the time?

EE: Let's see. In 1954 I would have been twenty-six years old. They said they were going to arrange a cold-weather training program at Naval Hospital, Bethesda, and I arrived there early in the summer of 1954—in '55 I guess that would be. Yes, in 1955 after a year in the Navy.

They really didn't have a program. All they did when I arrived there was they put me on call in their emergency room, and I wound up sewing up high-ranking naval officers' kids who had gotten a laceration on the chin and stuff like that. They didn't really have any kind of a training program.

In the meantime I had very, very urgent telephone calls from the chief petty officer, Aldrich, who was really trying to deal with the logistic phase for our medical needs back at Davisville, Rhode Island, where all the grand logistics were being attended to. He said that we had absolutely nothing to take down there as far as medical supplies and equipment.

The task force really seemed to have let us down in regard to providing for our medical needs, and he didn't have the rank he felt that was necessary in order to be able to make an impression. Well, yes, I was a lieutenant junior grade, but at least I did have a stripe-and-a-half and he was a chief petty officer. So I went to the task force and said—

DOB: One minute. How can you account for the fact that they didn't make better decisions?

EE: I'll tell you, getting a little ahead of the story, because when I finally got to Davisville, I saw what had been provided. I think because they had a medical officer on the task force who was a flight surgeon, a regular Navy guy, and I think he was kind of a joke. What he had done is he had provided each of us with what would be a battalion first-aid kit for a Seabee battalion that ordinarily would be operating with medical backup. You know, battalion aid stations are operating under combat conditions. So we had nothing but some bandages and adhesive tape and things of that sort.

In addition to that he had ordered, and we were going to get, twenty thousand two-ounce bottles of medicinal Coronet brandy and a thousand bottles of the Navy pharmacopeia bourbon, which was called Old Methusalem, and also fifty-five-gallon drums of alcohol. Well, that was the medical supplies that were really being provided for our isolated period in the Antarctic.

Now there was another medical officer who had been selected—he had volunteered, again another reservist—no better qualified than I was except in regard to his primary interest, but he was an academic, Dr. Ike Taylor. He, I think, was at that time drafted from Harvard Medical School where he wasn't really doing much clinical practice but was involved in ion transport. That was my impression that he was a laboratory physiologist by major interest, but of course as an internist I'm sure he did have some clinical contact. But again, he was no better qualified for that kind of isolated duty than I was.

And he really had family responsibilities that he felt would keep him in the Washington area as long as possible, and he really said, "Listen, I'd like to defer to you, and if you could take care of it, whatever you guys do is fine with—people, we've got to do something."

So I was in contact with Ike by telephone, and when I got to Davisville, Ken Aldrich, the chief petty officer, really laid out the deficiencies that we had in regard to medical supplies and equipment. We had really to establish and then to supply two separate medical facilities: one at Little America and one at McMurdo Sound. We were really starting from scratch.

So Aldrich actually was on the spot continuously, and he knew the Navy ordering system, he knew how to get the funds that we needed, and actually the task force just provided for whatever necessary funds that we required.

I then arranged to be at the Naval Hospital, Newport, Rhode Island. I lived in Newport and was at the hospital three days a week where I felt I ought to do pretty much general surgery, orthopedic surgery, and whatever other skills I could gather in a period of six months that might be useful in the Antarctic that had been neglected in my medical education up till then.

Then I got to Davisville and worked with Aldrich. We went over whatever each thought our needs would be, and at one time we started walking through the Naval Medical Supply Depot looking at the bins just to have some kind of a tangible reminder of something that we might be able to use. We had to think in terms of what are the resources going to be. Are we going to have running water? No. Are we going to have electricity? Yes, we'll have electricity. Could we have an x-ray machine? Yes, we can have an x-ray machine, but the one they provided had pretty low power and we found after we got down there that it really didn't satisfy our needs.

We had to have surgical equipment, we had to have a Coleman-fired—it looked like a locomotive, but it was a Coleman-fired autoclave for sterilizing our instruments and things

of that sort. Laboratory stuff. Yes, what are we going to do as far as the laboratory? We wanted to be able to type and cross-match blood, we wanted to have things for being able to draw blood. We're not going to take a blood supply but we certainly had healthy volunteers for a situation like that if needed.

One of the big hazards down there in the past has been fire, and what do you need if there's fire? You need lots of intravenous fluids, and where are you going to keep intravenous fluids? Well, we found that our crates of intravenous fluids would just fit up in the rafters of the ceiling of our hut, and so we could store fairly large amounts of those things where they wouldn't get frozen.

Well, that was a long and difficult process of putting things together and trying to get our supplies and equipment so that we'd be able to function in some kind of fashion under the conditions that we anticipated in the Antarctic.

And then in the background there was always this worry, what are we going to do with all of that booze? But the word was being passed out to the guys who were working pretty hard and were already facing up to a long period of isolation, and there was this background suggestion, wait till we get down on the ice, everything will be different, and then they would sort of give a knowing wink to that supply of booze.

So I had the impression that that medical alcohol was going in some way to be used in lieu of having a legitimate kind of club down there. And I think the guys had that impression, that once you got down there that the stuff would flow reasonably freely. But that was something that I was kind of concerned about, just how we're going to go about dealing with that alcohol. And as it turned out—

DOB: Can I come back to the alcohol situation? I've got a lot I'd like to ask you about that because it's a topic all of its own.

EE: It is a topic all of its own, and it's one that required a lot of thought and concern.

DOB: In the end, aside from alcohol, when you got there did you say, "Oh, we forgot" something or other or you had way too much of any particular thing that you anticipated a need for and didn't really need?

EE: It turned out that we had things that we didn't use but that were part of insurance. For example, I don't think we did use the intravenous fluids that we had because we didn't have the kind of trauma or burns that ordinarily would have required it, but it was something that you had to have.

I think the biggest deficiency was in regard to our x-ray equipment, and it didn't have sufficient power to be able to take even routine x-rays. I think the other thing, McMurdo Sound had a dentist and we didn't, and my dental skills were very limited.

DOB: So you were—

EE: I was the dentist, yes. I had a quick course in dentistry at Newport Naval Hospital so they had taught me how to do some mandibular blocks and inject the right places in order to be able to pull the teeth. I was able to put in some temporary fillings, but in the last analysis I did a number of extractions down there.

I had an appendectomy I did down there, and I'll tell you that was a very difficult and trying day for me.

DOB: I'm going to ask you about that, too.

Was the medical equipment that you brought with you pretty state-of-the-art for the time?

EE: Well you know, we're not talking about the Mayo Clinic now, so that the state-of-the-art—I mean even today if one said state-of-the-art and they went to a situation like that, you're not taking MRIs and you're not doing BCRs and things of that sort. So you have to think in terms of basic fundamental supplies, and I think from that point of view, what the Navy was able to provide was adequate. I wouldn't want to call it state-of-the-art, but I think that considering the conditions, considering the fact that we had a very short time without any prior preparation to get things together, I think that our sick bays were very, very reasonably well equipped.

DOB: Would the same kinds of attitudes prevail today? I mean to run through, now what could go wrong there?

EE: I think the biggest inadequacy is in regard to the person who has the responsibility, the responsible medical officer. I think that the situation did have a determining impact upon me, as far as my ultimate career decision, because you kept thinking in terms of what if, what if, what if.

For example, what can you anticipate in a situation like that? Well, trauma, common trauma, a ruptured spleen. You don't have to be a great surgeon in order to be able to deal with someone who's got a ruptured spleen. So I was not even in a situation where I could consider myself to be an even minimally adequate surgeon. I had no real surgical training, and I wasn't able to do major surgery. What if someone has a perforated peptic ulcer? These are the kinds of things that a young man, even though we're taking pretty healthy people, could have.

So the concern about having to deal with uncertainty was a very telling experience for me. And even today I question the kind of thrust that there has been toward having generalists, generalists, generalists. That's what the thrust now is in medical education. Primary care doctors, family physicians who are supposed to do it all, and I think in a sense are even being discouraged from seeking specialty consultation if not by their training then by their HMOs, but they must be operating in a state of uncertainty very frequently.

It bothers me even as I am a medical educator to have a resident or a fellow come up to me in the morning and say, "Hey, I was thinking about calling you last night because I was wondering about" Well why didn't you call? Why would you have wanted to continue to deal with uncertainty rather than getting the help that you needed?

But I think to some extent our training is one which encourages people to not really express their uncertainties. I think that a lot of times our students if they express such uncertainties are downgraded. They're supposed to be very positive and know it all and be able to do it all, but that's not the reality.

So I was really poised to become a subspecialist where I felt that at least I would have a very defined area in which I could be pretty expert and have a minimum of uncertainties as I dealt with sick people, and maybe the Antarctic experience had something to do with that.

DOB: Did you think at the time that what if I need medical attention?

EE: I didn't, but it came up when I talked to the Surgeon General at the end of my tour. The Surgeon General and Navy called me in to talk about things in general, and they were talking about how do you—they even had bases the next year that had five, seven, twelve people, and again, a medical officer at each one of these bases. I said, "That's crazy." He said, "Well we can't have people out there in an isolated situation without having medical care." Then it occurred to me, I said, "I was there under that situation, and if I had to deal with it, I think other people could, too."

There are all sorts of risks that people have to take, but I think that that's really the tail wagging the dog to have a medical officer—and actually in Deep Freeze II there were bases where the medical officer was the senior officer and so he was the base commander, even though he had no experience in regard to having a command situation.

I think that people are really afraid to get on the line as far as having people take risks or taking risk, and here the risk was a practical one, a reasonable one. All right, yes, you don't have medical officers at a base with five people, you don't do it—or seven people.

And my appendix was out, so I guess that was one that I wouldn't necessarily have to worry about. But if I had had a serious problem—and Ike Taylor did have a medical problem during the time that he was there. It was the middle of the winter, and movement between Little America and McMurdo Sound wasn't possible, and I got a call from this corpsman who said, "Ike's having a heart attack." Well he really wasn't having a heart attack, he was having a problem with an arrhythmia that is really fairly easily treated. We talked about it over the radio, and I think Ike knew how to take care of it himself. I could reassure the corpsman that he wasn't getting a line from Ike, but the thing was taken care of.

But yes, the doctor over there had a problem come up, and there was no one really there to attend to it directly.

DOB: Tell me about Ken Aldrich. I know you thought highly of him personally. I think I want to know what does a medical corpsman do, what does a medical corpsman know, what's his training, and in your particular—

EE: Medical corpsmen, generally they're of a high caliber. They have to pass a pretty—they probably take a test called intelligence or aptitude or anything else, and based on the results of these tests, certain opportunities open up. I would recall that to be a corpsman you have to rate pretty highly first of all as far as your general abilities.

Corpsmen get basic corpsman training and I guess that consists of a little bit of physiology, some first aid. But they also select specialties, so some of them might become operating room technicians, others may be laboratory technicians. Some of them eventually—sooner or later they're going to have to get trained for independent duty, meaning that they're going to be the equivalent, I think, of a physician's assistant today. They're going to be out there by themselves in a situation where they're going to have to make medical decisions and provide medical care.

DOB: Say on one of those small bases?

EE: Usually there should be a doctor at least close by that they can consult with even by radio. But the Navy has a responsibility for providing medical care to the Marine Corps, so that whether you're a medical officer or corpsman, if you're in there long enough, you're going to be assigned to a Marine unit. My recollection is that Aldrich was a field corpsman with the Marines, and I think that you get some pretty tough experience.

Also independent duty at sea. A destroyer may have a first class or chief petty officer as the sole medical representative aboard a ship. The guys call him Doc and the guys come with their medical problems, and he takes care of them.

Now if it's something that he thinks is beyond his capabilities and if some kind of transfer is possible, they'll try to get him to a facility where they can take care of the person, but sometimes he's stuck out there all by himself.

So corpsmen have a lot of responsibility and I think generally, because of the caliber of the person that they choose for a corpsman, that they have a great deal of respect from the men that they serve with. And I think Aldrich was a guy that the people in the unit did respect.

As a person who had no experience in the Navy and I learned pretty quickly, no one had to tell me really that you don't know what's coming off in this Navy. You don't know anything about it really, don't act like you do, and just hope you get a good corpsman and listen to him and do what he says. You can make the medical decisions, but let him make

the decisions that relate to what goes on in the Navy and how to deal with Navy and supply system and whatever else goes on. And you get some lessons in regard to dealing with the men, too.

Anyway, corpsman is a pretty key guy in any

DOB: And he worked with you sort of daily?

EE: Yes, we had almost daily contact. The other thing is we shared another non-medical interest. We both were hobbyists, and from our boyhoods we had developed an interest in building model airplanes. So we spent a fair amount of time in our free time touring the hobby shops in Providence and buying what we thought we needed for the year.

DOB: Was that your responsibility to buy hobby stuff?

EE: For myself, with our own funds. But what we did when we got model airplanes, model airplane engines, some tools that we might be able to work with down there, is that we very carefully packed them and labeled it as very, very delicate medical gear, fragile—

[Laughter]

EE: —so we'd be sure that that box would get down there. We were pretty well occupied in whatever—but we had a lot of leisure time, and doing a lot of craft work. I still have this picture of Aldrich back at our laboratory where we had a dental drill mounted, and he used to use the dental drill as I would use a Dremel today for some of this craft work. We found a use for all the equipment down there.

DOB: [Laughs] That's great.

EE: So we got along pretty well in that regard. We had shared interests and we bummed around together in Providence. I don't think we ever had a kind of relationship where I'm the officer and you're the enlisted guy. I was the doctor and I had a certain responsibility, and he was the corpsman who knew the Navy and he had a certain responsibility. So a lot of what we did was a matter of just sharing ideas and getting down to sharing the responsibility for getting it done. My name had to go on it, but he'd say, "Sign there."

[Laughter]

EE: And I would sign with confidence.

DOB: How busy were you doing medicine?

EE: There was not much. A lot of the guys during the winter when we didn't have much to do would just come in simply to say they wanted to chat. But people would come in with headaches or people would come in with minor complaints, things of that sort. We had a

few guys who really had severe anxiety reactions and they had to be bedded down for a few days. And I mentioned that I had to do an appendectomy, had teeth to pull.

And another thing, I had learned how to do one operation and the guys wanted it. That was to do circumcision, which is not really a very pleasant kind of operation on someone who is an adult, but I did a couple of those and that kept guys bedded down—at least they'd have to be bedded down during the post-op period for a day and then up around rather gingerly. And I thought that was the only justification for doing it would be that, well, it's good to have to light the autoclave and to get equipment ready and to get people—

I had a young corpsman down there was really a good kid, and so there was actually Aldrich and I who were present during the logistic phase, and I shanghaied this young guy from the operating room at Newport Naval Hospital, and he was an operating room technician. I was really glad to have him along, and he got along very well with the guys.

DOB: Who was he?

EE: His name is Don Watson. We've lost contact because he doesn't come to the reunions. He lives in Buffalo, New York. A nice young man. He must have been about eighteen, nineteen years old at that time. He was just in as a reservist and I thought that he was planning on staying in the Navy as a career. But we started talking about the Antarctic thing when I was working in the operating room when he was a technician. "Don, come along. You'll love it. We'll have a great time." So he decided he'd do it, and I was glad to have him.

Aldrich had a problem and his back went out on him late in the year, and he was pretty much bedridden, so a lot of things Don had to pick up on. Eventually we had to evacuate Aldrich with the first arrival—that would've been in October. So he left Little America before we did, and I didn't see him again until I got back to Davisville. He tried to get up a few times and his back really kept him pretty well bedridden and disabled for several months before we could get him out of there.

DOB: Tell me about this appendectomy. Walk me through it. How would you do this, how can you make it clean enough and all that stuff?

EE: At the Naval Hospital at Newport, I did a lot of work in general surgery, and I think one of the major problems we had to deal with was either appendicitis or assumed appendicitis. I think the attitude in the Navy was, well if you think it may be appendicitis, and we have the facilities and this guy's going to go out to sea, you may as well do it. Get the thing done.

So we had a lot of appendectomies that were being done at the hospital with very, very competent surgeons there to supervise. So whenever they had to do an appendectomy, they would call me. There were no residents at the hospital at that time, so I might have scrubbed in on maybe twelve to fifteen appendectomies, and at first as assistant and then

taking over as the surgeon with a supervisor surgeon there serving as my assistant, rapping my knuckles when I was doing a bad thing. So that I at least had done that, but even then I had help in the operating room. I had someone to give anesthesia and stuff like that.

This young man developed a bellyache, and I guess nausea and vomiting, and he had some tenderness in the right place for it to be concerned about appendicitis. I could do a white count on him, and I did a white count and it was slightly elevated. And I said, "Well, he's got symptoms that suggest appendicitis. He's got tenderness down in the right lower quadrant, his white count is slightly elevated, and he had a very slight elevation of his temperature." And I said, "Well, this guy could well have appendicitis and I have to make a decision."

So I talked about it with Don and with Ken and I said, "You know, if his white count keeps going up, I'm going to have to operate on this guy," and his white count went up.

DOB: Over what period of time?

EE: Over a twenty-four hour period that we were watching him pretty closely. And the pain didn't go away. So anyway, that meant I could do it under spinal, and I could do a spinal and the autoclave is—right in our operating room you've got this thing going. But anyway, you have to start by autoclaving your instruments, it was a long day, doing the spinal, getting the patient draped and all of that stuff, and then going ahead and doing the appendectomy. And then after the appendectomy is over—

DOB: How long did it take?

EE: It probably took me about an hour-and-a-half, a little longer than it ordinarily would take. The guy was strong and the anesthesia was beginning to really diminish so that it wasn't a matter of him really feeling much, but his muscles were getting tense and it took a lot of physical effort to try to get the peritoneum sewed back together. Each stitch had to be placed pretty carefully. I didn't want to perforate bowel and things of that sort.

It took a while, and then, after it was all done, I had to nurse the guy. And then after I saw that he was stable and everything was okay, I had to take the drapes and sheets down to the—take care of the laundry and make sure that everything was So it was a long day, and one of us had to stay up with him just to make sure things were okay.

It was a normal appendix, by the way. It was a normal appendix. And you know, surgeons are kind of sneaky guys. They never really will admit to something not being the way it should be, if you're a real surgeon, and so if the appendix looks okay, then well, did you notice there's a little bit of injection at the tip? Oh yes, I noticed that. Or maybe there's a little bit of cloudy fluid around it. Yes, yes, sure.

Anyway, I think it was Don Watson said to me—he could look at it and see—he said, "What did the appendix look like?" I said, "It was a normal appendix," and he said, "Well yes,

but didn't it have a little cloudy fluid around it?" I said, "Just can it." He said, "Do you want me to save it so that you can have it really for pathologic diagnosis?" I said, "Just throw it away."

So anyway, it went down as appendicitis acute in the book. But I guess that if you do ten of them, if you're really concerned about not having people have an appendix that is overlooked, that maybe you should find appendicitis maybe seven out of ten times. If you're getting ten out of ten, you're not doing enough appendectomies. I hadn't gotten to do the ten, so I had one out of one which wasn't.

DOB: So what do you think caused the problem?

EE: Oh, he had a viral gastroenteritis of some sort, non-specific gastroenteritis. It must've been infectious because he had a high white count and fever.

DOB: He came through okay?

EE: Yes. I did, too.

[Laughter]

DOB: How long a recovery?

EE: I don't think it took him too long. He stabilized over the day and probably got him out of bed after two or three days, and then probably walking around kind of stooped. We weren't doing any heavy duty at that time. It was during the winter.

DOB: It must've been kind of scary.

EE: It was scary. And again, I'm telling you that the idea of having to deal with that kind of uncertainty had a telling effect. And you don't want people to know that you really have that, but yet they have the feeling that because you're a doctor and the table of organization calls for a doctor and you're an M.D., that you can do whatever a doctor should be called upon to do. And you don't really want to let the people down. I think that, too, is a concern that you're not going to be able to live up to the reasonable expectations of the people who are there. The Navy says there has to be a doctor down there.

DOB: It's an interesting experience for a young man.

EE: It was. I think the other thing that created some problem for me was that I had to pull teeth. I wouldn't want anyone to have to pull my teeth. I have invested a lot of discomfort and expense in regards to trying to salvage my teeth, and I had to pull some down there. I was again sorry that they didn't have better dental care, someone who would be able to do something a little bit more positive than just yanking a tooth out.

DOB: Were there a lot of those?

EE: I may have done about five extractions while I was down there. And I didn't have dental x-rays. I wanted to take x-rays, but I—I won't get into that, but I did take some dental x-rays. I had to take some larger film and go in a room that I could use as a darkroom and cut that in half and then tape it. It had some sharp edges so it was kind of uncomfortable for these guys to put that jerry-rigged piece of x-ray film in their mouth in order to take a picture.

DOB: An airplane crashed bringing back part of a team that was laying out a trail to what would've been Byrd—

EE: There weren't any serious injuries.

DOB: Tell me about the effect of that on the people back at LA 5 and then going out to find the men.

EE: That was before the ships left. The deal was that we had an advance party that was trying to lay the trail out to Marie Byrd Station, and I forget exactly what the situation was, but they were encountering difficulties and weather was beginning to close in. I think finally what the skipper said is, "You guys have gone far enough." There was a crevassed area as they came up from the Ross Ice Shelf to the continent, and I think they had traversed that and actually gotten up on the continent. And so what the skipper said was, "Listen. It's getting late. Why don't you guys just abandon your vehicles and come back in?"

So we must've had one group of guys—they couldn't have carried all the guys in one trip—so one group of guys had come in. And at that time one of the problems was that we had a lot of Otters that had either crashed or had some kind of problem, and we had one Otter that was flying at Little America, and that was the Otter that they used to go out and get these guys, but there was no backup. Also, there was a helicopter, but the helicopter was sick. It was marginally operational, so the backup in case something happened to that one airplane was really not there.

Anyway, I know the plane went out and picked them up.

DOB: How did they get found? Who found them?

EE: After they were down, one of their ships thought that they heard weak signals from—they had one of these Gibson Girl transmitters, and they felt that they were probably down and alive, and somewhere out in the area of the Rockefeller Mountains which was the last they had heard about them. Rockefeller Mountains rise about twenty-four hundred feet above sea level.

So eventually, we had to wait until an icebreaker came over with another Otter, which they were able to put over the side on a crane. But I remember that that Otter had a wingtip

that someone had knocked off, and I think it was a two-by-four protecting the wingtip—it didn't look like a really neat airplane. But anyway, that plane went up and started looking, and eventually that airplane spotted the downed airplane in the Rockefeller Mountains.

When they radioed back and gave us position on that, we decided that we would take the helicopter and go out there and see what was going on. So I was in that party that went out, and I recall that the helicopter wasn't really completely functional. My impression is, looking back, that the rotor was losing hydraulic fluid and there are hydraulic dampeners on the rotors, and that we would go about fifty miles and then the thing would vibrate, and we'd have to come down and then the aviation machinist mate maybe would get out and add some hydraulic fluid.

Anyway, when we got to the airplane, we saw no signs of life. We were able to put the helicopter down maybe about a hundred feet from where the plane was, sort of on the tip of a hill or a promontory, and it looked pretty intact, which was remarkable. He said, "How the hell could anybody put an airplane down on top of that promontory just like that?"

When we got up close, we saw that yes, the plane hadn't sustained a great deal of damage. The landing gear was pretty well gone, the propeller was bent. We looked inside the airplane. No one was there. They had left the site.

DOB: Had they left any word about where they had gone?

EE: No, but we could see tracks. We saw a little bit of blood in the cockpit, and we saw that maybe the pilot had sustained some injury when they had crash-landed. So anyway, the only thing we could do was really take off in the helicopter and follow the footprints.

DOB: They weren't blown over?

EE: No. We kept seeing individual little places where they had stopped, like campsites and so on, and eventually there we saw them trekking along. I don't think they heard us until we were right upon them, and man, they were pretty happy to see us. You can imagine. So we set the helicopter down and there was a lot of rejoicing.

I decided I wasn't going to bring any real medical equipment. I mean if they were really bad—in five days if it was bad stuff, it would be I guess bring a body bag and I didn't feel like doing that, so I had some booze and some chocolate bars I guess is what I brought. But the guys were in pretty good shape, really, and it was still not into real winter.

And it turned out that what their thinking was, was that they knew there was no backup aircraft that was really functional back in Little America, and although the word is that you're supposed to stay with the aircraft, they knew that they could walk to the edge of the Ross Ice Barrier, they would be able to find it easily, and once they were there they'd just be able to follow it along. If necessary they'd be able to kill some seals and find some

food because they had very limited rations that they were able to take with them. But they thought that was their best bet and I think they probably were right, even if they had not been rescued.

One of the interesting things to me and to my family was that the aviation machinist mate who was down in that airplane was a kid from my neighborhood in Detroit, and the Detroit papers had stuff about "This kid is down," and "A Detroit doctor involved in rescue." So there was a lot of hoopla back home about the . . . the guy's name was John Floyd. I saw him after I got home, but his family I guess was pretty relieved to find out that he was okay.

They made a television thing of that. It was awful. The crash of something . . . what was the name of that program? Something theater. Aldrich sent me a tape of it. It was really hokey and it was really—I mean it was all fiction. The characters were unrecognizable. It was good for the Navy, but I think that if you had any sense of truth and reality, that it was kind of difficult to watch. It didn't have any bearing on the reality of the situation other than an airplane had gone down and these guys were rescued.

DOB: So that story had a happy ending. But there was at least one man

EE: One guy came in and you see, the ships had not yet left, and one guy came in and said, "Doc, I've had it. I didn't want to say anything to the other guys, but this is just—I'm a nervous wreck, and there's no way that I can or want to winter over after this thing is all over." All I have to do is hear something like that and I say, "Yes, well, if that's the way you feel, we'll find someone and we'll take care of it, and I don't want you to have to put up with any unusual burden in that regard," so I talked to the skipper and recommended that the man should be sent back.

[End Side A, Tape 1]

[Begin Side B, Tape 1]

DOB: Despite the happy ending of the plane crash and with the one semi-casualty of the evacuee, that story ended well. But there was Max Kiel, who did not have a happy ending. Tell me what happened there.

EE: I wasn't there, but I talked to the guys afterward. They were out laying a trail. They were out there with heavy equipment. The tractors that they were using, D-8s, about thirty-eight tons, and it's all right, you can traverse these areas with dogsleds, but it's a lot different situation trying to get over it with heavy tractors pulling heavy trailers laden with tons of construction gear and stuff like that. And that had to be done, so when they laid the trail, the trail had to be in anticipation of a tractor trek taking the supplies and equipment for establishing a base on Marie Byrd Land.

So there they were out there, and what they did is they would probe ahead when they got in an area that looked like it was crevasse country, and they would probe and if they were lucky, I guess, they would find a place where there was a crevasse. They had a demolition person with them, and then once they located a crevasse, they would blow it open, and once blown open, they would use the Caterpillars to fill in and then they would go over and proceed. So it was kind of slow work, and they were in an area where they were just surrounded by crevasses. It was bad news.

In talking to one of the men who was out there, he said that they were just ready to knock off for the day. They had found a crevasse and they blew it open and they filled it. And then as he was backing the tractor away, all of a sudden the tractor backed into another crevasse that they didn't know was there, and they actually may have even traversed it, and down it went. The tractor, I don't think it stopped until it was down about a hundred and fifty feet, and the tractor crushed and Max was caught in the crushed tractor. One of the guys went down there as close as he could get and saw that there was nothing but mangled wreckage, and Max was down there and either dead or no way of getting him out of there. I assume that he was dead; it was a pretty bad situation. They came back home, and you can imagine that that was a pretty sobering experience.

One role that the medical officer plays is that guys use you as a sounding board, and they figure that they can go in and they can talk to the doctor. So I had a number of the people who were slated to go out in the Marie Byrd Land construction effort the following spring, and they had real reservations. They were really reluctant, and they said, "You know, we don't see the need for it and why we should risk our lives and so on for some kind of a mission that we don't really understand? Why does it have to be exactly 120 [degrees west], 80 [degrees south] out in Marie Byrd Land?"

Well, you know, I had to talk like a Navy guy, and I told them, "I'm a civilian, really, I'm drafted, and yet I think I have a better understanding of what the duties of a military person are, that this is what you sign up for. And I think as a taxpayer and as a civilian, I would be pretty disappointed thinking that when you guys are put in a situation where you have to do a job, because it's dangerous, that you won't do it." I said, "I don't like that idea. I may get out. I don't want to put myself in that position, but you guys are in for twenty, and I think that you have a responsibility throughout these missions whether you see the need for it or not, that we have an obligation." You know, I talked like that.

Anyway, the guys said to me, "Well, doc, would you go out there?" I said, "If someone told me that was my duty, I would do it." Well they went to the skipper and said that they would feel a lot better—I don't think it was a matter of retribution or anything of that sort—but they went to the skipper and said they would feel a lot more comfortable about going out there if I were to go out there as the nominal leader.

So the skipper came to me and said, "Would you be willing to do it?" And I said, "I don't know anything about stuff like that." "There are guys out there who know what they're doing, and it's just a matter of being there to make sure that people are exercising common

sense and having someone there that the men will feel they have to follow." I said, "Well, if that's the way it is, I'll do it."

So they sent a message—I still have these messages at home—they sent a message back to the task force and it came back pretty fast. "Under no circumstances is the doctor to leave" etc., etc. And you go, whew, that's okay.

So there was that. The guys really were very reluctant—some of them—to go out there and do it. Yet when the time came, they did it and I don't think there was any grumbling. The grumbling was in private. Whatever reservations they had they aired to me, and they never got out any further than that, and then when they had to do it, they did it.

And I think, too, they had good leadership. They had guys like George Moss and Vic Young. I think that there was no concern that the guys had about their leadership abilities on something like that, and they did it. They got out there and they did it.

DOB: How many were on that tractor party, roughly?

EE: You could ask someone like Vic or George. Maybe twelve people. And of course when they travel, it's not like they're sleeping in tents and stuff like that. One of the things that they were pulling on a sled is called a wanigan, and it's got cooking facilities, it's got bunks and stuff like that. But again, it's tough duty, and they're out there blowing crevasses, and it's cold and it's dangerous.

DOB: So there was no evidence of carelessness. It was just one of those unlucky—

EE: No. I don't think there was any evidence of carelessness. I think the only real—looking back, you'd say, "Well, there were branches of service that may have had more experience in these situations than the Navy, and maybe people from the Air Force who had worked in Thule and had worked with heavy equipment may have had a better time of dealing with things like this. But considering the situation, the guys did the best they could." I think that maybe the Air Force and experienced people from Thule would have done it a little differently.

The Navy got it, I think, not because they were the most experienced branch, but because I think there was influence of tradition—Admiral Byrd, and Byrd had a brother in the Senate. But really the Air Force and maybe even the Army had more experience.

Eventually I think, too, they had to call upon some of these people to really help them in regard to laying the trail. So it may have been that there were branches that could better deal with this problem. But there's competition amongst the services, and the Navy won it. They wanted it and they won it. But they got the job done.

The base went up as required at exactly 120 [degrees west], 80 [degrees south], and it was operational, and the guys were able to occupy it and do whatever the IGY had to do in the following year.

DOB: So Kiel, his body was never recovered.

EE: Never recovered, no.

DOB: I'm going to ask you now about alcohol. Before I do that, I need to talk about alcohol at Little America. How do you feel in general about the availability and use of alcohol on the ice?

EE: I have no objection to alcohol being used in moderation under any circumstance. And I think that in the situation here, that there were expectations that had been planted that alcohol was going to flow freely. So I don't know that I necessarily would have planted those expectations myself, but they were there almost like there was some kind of a sub rosa inducement. When you get down on the ice, things will be different. Look at all of that stuff [alcohol] we're taking down there. Well, yes, if that's going to be taken down there, it's only being taken down there for one reason, to be used.

And actually the Navy supply saw to it that we would have beer. I may be wrong, but my impression was that there were fifty cases per man. I think Don [Mehaffey] told me that there was less than that, but a number of us decided we weren't going to drink while we were down there, and we gave up our beer ration. But we ran out of beer after I'd say about six months.

You could see some of these guys, they'd be in their hut playing poker, and some of these guys could go through one or two six-packs easily during an evening poker session. There's a half case right there that's gone just in one evening. So the beer went very quickly, and that was available through the ship's store down there.

In the beginning, the guys were coming in saying, "Hey, Doc, when are we going to get—", and my attitude was no one is going to come here and get a grog ration because they have been subjected to cold or hazardous conditions. I said, "That's not what the alcohol is to be used for." They may call it medicinal, but there's no medicinal justification for alcohol.

So I said, "If it's going to be used at all, it'll be used strictly recreationally," which is against regulations. But our alcohol was officially designated as medicinal, even though there's no such thing anymore as medicinal alcohol.

So I told the captain, "You know, captain, you're going to have to do something about this alcohol because the guys expect it. It's sitting out there, there's a locker behind the sick bay with all of this stuff in it." "Well, yes, but we'll be breaking regulations." I said, "Yes, but you should've thought about that before you made this kind of implied promise." So he said, "Well, you do with it what you want," in a sense. So I said, "Okay. I'm going to set up a policy," and of course the captain would have to accept the policy, and I said,

"What I'd like to do is to put out these two-ounce bottles of brandy frequently at the table for everybody."

DOB: On a regular schedule or as a nice surprise?

EE: We did it two or three times a week, maybe more, depending on the situation. Who knows? But I said, "Okay. I'm not going to be giving out alcohol as a medal for heroes. I'm just not going to put up with that kind of stuff." I think that can just lead to resentment—it just went against my grain. I said, "We'll put it out then on the dinner table, and if people thought ahead that if they did something and were exposed to cold or they got hazardous duty, they were under tension, put it away for that purpose and then you'll have it available. Maybe one of their buddies will be good enough to give them a bottle." They were these little two-ounce bottles of brandy, actually pretty powerful stuff; it was ninety-two proof.

So that was done, and as far as I know, there wasn't any real abuse of that.

The other thing was that we had what was called a Welfare and Recreation Committee, and we had parties arranged when we weren't working, usually on Friday or Saturday night. I told the captain that the guys could come to me and I would give them a supply of whiskey.

I'd give them a supply of alcohol so they could make screwdrivers or whatever else they wanted to make with the alcohol, and that the alcohol would be turned off—no more would be supplied after midnight. If they wanted to sit around in the recreation hall, they could drink their beer if they had it and they could do whatever else they wanted, but I'd give them whatever was a reasonable amount up till the time. So it was strictly recreational.

And no one was given alcohol—there was no giving it to this guy because he was a friend or as a favor or because someone felt that they had done something that was special, and we had no resentments or no concern.

Now the other thing is that I wasn't drinking, at all, and I thought that was necessary. First of all, you never know when you're going to be called upon to do something as a physician, and all they have to do is have even the slightest scent of alcohol, and you're a drunk doctor and whatever else. And I didn't want anyone to think that I would have any cause for abusing my access to the liquor supply.

Anyway, that was the policy and we lived with it very well and there were no problems.

The other thing is we had people down there who had serious problems as far as alcohol was concerned. I don't know what they thought was going to happen when they got down there, but they suffered down there. One of the officers was really having a very hard time dealing with the fact that he didn't have free access to alcohol. It was very difficult, and maybe they thought that once they got down there with that tremendous supply of booze, that I'd turn them loose.

But anyway, guys had alcohol to drink. It was supplied by the medical corps, and you had to really go outside of regulations in order to be able to do it.

After returning to the U.S., when I went to talk to the Surgeon General, he asked me about that and he said, "You know, you broke regulations. You could get in a lot of trouble." And I said, "Yes, but you guys forgot to set up an officers club or an enlisted man's club down there and that was really a dreadful omission." I said, "There isn't any other base in the country where people wouldn't be able to go in and have some access to alcohol. Considering the situation, I think it worked out pretty well, and you should be grateful for that fact."

Anyway, we could've had a near mutiny. But over that one item alone, that really could be a serious source of bickering and dissension, so I think that was—I was glad that we did it that way. And actually we posted this as base policy, that no alcohol would be distributed except as recreational and it would be done at given times, everyone would get the same, free and equal treatment.

So when the Naval Air Corps VX-6 came in in the spring to operate, they felt that they needed to have special rations because when you go flying you're a hero because you're flying an airplane. And they'd come in and they'd say, "Yes, Doc, I just went out there flying my airplane and I want a drink. Our flight surgeon always gives us one." And I'd say, "I'm not your flight surgeon. Go out to the bulletin board and take a look at the rules that relate to alcohol. If your flying is that hazardous, next time when we give out brandy, save it. When you come back" But boy, they really got annoyed, and this is really a petty thing and the sort of thing you have to put up with, I guess, in the military.

I don't know why—my skipper never really stood behind me—but all of a sudden they're telling me I've got to go over to McMurdo for a little bit of rest and recreation, and that I would be relieved at least while I was getting some rest by the VX-6 flight surgeon.

DOB: Where was he from?

EE: He was over at McMurdo up till then. So he came over from McMurdo and I went to McMurdo. So I'm sitting in McMurdo and one morning I was up real early—everyone there had the big eye, couldn't sleep over there, the light and all of that. I don't know what it was; we couldn't sleep. And I was up early in the morning and I went into the mess hall and I sat having a cup of coffee.

Admiral Dufek came over and said, "What the hell are you doing over here?" And I said, "Your commanding officer of VX-6 thought that, I think, he wanted his guys to get into the liquor supply over at Little America, so he sent me over here so his flight surgeon could take care of it for him." So anyway, he practically blew his stack. He had me on the next airplane back to Little America, and he said, "I think your liquor policies are just fine and I want you to go back there." He apparently really dressed down the CO of VX-6 for that stunt.

But it just goes to show the kind of emotional kind of attention that something like alcohol has. It really can be a serious source of trouble. But generally the guys were—we had some guys who really had serious drinking problems, and they got—maybe their buddies gave them beer and stuff like that.

We had one guy, he was a mechanic, and he would go off into the shop, garage, and when the ship's work stopped, say on a Friday night during the winter when we didn't have anything to do for the weekend, he would just drink himself into a stupor. His buddies had to go and get him and bring him into meals and stuff like that, and then he would be ready to go to work on Monday.

DOB: Was the beer free?

EE: No, you had to pay for the beer. There were a number of things—we had to have a little money because we would buy things like toothpaste and candy and stuff like that, and pop. I was drinking pop.

[Laughter]

DOB: You had to drink something.

Was morale your specific responsibility? Did that come to you by default as the medic?

EE: It comes to the medical department. It's either the chaplain or the medical department. I think that the guys know that they can speak freely to people in the medical department, whether it's to me or whether it would be to, say, Ken Aldrich. And then if they went and talked to Ken, he would let them know that he wanted to talk about it with me if it was a serious problem so I don't think it was anything of any concern.

The guys, I think, were a little uncomfortable about the chaplain, in our particular situation. The chaplain, I think, had a tough role at our particular base. He was older than most of the guys—he was probably close to fifty—and the other chaplain at McMurdo, he was a tough act to really try to live up to. That was Father Condit. He had been a professional entertainer, he knew how to just be one of the guys and yet still maintain his dignity as a chaplain.

So this guy was trying to live up to that and here he was a staid and sober Dutchman, from Holland, Michigan, the Dutch Reformed Church. The Calvinists are a pretty sober people, and here he is trying to tell jokes, and his jokes really didn't go over with the guys. I think that he felt kind of isolated from the men, and really realized that he wasn't able to live up—in the back of his mind, I think, he felt a lot of guys were saying, "Why couldn't we have had Condit at our base?" Yes, that's tough.

DOB: What was his name?

EE: Peter Bol.

DOB: How do you spell that?

EE: B-o-l. Yes, he had a hard time. The guys would say, "I don't want to go to his services." "Come on, now, it's got nothing to do with it."

I was rooming with Condit on the way back, and I said, "You know, you're lucky in a way. There are certain functions that you are sanctioned to perform, whether the guys like you or not." It's like my setting a broken leg. They don't have to like me. They can say, "Can you fix it?" "Yes." Well, our chaplain didn't have any of that. The Protestant kids just said, "I don't know. It's a pain in the—I don't want to deal with it." He was a decent guy, and it's just that he wasn't really the right chaplain for the—

DOB: Why was he there?

EE: Maybe he volunteered. I don't know how they pick people. But he was a very—

DOB: Was he in the Navy?

EE: He was in the Navy, yes. Everyone was career Navy except for the two medical officers.

DOB: I'd like to talk about religion a little because in fact on several of the scientific leaders' reports, there is discussion of the importance of having a chaplain and of having religious services available as to morale and the other aspect of it. For example, at Byrd Station there wasn't a chaplain, and there were those who felt that that was a lack. On the other hand, there was one chaplain per station, if that, and sometimes not. So how—

EE: A lot of our men were Roman Catholic, and we didn't have a Catholic chaplain.

DOB: How did they deal with that?

EE: They had what they call rosary services. And I think that the Catholic men felt a greater need, at least for certain functional aspects, there are certain things that they felt that they had to do in order to really feel comfortable. So they couldn't have things that require a priest—communion, confession, things of that sort—but they had rosary service. They could conduct that themselves.

The Protestants could take it or leave it for what I gathered. They did have services but they really weren't well attended, and there was no specific need such as there might be for a Roman Catholic. The Roman Catholics lived without having a priest, and I guess that it was okay.

During the early period, a priest from Boston University, Father Linehan—he's a glaciologist—he came there and blasted some holes in the ice and did some readings, and while he was there he conducted services for the Catholic boys. So they were glad to see him. Yes, so for the major part of the winter, there was none.

The other lack was a more practical lack—a dentist and they'd send a dentist over in the spring and he was busy for a long time. So the soul and the teeth were neglected at Little America.

DOB: Was this Father Linehan, he was a glaciologist?

EE: A Jesuit and a faculty at Boston University.

DOB: Was he a glaciologist?

EE: Yes, he was a legitimate scientist, and he was down there for scientific reasons. And it just happened that he was at Little America and a guy said, "Listen." He knows that he may have to take care of some priestly duties, so he had some sacramental wine, whatever else he might need, so he was able to have really a full-fledged service. The fact that he's a Jesuit doesn't mean he doesn't know how to do that stuff.

DOB: What about other than Christian beliefs? How were those people served?

EE: Nothing. Nothing.

DOB: I noticed even at the memorial service in Denver that this was conducted in the name of Jesus, and it struck me that—

EE: Well, the people of other faiths and the people who are maybe atheist or agnostic or whatever else—and this is a country that's supposed to recognize people's rights to have those views—it is uncomfortable, I think, to have this idea of a state religion being imposed. I think it goes against the grain of people who really have concerns about our constitutional rights and things of that sort. But that's the kind of world that people know, regardless of other faiths have to live with, that it's a country where the majority is Christian, and they tend to ignore the sensitivities and the concerns of other people. I don't think it's malicious. I just think they take it for granted that that's the way it is.

DOB: Probably a little different today do you think?

EE: I don't know what they do in the military now. Do they have a priest and a Protestant minister and a rabbi and a mullah at every base and a doctor, too? I think there are some things that people have to do without, and let them know if they're going to have to do without before they go.

I think there are times when practicality has to really reign supreme. You can't have everything down there, and I think that people may have to give up some of the religious

amenities for the time that they're down there. And actually I think it is harder for Catholics, if they really are religious, to deal with what they consider to be sins and to have to live with transgressions that they feel aren't going to be relieved. But I think it only applies to those who are truly religious in that sense.

Yes, I heard a lot of guys come in and express concerns about stuff that created anxiety, and I never heard one even as I probed being concerned about religious matters when I had to deal with people who were disturbed.

I think that one of the things that may have been disturbing to some guys who felt very anxious was that there may have been some concerns about latent homosexuality. We never had any situation in which there was anything overt, but I think that some of the tension that was there may have been because people had feelings that they really couldn't acknowledge and that really must've been pretty frightening for them.

Again, I don't think that the military has changed in this regard either, except that here these people are in isolated circumstances, living closely like that, and I think that that did create some special tensions.

DOB: For the latent homosexual or the others?

EE: No, no. Mainly the latent. There never was anything overt that would've gotten them into—and I don't even know if these people even understood that that was the source of their concern. If it seemed to me that I was going in that direction when I talked to someone, I would be pretty careful. But it would give me some understanding of what was going on, and sometimes I thought I should isolate the person from the situation. Give them a few days away from it. But I wouldn't tell someone, "Hey, listen, the reason you're having a problem is"

DOB: Not then, anyway.

EE: Oh no.

DOB: You made a very poignant point, I think, in talking about the role of leadership in maintaining morale, I think a correct one, that morale is a leadership responsibility. But you said further that at LA 5 that a lot of such leadership was maintained by lower echelon people. You particularly named Vic Young and George Moss and Ken Aldrich, and I'd like you to comment more fully on the specific leadership contributions of these three, and then address the implied point that leadership was less than forthcoming among those where it should have come.

EE: Well, the commanding officer for MCB Special was at Little America 5, and he was living in the sick bay, which I didn't like. I didn't want him to be in the sick bay, but he wanted to have his own quarters and he had one little room in our hut.

DOB: Whitney?

EE: Yes. He's really a nice man. He's older, and of course I think that kind of is a problem in itself in a situation like that, so he was a little removed from the men just, I think, by sort of a generation and age.

You know, a lot of these older guys in the Seabees, they had been successful in the construction business, they got called up in World War II, and they knew how to get things built and then they stayed in. And I think that he would've been very successful in the construction business and a nice member of the Rotary and someone that would've really been well liked in the community, but I don't think he was really a person who was capable comfortably of assuming a command position. There was a lot of uncertainty and really did not give me the impression of being someone who was willing to assert himself as I think a commanding officer should.

So I think there was a void there, and there was nothing at all malicious about the man. For example, when Kiel went down, the first thing that Whitney said is, "You guys don't have to go out there again. It's too dangerous, and I feel for you guys, and I hope I won't have to send you back there." That's not what I told him. I said, "They've got to go out there. It's our mission."

So I think that from that point of view, a nice man, but he really was not obviously a—didn't have the background and really—in a sense, a lot of these guys in the Navy, they are trained to be leaders when they're an officer. So anyway, he was not really that kind of a commanding officer.

When work had to be done, the guys were out there doing it, leading it, telling guys what to do, and without really ragging on the guys, but just by example. George, big and strong and always out there working with the guys, and always seemed to know what he was doing. That's not so bad. And Vic, the same way.

They used to have meetings of the warrant officers—Vic was a warrant officer at that time and George, chief petty officer and they had a warrant officer electrician and a warrant officer construction and I can't remember all of the rates—but they would have a meeting and they would have to get their mission sorted out. But it always seemed to me that it was George and Vic who were the people who really had to carry out the tough missions in the field, and I think they rose to that responsibility very, very well.

And Aldrich simply by being someone that the guys had confidence in, they could come to, and I think that he helped me a great deal by, I think, transmitting the impression that the sick bay was there and that it was, what would you say, that it was almost like you had some kind of emotional asylum once you entered that place. So I think he set that kind of tone where people could come to him and knew they could come to me and they would be able—because I think of the kind of confidence that the guys had in him, and I think that helped me a lot.

So these were the guys that really, I think to a considerable extent, were important in regard to maintaining morale. And other guys who played important parts, too, and were really good at what they did and I think that got along well with the men. I don't think I ever saw Stroup with a downcast face or really ragging at the guys or stuff like that.

DOB: Bill Stroup.

EE: Yes. The guys got along very well. There was one instance, again, just that again it reflects maybe on our commanding officer. He used to go to bed at night very early, and we used to always worry about some of the parties with the alcohol and stuff like that. The guys would sit around, some of them playing music and get guitars out, and other guys would be playing poker, and sometimes you wondered whether there might be some trouble. He didn't want to hear about it. He went to bed.

So one night, there was a situation—it was just stupid—and one of the officers got into an argument, I didn't even know what it was about, with one of the enlisted men. And this officer was one who walked around with mukluks and had a knife in his mukluks, you know, a big explorer type. Anyway, these two guys got in a verbal disagreement, and he happened to have the knife in his hand and he was pointing it. Well, a psychiatrist would have something to say about even the pointing of a pencil, it's kind of an aggressive thing, but there was no real intention of using it, I know, and I was there. But it was an argument and he was using this because he had it in his hand.

So anyway, I didn't like what I saw, so I took the guy and I said, "Let's go outside. Let's get out of here." There was no argument or anything, we just walked outside. I said, "I think you ought to just call it a night." So he did and went back into his hut.

The next morning, the captain said to me, "Gee, I heard you broke up a knife fight last night." [Laughs] "Skipper, if you'd been awake, you would have known that it wasn't that sort of thing at all. It was verbal, and it just seemed like it ought to be—the best you could do would be to intercede, and it didn't require any kind of physical intercession. Just to go to him and said 'stop it.'"

But I used to hang around at the parties just to make sure that things were going all right.

DOB: You must've written the medical section in the MCB Special report for Little America?

EE: I probably did.

DOB: It just says "by the medical officer."

EE: Yes, I probably wrote it. Maybe I even have a copy of it. As a matter of fact, what the deal was is that when we got back home, they said that one of us had to report to Davisville for debriefing. So Ike again—single guys get this sort of stuff all the time—Ike said, "I've got

a family and I really would like to get back to them, and they'd like me to get back to them."
And he said, "I would really appreciate it if you would be the guy." "Okay, I'll do it."

And yet I managed to get a break en route so I could take some leave en route, and then I went on to Davisville and I wrote the report. I don't remember much about it.

DOB: I got copies of all of those from Dick Bowers, and you commented that isolation really is more of a health concern than cold.

EE: Well, it is. I think isolation is a—we were protected pretty much from the cold, and most of the time we were down there we weren't exposed to the elements. We were exposed to isolation and boredom, confinement, cabin fever. That's a medical term. There you go, cabin fever. So I think that's really the issue.

And I think that again, some people have internal resources, they have interests that can keep them going. I think that maybe some of the guys in our outfit, they were pretty limited. Both Aldrich and I, we had crafts that we did, the Navy had sent down a whole modern library and a lot of other soft-cover books that had been set aside after World War II that had been distributed to the troops. So I did an awful lot of reading while I was down there, and people could read—so did a lot of the guys.

I know in the officers hut, they played a lot of bridge. I got out of it in a hurry because I thought I had more important things to do than sit around and to be the guy who was always called upon to be the fourth, so I didn't want to be that, and I think that the bridge game was disrupted. But I just thought I had better things to do rather than being on call to play bridge.

I played a lot of ping-pong. There were five or six of us who played a lot of ping-pong. I had guys who got me up in the middle of the night. They'd say, "Hey, I've got the big eye. How about a game of ping-pong?"

[Laughter]

EE: Give me five or ten minutes and I'll meet you.

DOB: Just as an aside, tell me about the big eye.

EE: I don't know what causes it, but it was mostly a problem—

DOB: What is it?

EE: Can't sleep. You have insomnia. It's just insomnia, but it seemed to bother people at McMurdo more than it did at Little America. We were below snow. We had no natural light at any time of the year, so that in the morning you turned the lights on and at night you turned them off. It's like winter here in Wisconsin. So we weren't really aware

of the constant daylight when that season came up. At McMurdo they were all above ground and they had windows, then you had light all the time.

I don't know, I found that hard to take even in the beginning. Before we got our base established we were living on the ice and sleeping in tents, and it's really hard to keep yourself in any kind of real time frame. It's kind of a disruptive feeling that you have like a subliminal discomfort. You get kind of hyper after a while.

I remember that when we first got there and there was a lot of activity with people from the ships moving cargo and trying to get things set up, they put up a mess facility right there at the base site, and every six hours I think they served the same stew. So you couldn't even mark time by the different meals. Come and get it, and oh yes, here we go. So I thought that was kind of hard to live in that situation.

Then when I went over to McMurdo for that R&R, I was only there for a few days, but I think I would just lie in bed there in the light of day and I couldn't sleep. So the people over there were really complaining about the big eye. They just couldn't go to sleep.

I think that, oh, we might have had a little bit of it. There are a lot of reasons why people can have insomnia, but it was not an epidemic at Little America as it was at McMurdo Sound. That's all you heard the guys talking about was the big eye. You probably got a sense of other men talking about the big eye. But isolation is a tough thing to—

DOB: One psychologist has done a—or at least one—has done a study comparing being in the Antarctic with the experience of being in prison.

EE: No. I don't think so. I've never been in prison, but . . . now you could say that being in the military in a considerable extent might be then compared to being in prison. Your life is regimented. I think that it's a different kind of mindset that you have, although some of the guys do have this attitude of doing time. It all counts for twenty, that sort of an attitude. But still I think that it's different.

Military life, even within the confines, is not that regimented. You can move around freely and you don't have this feeling that there are people standing over you who have that kind of authority and who can really regiment your lives, and you're subject to that kind of immediate discipline and arbitrary kinds of actions. Even at the best of prisons the guards are not necessarily the most generous in regard to their attitudes towards prisoners. No, I think it's a lot different.

DOB: I think they were talking about the fact that you can't get away.

EE: Well yes, you can't get away. That's right, you can't.

DOB: There's nowhere to go.

EE: You can't. Well, you can go outside. Well, listen. You can go outside. You can't do that in prison. Yes, we did go outside just to get away. So okay, come on, let's take a walk down to the edge of the barrier and we'll see what's going on. It's winter and what's going on there. You can take a walk down there and take a walk to see.

DOB: Even in the dark?

EE: Even in the dark, sure. It's not that dark. You have maybe moonlight or—I don't remember whether there was a moon, there probably was. And you have aurora and you have reflection of clouds, so you could see your way around at least to some extent. But you could get out, and some of us did go out.

But no, I think also that there's this feeling that—it's a secondary feeling, this idea of doing time. But guys in prison, that's the primary. Whereas these guys do have some sense of mission, they do have some sense of duty, they do have some actual satisfaction simply from the idea that they volunteered to do this—it hasn't been enforced. [Prisoners have committed crimes and should have a sense of shame. We could take pride that our confinement was voluntary and served a national interest. Prisoners are considered outcasts. We weren't outcasts.]

So I think it's a lot different from being in a prison situation. And I kind of resent the idea that someone would think that we don't have sufficient internal resources that we feel that being in a situation like that of isolation is necessarily we're so deprived of freedom. You can think, you can read, you can do things, you can talk to friends. If I feel like I wanted to talk to people, I could walk over into the mess hall and have a cup of coffee with someone. I could always find somebody I'd want to talk to.

DOB: So the kinds of people who were the most successful on the ice would be those with those inner resources that understand that—

EE: I don't know. I don't have a meter that can really help me determine the comfort level of everyone that I was associated with. So I'm sure that yes, I would say that those who were most comfortable in that situation were the people who had those kinds of internal resources. So some people probably suffered a great deal more than I did. I had things that I could do that I could keep reasonably occupied.

[End Side B, Tape 1]

[Begin Side A, Tape 2]

EE: My understanding is that the Navy provided the wherewithal so that you could double up on the rations for everyone that was in this thing. The cooks had access to food that ordinarily you wouldn't see, I think, on an everyday Navy menu. So that as long as it lasted, and considering the conditions, we had food that was good. We had things like frequent steaks and stuff like that, and the guys liked stuff like that.

Our guys were terrific bakers, and they were very thoughtful. They had thought ahead and they said, "Well, we'd better have some things that are a little bit special that we can do." So when we had these parties on Friday or Saturday night when the guys would have the liquor and we would be able to have a party, there often would be a buffet and you'd be surprised how creative the chefs were—they didn't call them chefs there—the cooks would be able to put things together. They'd take I guess they would be ham chunks and they would make ham salads and they would make pizza stuff, and they would do a lot of things that were really nice with the limited possibilities that we had. I have movies that show some of the spreads and the guys enjoying stuff like that.

The other thing was that we had wonderful baked goods while we were down there, and I remember that I used to enjoy going into the galley after they had gotten done baking things like buns and bread. I used to like the smell. You know, you've got that yeasty alcohol smell, and it was really pretty nice. Things like hamburger buns, they were all made down there. They were freshly made. I remember we had even whole wheat hamburger buns which I thought were a treat; I don't know about the rest of the guys.

But the food was plentiful. You could make ice cream. We had things like pies and stuff like that that the guys would cook and they would set some aside so that if you came in at night you might, "Hey, is there anything here? Can I have a snack with my coffee?" You know, come and talk to some guys and have a snack and have some coffee and pie or something of that sort. Again, not like prison.

So I think that the food was as good as it could be under the circumstances. You didn't have things like sunnyside-up eggs and they didn't have fruits and vegetables. And I think now at McMurdo I see spreads for Thanksgiving where they've got vegetables and fruit and stuff like that, but we didn't have any. I remember when the planes started coming in in the spring, that we really wanted to see maybe some apples and stuff like that.

When we got to New Zealand afterward, George and Don Mehaffey and I, and I think Dave Canham, a bunch of us just went out into the countryside. There's some beautiful countryside in New Zealand, and we went to a place where there was a lake that was very reminiscent of up here in the north woods surrounded by spruce and stuff like that. And the lady had a garden, and she had wonderful tomatoes, and I can remember that was the biggest treat that we had in New Zealand, wasn't getting a bottle of beer, was getting those tomatoes in New Zealand. It was really terrific.

DOB: Is there anything else that might relate to your role as a medical officer that you'd like to touch on before we back up to just talk about more general impressions of that year?

EE: It's really hard. I think the main thing is that if I had to function solely as a doctor, I would have maybe, if you think in terms of being there for four hundred days, I might've done about two or three days of actual duty as a doctor.

I was one of the officers there, and I had to assume some of the responsibilities that an officer would, so I would take a watch every few days. I'd get up in the morning and check and see what the messages were and get the guys up for getting the vehicles out and things of that sort. So I had some of those kinds of duties, and when there was an all-hands evolution, we all went out and did the work. If it was a matter of going out and digging and looking for supplies, you went out and you dug.

I was just remembering, we had a situation that never should've happened. We were covered by snow, and I can remember that we had a period where the weather got unusually warm, and we started to leak. I can remember we all got up on the roofs of our buildings and we had to start shoveling snow off the roof. [Laughs]

So you had all-hand evolutions where you just got out and did the work with the rest of the guys. And it was the same with everyone there. You had guys who had specialties that were only called upon occasionally, but they had to be there. So for the rest of the time they had to just assume whatever duty or work that was necessary and not really say, "I'm down here to do—I'm an electronics man and that's all I do." I didn't hear that kind of stuff. So I think most of us were willing to pitch in and do what was ever necessary. As I say, if I had to just function as a doctor, I would've had a lot of leisure.

DOB: After a while a lot of boredom probably. More interesting, too, to do something else.

EE: Well another thing that was important in regard to morale, and maybe you've touched upon with other people, and that was the shortwave. I think that everyone really probably made use of it—guys, Vic and George and a number of other people—in the evening hours for us they would turn on the shortwave radio.

They had a map on the wall of the United States, and I think it maybe even had pins in it to show little flags of names of people, so that they might wake you up at a pretty early hour because they would stay there with the shortwave radio and wake up a guy and say, "We've got a guy with a phone patch in Kansas City, and you've got family there. Do you want to talk to them?" Or they would wake me up and say, "We've got some guy who's out in the Detroit area. Do you want to talk to family?" I think that was very, very helpful.

DOB: How often would people get to have a contact with—

EE: Well, I think that during the time I was there I probably talked to folks at home maybe three or four times. Not that much, but enough.

Another thing that was really unusual, when the ships came back in the spring and we got our mail, it all came at once.

DOB: Did everybody get some?

EE: Oh yes. Everyone had mail. I mean if someone didn't, I didn't know about it. But gee, there were just bags and bags of it. I had asked my family to send me a subscription to *Time* magazine and maybe something like *Sports Illustrated*, and so I had all these magazines that came at once and then could look through them from beginning to end, but the news events had already taken place.

I had a shortwave radio, my own shortwave radio, so I could keep up with the news while I was down there. Mostly I'd get Australia, and there was, I think, an arctic service or Radio Moscow, somehow it got all the way back down to us. It was kind of interesting to listen to Radio Moscow while I was down there because events were unfolding at that time like the Hungarian uprising, and I used to listen to the Russians talk about it, their la-de-da attitude, you know, "A few dissident anti-revolutionaries and so on and everyone is now happily going back to work." Now you hear the same thing five days running and you say, "Maybe they're really not happily going back to work."

"Today we're going to take a ride on the Trans-Siberian Railroad," and then they would describe all the towns and in every town, of course, whatever industry there was—the people were doing dancing, native dances in native costumes, everyone was happy—and of course whatever industry was there was always involved in some kind of peaceful, progressive kind of enterprise making the lives of people better.

So I used to think that was kind of fun to listen to Radio Moscow.

DOB: So you were pretty aware of events in the world.

EE: Yes. There was a guy that sneaked in on me and took us all by surprise. Who the hell is this Elvis the Pelvis? So eventually we had some really—you know how things get sort of distorted by shortwave, so we'd get it from the Voice of America or something like that, and we had a PA system and we would have things like *Hound Dog* and stuff like that. We didn't know what this Elvis phenomenon was all about, but that's when it started, while we were down there. So we even heard about that.

DOB: What did you know about the Antarctic continent before you went there?

EE: Very little. Very little.

DOB: When you got there, what did it look like? Were you surprised by anything?

EE: No. I think that, yes, there are certain things there that are spectacular. When you think about going down there at least you have some anticipation, you know what you're going to see. But then I think I had some idea about the Ross Ice Barrier, but when you see it, it's an awesome sight. I don't know if it's necessarily worth the trip, but when you see it, it's impressive.

Seeing penguins on little icebergs floating by, that's kind of neat. I saw stuff like that. So that your first impression is one of it's pretty awesome, so I can see why some people now are going on these tours down to the Antarctic.

As a matter of fact, the University of Wisconsin is going to have a continuing education tour down to the Antarctic next year. Actually, maybe it's the idea of going to the Antarctic, and there are certain things, of course, that are unique and that may be awesome.

I mean things like the Ross Ice Barrier, seeing Mt. Erebus. I think even standing in a place where Scott had stood years ago and started on his trek to the South Pole. These things stir the hearts of many people. So I think all of those things.

But on an ongoing basis, I can see where if I had to stay for that period in Yellowstone or Yosemite, I could look up every day and say, "My God, this is a wonderful place." But what did Byrd say—no, no, Scott, toward the end. "God, this is an awful place," is what he said. I think he said something like that. And it *is* an awful place. There's nothing green, there's hardly anything alive, it's barren, weather is unpleasant for the most part. But the first sight, it takes you, you know, sort of a wow kind of feeling. But after you're there, it's not like it's something that brings joy to your heart.

You know the explorers, there's an explorer mentality and I don't think I have it, and I don't think many of the guys in our outfit—they were Navy guys and they were there for practical reasons. But now that most good places have been mapped, and there's not that much for people to explore, people have to find some kind of vicarious justification for doing things just because they're there. And then that's not enough, so there's got to be something more to justify, and I think that's often an afterthought.

Even as you look back at some of the stuff like Admiral Byrd, I think when he was alone and he would stand out there on the ice in the darkness in the winter, and he would say, "Boy, I really felt like I was in touch somehow with the distant cosmos." It was really some kind of mystic experience that they talked about.

I think I told you, I would stand out on the ice, and I would look out there and think, jeez, is it cold. My nose is running. Well anyhow, after you get back in your hut and you're warm, you say, "What could I have said that would sound like I was not some kind of nut?" to justify the fact that So that's the explorer.

In medicine we have these people, too. They do it because it's there. I refer to some of the procedures that are being done today as the Mt. Everest syndrome, that they do it because they can do it, and it's that satisfaction. Anyway, that's the explorer. I guess we have explorers in many different areas, that romantic spirit of adventure that has to justify their experience. I didn't have that.

The only satisfaction in the sense that's kind of intangible is that it was kind of impulsive that I went, I was kind of goaded in by a commanding officer who said, "Well you're talking even momentarily about that, you have adventure, and then you immediately reject it." So

you say, "Okay. I have the satisfaction of knowing that something like that was offered, and I did it, and then when it comes right down to it, I stood up to it reasonably well." And I think in the last analysis, that's a major satisfaction that I can really derive from it. No mystic experiences, no real sense of adventure that was satisfied, but I think the fact that you have those kinds of resources is an important realization, so that's nice . . . and I carry that with me.

DOB: Do you think the military did a pretty good job of setting up the overall mission and orders of Operation Deep Freeze? They did all this, of course, from Washington or at least far away from the ice.

EE: That's right. One thing that the American military can fall back on is being heavily funded and being allowed to have redundancy, so if there was any question, we got it. So yes, I think that if money had been more limited and people had more experience, they could've been more selective.

But yes, we had much more I think in many instances than we needed. You take a look, if it's still there—well it's not there because it was up at Little America on the ice. But when we had our oil drums laid out in three different fields, as far as the eye could see there were oil drums. I suppose you could be stranded and you couldn't get people in for a while that I think we could've lived there for fifteen years on the oil that was in those drums.

So yes, we had a lot more than we really needed, so when in doubt, you could always get it and there were no problems in those days getting what we needed. But I think if you really wanted to know, I never really had to deal with the intricacies of the military system. I think that guys who actually were involved in the major planning would be able to tell you more about what frustrations they may have had, how much backup did they get from the task force, and was the task force really there on top of things or did they have to fight for every little thing they got. I don't know these things because I never was involved. I know we went to the task force with our medical needs and got a carte blanche.

DOB: I was asking you as a more distant person.

EE: Yes, we got what we needed.

DOB: Tell me about the relationships between the Navy people, officers and men, and the civilians, scientists and others.

EE: They were good. We only had two people down there who were not military. Chet Twombly, Chesney Twombly, he may have just recently died, I'm not sure. Someone told me that at the last reunion, but you never know. He was from the Weather Bureau.

And when you're talking about wintering over, the other is Lloyd Beebe, and he was Disney. Both of those guys were well liked, respected, and Beebe was the guy who had more outdoor experience than maybe anyone who was down there. A guy who grew up

in the outdoors of Washington State and got into this Disney thing because he knew about wildlife and about the great outdoors. Strong and able, and he was willing to expose himself to bad conditions. If he was out there taking pictures, he would put his camera down and work. There was never any question about the fact, I'm here as—you know, he would work. So no question, I think, that he was not only liked but was respected.

DOB: There were no civilian scientists at LA 5?

EE: No. We were there in order to prepare for the—

DOB: So they came later.

EE: Yes, so they came in—see, the International Geophysical Year didn't start until 1957 in July, but in order for them to winter over—and actually Twombly was there for the IGY. And since it started in July, he came in the prior January in order to get in there during the season. So we were there to—logistics sense, in order to establish the bases according to specifications of the U.S. committee for the IGY.

I think Chet was down there as a liaison and to just let the people back home know that things were ready and that things were progressing. He had a little experiment that he was doing in regard to counting meteorites for the radar, and I used to sit with him and count meteorites with him. Sometimes he would have me do it instead of him. He was a good-natured, decent, bright fellow.

These guys, they've been around in the Weather Bureau and they knew how to adapt. I had my really inexpensive, poorly crafted Hallicrafter shortwave radio, and a radio like that which does not have a transformer has a lot of tubes of odd voltage, so the rectifier gave out on my radio. I couldn't use it. So you get something like a thirty-five volt whatever, they wouldn't have that in Navy supply, so Chet took a look at my radio, made a couple hems and hums and whatever, and he then soldered a selenium diode across a couple of the poles on that burned-out tube. It worked fine. So anyway, he was there to help out with a lot of stuff.

If you asked a Seabee to fix something that had any electronic component, they would replace the whole component. I'd say, "How come you're replacing it and not fixing it?" He'd say, "Gee, Doc, them's electronics. You can't fix those things." But I think that probably Chet could've fixed it.

They were good people, and I think that that was the feeling. Never created any kind of fuss, never made any kind of demand. They were fine.

I can remember, though, some of these guys—we were on the ship, and they tried to give the press quarters that would keep them quiet, make them feel like they were getting something special.

I was a passenger aboard the ship going down, and the medical officer was called down and he was given another assignment as the berthing officer. And he said, "Listen, what I'm going to be doing, I'm going to be tied up for a while. If anyone has a berthing problem, just put them off or do whatever you can and explain that I'm busy or something."

Anyway, a guy comes down—I think he was from *Popular Mechanics*—and he was really annoyed about whatever quarters he had been given, and he was really giving it to me. I said, "I really can't do anything for you." He says, "Well listen. You're going to get a bad press from *Popular Mechanics* for this, so do me something." [Laughs] *Popular Mechanics* are going to give us a bad press. So some of these people can be pretty awful.

But the two that were selected to winter over with us were just fine folks.

DOB: You mentioned a few minutes ago on another subject that Little America 5 disappeared after a while.

EE: That's right. It's gone.

DOB: Did you think about that when you were there?

EE: No. I mean the fact that we're building something and it's temporary?

DOB: That it's on the ice shelf and—

EE: I mean that ice shelf looks pretty substantial. As a matter of fact, it seemed to me it was hard for me to understand how it ever broke away, but it must be six or eight hundred feet thick. As you're approaching it, you see these big tabular bergs which represent chunks of the shelf that are broken off. No, you didn't think of that.

We established the base, I would say, several miles, maybe three to five miles from the edge of the shelf, and so we were fairly far from the edge of the shelf. That wasn't anything you really thought of. As far as we were concerned, we were on terra firma, snow covered as it was, but it was firma, and never really thought of the possibility it could break away. That would've been pretty good. At least we'd be heading back home a little early.

DOB: Were you ever truly scared?

EE: Yes, when I did the appendectomy.

I don't think so, because I wasn't necessarily in a position where I would be. I wasn't trying to find crevasses, I wasn't put in a situation where I had to lay my body on the line. No.

DOB: Who was somebody that you met on the ice that you were particularly glad to have there or that you particularly admired?

EE: I think maybe you're more aware of that after you come back after many years and see the people. I know when I go to reunions I always want to see Vic Young, Ken Aldrich, and George Moss.

DOB: Why?

EE: I don't know. Vic is just a guy who was upbeat, sensible. Why, I mean it's hard to know. But I mean he's a guy that you can talk to and relate to. George is another guy. Again, I think that you can already have that idea planted. And Don Mehaffey is another one. I know Don. Don's another guy And some of the men, there were so many guys down there. I remember a guy I used to play a lot of ping-pong with, I really liked him. A guy named Willie Burlison. You don't hear much about Willie.

DOB: I've seen the name.

EE: Another guy that I really—I don't know that anyone really got close to him, but a guy that I really had a great deal of respect for was one of the aviators. I don't think you hear much about Wes Seay.

DOB: How do you spell it?

EE: S-e-a-y. Now a lot of these aviators were flamboyant, and the guys who have got to go on a flight and they've got to have something special to show for it and stuff like that. Wes, I recall, had gone in as an enlisted man and had been selected for Annapolis. And I think he was a guy who had a very sober idea of what might be necessary to have a successful career as a naval officer. He was bright, he was well educated, and he went on and got flight training, and he thought that maybe going to the Antarctic would be helpful. It wasn't sort of the idea of you know—it's just a sober view of the way things really worked in the military.

I know that while he was down there he was studying Russian. He was a guy that was quiet, bright, sensible. You never really heard him stir up any kind of fuss about anything.

I would fly with him with confidence, whereas some of those guys I really would worry about. He was really a good fellow.

I used to wonder, gee, I hope that his abilities are recognized by the military, by the Navy, and that he finds himself in a position where his talents are recognized and used.

DOB: Do you know what happened to him?

EE: No, I don't. I think someone told me that he had died. I don't know what happened to him.

DOB: Do you think he did reach his potential?

EE: I don't know.

DOB: I'd like to ask you some questions about issues that are of concern today and just your sense of things. For example, did you worry in the 1950s about littering the landscape or polluting the air or the land or the water? Things like garbage and waste and fuel barrels.

EE: Not really. We couldn't make that much of an impact. The only time I really had a pretty good idea of what kind of mess we were making was when I would fly, and you could see on the one side from the prevailing wind that there was a lot of soot from our stacks.

The other thing that prevented us from getting an idea of—you get to McMurdo, I thought McMurdo was awful. It really looked awful. There was junk all over, and there was black dirt. When I was there, things were melting and there was water running and it looked kind of like black mud.

Everything was pristine where we were. As a matter of fact, that created a lot of work for us, the fact that the offloading of the ships wasn't able to proceed according to plan because the bay ice started to break. So we had to bring everything up onto the shelf in a big hurry so that the offloading plan—they couldn't follow it and things were just scattered.

And then a snowstorm came and everything was covered, so that whatever mess we made, or whatever we needed to have, you couldn't see it. The Antarctic winds would cover it up in very, very short order, so that the idea that we were defacing the environment was really not very obvious. We had to find stuff that had been buried.

I know people probably told you about that, but my impression there is that we at least had an aerial photograph that someone had taken, high resolution, before the snow covered so we were able to look with a magnifying glass to find the label on a box, and at least that was a starting point. The rest of it was just digging like mining, trying to find things.

But yes, we were covered up so you couldn't see any mess there. At McMurdo they had junk scattered and it was terrible.

DOB: Things get buried today, too, but they worry about it.

EE: Yes, they've got to pack up all that junk and get it out of there. But I don't think we were really—that wasn't part of our mission.

DOB: How about in the 1950s, were there concerns about the living resources? Saving the penguins or the seals or the krill or the ocean fish?

EE: Oh sure. But it wasn't a matter of having a constant awareness. There were penguins there and they added to the environment. They belonged there, live and let live. We weren't thinking in terms of conservation, but we had no need to bother them.

DOB: Well, some did.

EE: Well, we bothered them in a casual sense.

DOB: I mean some took them back home—some killed them.

EE: We didn't do that sort of stuff at Little America. We aggravated some by picking them up and letting them go, and they would run away squawking, and we decided maybe that's not such a good thing to do. The seals, we took pictures of them and let them be. So no, we had no real interest in disturbing the wildlife, but it wasn't I think because of any kind of conservation motive, it was just that there just didn't seem to be any attraction. I mean we weren't going to go and hunt animals, shoot animals. There was no point in it.

There weren't that many animals around. It was good to see anything else that was alive. After we disturbed the penguins, we were saying that pretty soon the penguins were going to be holding signs up that say, "Little America for Little Americans. Little Americans go home." We had that idea.

[Laughter]

DOB: Earlier you referred to tourism, and at the American Polar Society Symposium there was quite a discussion about tourism in Antarctica, and the pluses and the minuses of it.

EE: What are the pluses for the Antarctic? I don't see what the pluses might be for the Antarctic.

DOB: The argument that was raised there was that the kinds of people who go there are not going to disturb the environment, which is a major concern—

EE: That's not a plus, that's a lack of a minus.

DOB: —but on the plus side, they tend to also be people of sufficient position or whatever so that they would go home and call their congresspeople and say, "We need to do this or that."

EE: Are you suggesting we have to go to the moon in order to support NASA?

DOB: I'm just asking for your comments.

EE: I think that you can't stand in the way of free enterprise. And as long as people think that they can attract people and take them down there, they'll do it.

DOB: Should we?

EE: Well, I don't see how you can prevent it, but I think that it ought to be tightly regulated. I know I harbor some resentment because I went down there a different way, but that's not fair. The idea that people on a cruise ship stuffing themselves with good food and all of that sort of stuff, then they brag that they've been to the Antarctic, you feel a little bit of resentment.

But yes, if people want to spend a lot of money and have that satisfaction, I guess people will provide it for them and make a profit from it. Isn't that the American way? But I think that, to some extent, it has to be controlled.

I can't picture though—most of those people who go down there, they're satisfied if they get their feet on dry land over at the Palmer Peninsula. They may want to see the Ross Ice Shelf, they may want to see Mt. Erebus. Some of them may even want somehow to get over to see Hut Point, things of that sort. Well they'd better preserve that. They'd better do that. But I don't see where they can make many inroads. They're not going to say, "Okay, get me a dogsled and let me mush on to Dawson or give me a Sno-Cat" or something like that. They're just going to put their feet down and say, "I was there."

DOB: There are no dogs now on the ice because of the regulations. But there were when you were there.

EE: We didn't have dogs at Little America. They had dogs at—again, I don't think they really were helpful, but the old explorers, they had to be there. And of course to some extent it was the old explorers that got the Navy this commission.

I think that in order to feel like you're really an Antarctic explorer and to really recall the days of adventure and the past, that you have to have the dogs whether they serve a purpose or not. You have to have pemmican, which none of us ever ate, and you have to sit around a sputtering Primus stove in a tent and make pemmican hoosh. Well, that wasn't the way it was now, but there were people who had to have pemmican or people who had to have dogs, but that's really part of, I guess, something that they've lost in regard to the romance that they're trying to resurrect.

We had a dog. They had a puppy that they sent over to us, a young dog, and it would be a mascot. We were glad to have it. It wasn't there more than a day or so when it got out and probably tried to get back to McMurdo four hundred miles away. So we lost our doggie. We felt bad about that. But they said the dogs were there for rescue. I don't think they ever used them.

I was up in Alaska, and of course I went and saw in Denali at the ranger station they had a demonstration with the dogs, and they talked about the fact that they use the dogs for patrol. But the Eskimos, they use snowmobiles.

[Laughter]

EE: I heard the guy say, "Well, you don't have to worry about a dog needing new sparkplugs and quitting on you" or something of that sort.

DOB: But you have to feed them even when they're not working.

EE: Yes, that's right, and there can be problems with dogs. Nothing is really perfect, and I think that snowmobiles are here to stay.

DOB: In 1959, as a result of all this IGY work, the countries that were involved there, as you know, created the Antarctic Treaty which has been in effect since, and it dedicates the continent to peaceful pursuits and particularly science. Do you think that that's possible to continue indefinitely?

EE: I hope so, and I think that scientific pursuits and confining it to that, I think, is justification enough for people to be interested in the Antarctic. The United States' position also is that they make no claim and don't want to recognize anyone else's claim. And yet when I look at a map of Antarctica, I can see where it's cut into pie segments with countries' names.

I'd like to see it just remain—I think the United States' policy is one that I would like other countries to follow, that no one makes a claim and the place is open to legitimate scientific exploration and that's all.

At the current time I can see no reason why any of the resources that are there would need to be exploited, and I hope that they don't have to be. I'd like to see them continue to—

DOB: There's a protocol now prohibiting mineral resource exploitation, and living resources.

EE: There are some interesting questions that can be answered, I think, regarding weather cycles and regarding even continental drifts and things of that sort that many say, "So what?" But a lot of us think that they're interesting enough to deserve our support, so I think that's fine. And I think that's about all I'd like to see the Antarctic used for at the present time. And of course to let some people with a spirit of adventure get their jollies, I guess that's okay, too. [Laughs] It's pretty harmless.

DOB: And it would seem that science serves some political purposes.

EE: People go down to McMurdo and live in the lap of luxury and still have the feeling that they're wintering over like an old explorer, so . . .

DOB: There is definitely a sense of pecking order, is there not, among those who have wintered over as opposed to the rest—

EE: If I could listen to Shackleton or Scott or some of the earlier explorers, they would say, "Hey, listen. You guys lived in the lap of luxury and you think that you wintered over. But how would you like to go in an open boat from Elephant Island to South Georgia?" Well, okay, you guys did it. And Scott and what he had to put up with.

DOB: Have you been back?

EE: No.

DOB: Would you go back?

EE: If I were offered an opportunity, but I don't think I will. It's a toss-up. As I mentioned, the University med school has—there's a new industry now because of the fact that physicians have to be accredited and take courses for accreditation in order to maintain a license. So the new industry is one of being able to provide courses for accreditation, and some of these are attached to tours because you can write it off.

Well, I participated as faculty on some of these, and it's really a nice boondoggle because I get my way paid for. This year there's a tour that went to Alaska, and I went along on that and it was kind of nice.

Next year they're going to go to Antarctica. I don't think that it's really worth the investment of time, and the idea also of—again, after having been there and being down there under different circumstances, I think it would bother me the idea of someone taking me and putting me and here's [Palmer Station] and aren't you happy that—I think it would be hard for me to deal with.

If someone said to me that they needed me to go down there and do something that would relate to some specific Antarctic mission, then I would go down there. I'm an old guy now, and people may not have any real need for me or any talent that I have. But if they did say that there was even a—really had thought that it would be necessary to winter over, I could do that again. Not because there's any experience that I would necessarily want, there's no experience down there that I really need to have, but if there was a need for it, wintering over wouldn't be that much of a burden for me.

But I don't have any special reason for wanting to be there. The mere fact of—the idea of being on the ice in itself doesn't present me with any satisfaction.

I read a book—it was kind of annoying to me, I don't know if you've read it—but *Antarctic Navigation*, written by a gal by the name—I think her name was Arthur. It's kind of a feminist book. She had this fascination with the Antarctic ever since she was a kid, and she wanted really to relive Scott's experience and see if Scott could've made it. And she got a group of people together and they were going to make this trip. But she talks about the idea of being such a moving experience to get to Hut Point and to actually visit that

place or—she talks about what she saw as the airplane approached the Antarctic and the feelings that—she was overwhelmed.

My God. I've had those kinds of experiences very, very rarely in my lifetime, but not in the Antarctic.

DOB: I'm finding a very interesting range of opinion on that subject.

EE: I'm not that much moved by those kinds of experiences. I've been up in the mountains of New Mexico, and I've been overcome at times by what I've seen. And on canoe trips that I've been on in Ontario and there've been certain moments where you think, this is something special. I don't think I had any of those moments in the Antarctic.

DOB: Paul Siple wrote, and this is a quote: "The Antarctic generally wields a profound effect on personality and character, and few men are the same after a stay there."

EE: That's the same thing as Byrd with the mystic experience and being in touch with the distant cosmos and having it impart some kind of change. Let them think so. It's justification. And I think that Siple did a lot more than just ruminate on what the experience did to him. "I'm the guy who was the explorer scientist." But there is that necessity for justification for romantic ideal, I guess.

DOB: Did you feel changed by the experience?

EE: Yes, but not—I think in a sense you feel changed. It's kind of a sobering experience in a way.

[End Side A, Tape 2]

[Begin Side B, Tape 2]

EE: —in a situation. It could've been in the Antarctic, it could've been the moon, it could've been sitting in a cabin in the Rockies where I had to depend upon my own resources, internal resources, and say okay, well, in order to be able to have that experience, I went to the Antarctic. It could've been a lot of other places. But there is that feeling that I get that I was put in a situation that had to be endured, and I did it, and I think I did it reasonably well.

DOB: Did that affect the rest of your life? The direction that you took?

EE: I mentioned that the feelings of inadequacy that I had in regard to being in a situation where I was supposed to be the complete Mayo Clinic, I think may have had some effect in regard to avoiding, I think quite reasonably, finding myself in that situation. Even now I talk to the students about not being persuaded that they can do everything or that they can't admit their limitations and really try to ask for help when they need it. Because I think

that sort of thing has made a—and maybe that's something that arose from my medical experience in the Antarctic.

What was it the Surgeon General said, "What can you tell me about Antarctic medicine?" I said, "Well, there's no such thing as Antarctic medicine." I said, "What you want to do is be able to practice stateside medicine in conditions in the Antarctic, and it's really not possible. But you're talking about stateside medicine, not Antarctic medicine."

DOB: What's your favorite cocktail party story when somebody finds out that you've been there?

EE: I don't know. What do you mean by cocktail party story?

DOB: You know, when somebody says, "Tell me about it," and they have two minutes. What do you think is the—

EE: You mean what do I tell them?

DOB: Yes.

EE: To tell them about the Antarctic in two minutes?

DOB: Yes.

EE: I don't know. Well I tell them—I think one thing that really prevented me from having a sense of isolation down there, and one of the things that was always there to be enjoyed, and that's the fellowship of other people. I really felt that I was able to have close relationships with a lot of people down there that I thought were decent folks.

So I think that in itself may be enough, and maybe that's some kind of satisfaction, too, that you don't need an awful lot in order to be reasonably satisfied. And as long as you have reasonable contact with people, and you have some things that you can do that keep you occupied, that's about enough.

So I guess that's about all I can say about my experience as far as—I'm not going to talk about being out there with my teeth to the wind and ninety mile-an-hour gales with frozen face and whatever else.

No, just like some of my camping experiences. I have friends that go because they want to experience white-water adventure, so I've got to put up with that stuff. So I go down and white-water, but that's not my objective. My objective is I'm willing to pay the price to get someplace that I want to be, and with people that I like being with. And again, it's a matter of you go on canoe trips and stuff like that, and you like to share it with people that you like, and put up with hardship, too, with people that don't complain.

God, I hate people who whine and complain about difficulties that they're experiencing. I just hate that. I've done a lot of work with young boys and gone on camping trips and I've done Philmont a number of times and stuff like that. I've only had one trip where I had a kid that just complained all the time.

I tell people that are thinking of enduring relationships, getting married and stuff like that, I say, "You know what you want to do is go on a canoe trip or a camping trip together and hope that you run into some bad problems, maybe that you have bad weather or the canoe tips over or a bear comes into camp and tears the place apart, and then see how that person reacts to adversity."

And if you want to set a standard for reacting to adversity with style, then look back to Robert Falcon Scott. He's a hero, not because he did it, but because he didn't, and yet right up to the end he behaved like a hero: "If I had lived, what a story I would have to tell." Wonderful that the guy, his spirits in a sense—well I think his spirits did lag, but he never grumbled or ever questioned why he had started out.

So I think that's the other part of it is being able to expose yourself to a situation that requires your own resources and to see that you have the resources to deal with it.

DOB: I think I will ask you this question. I was debating whether I would, and that given all that you've said If you were an artist and could capture on one canvas for this Antarctic gallery, what was the essence of Antarctica for you? What would you paint?

EE: It's on a photograph. I wish I could show it to you. It's not really that good of a photograph. But I have a photograph of, I think it's Aldrich, and he's walking away from the camera. And in this instance it happens that there are some tracks, whether they're ski tracks or whatever else, and they're converging as they go out into the distance. And his head is kind of bowed and he's walking away from the camera, and it really looks like a person who is walking out into nowhere.

I think that's really an impression that I carry away. But I like that one, and I did take that picture. It actually was published in one of the local papers when I got back. So I think that that would really—not the scenery.

DOB: I thought maybe you'd talk about something about the camaraderie.

EE: Man in his isolation. I've got a picture of Gussie Moran. Have you heard people talk about Moran? He's one of the Seabees, enlisted men. And because of the tennis player—I don't even know what Gussie—what his name is, but he was Gussie, and I have a picture of him sitting next to a phonograph at one of the parties. You can tell from the picture that the guy is drunk but very mellow. Most of the guys there were pretty mellow.

DOB: What haven't I asked you that you really would like to talk about?

EE: I'll tell you, I think you've covered it pretty well. I'll probably think of something after I've left.

DOB: Send me a letter.

EE: No, I think that we've done a pretty—maybe even overkill.

DOB: Thank you so much. I really appreciated talking with you. It's been a real pleasure.

EE: Thanks.

[End of interview]