



Australian veterans' health: Korea

At the end of World War 2, Japan withdrew its colonial rule of Korea. The United States and Soviet Union took their place in the south and north respectively, promising to occupy Korea temporarily until an election was held.

The north of the country soon split from the south, however, and in June 1950, backed by China, the newly formed North Korea invaded South Korea. The United Nations sent a multinational force, including Australia, into the war zone to support South Korea.

- Australians were involved in active warfare in Korea from 1950 to 1953, and an Australian contingent stayed in a peacekeeping capacity until 1957.

Immediate health consequences

Nearly 18,000 Australian army, air force and navy personnel served in Korea. 339 died, 1216 were wounded in battle and 29 were taken prisoner. Machine gun and rifle fire inflicted most battle wounds. Trench warfare had similar health consequences for soldiers as it did in the two World Wars. "Trench foot" was known as "rice paddy feet" in Korea, but resulted in the same symptoms of foot rot and gangrene.

The Korean climate was also a major contributor to poor health. Temperatures ranged from -31° C mid-winter in mountainous regions to over 30° C in summer. Australian crews on navy vessels suffered from a lack of adequate cold weather clothing. Frostbite was an ongoing problem in winter, sometimes resulting in amputations. In hot weather, hygiene was difficult to maintain, resulting in intestinal ailments and skin diseases. Insects plagued soldiers and it was difficult to find clean drinking water, resulting in dehydration and general poor health.

Infectious diseases included typhoid fever from contaminated water, meningococcal meningitis, malaria, hepatitis C and sexually transmitted infections.

Long-term health consequences

A fifty-year health study of Australian Korean War veterans by the Department of Veterans' Affairs found them to have considerably poorer health than the rest of the population. Their mortality rate was 21% higher overall, with deaths from cancer higher by 31%. The specific cancers found in higher rates included oesophageal, gastrointestinal, colono-rectal, head and neck, lung, genito-urinary, skin and prostate. They were also found to have higher rates of liver, kidney and heart disease, partial or complete blindness or deafness, diabetes, high blood pressure, asthma, stomach ulcers and other conditions.

Several characteristics of Korean War service may account, in part, for these long-term health outcomes. Many servicemen experienced high levels of exposure to chemicals, including DDT and other pesticides. Australian navy crews were exposed to asbestos in ship engine rooms. The production of fresh water from seawater on naval vessels is also thought to have had a potential for concentrated contaminants in the seawater, such as herbicides and pesticides.

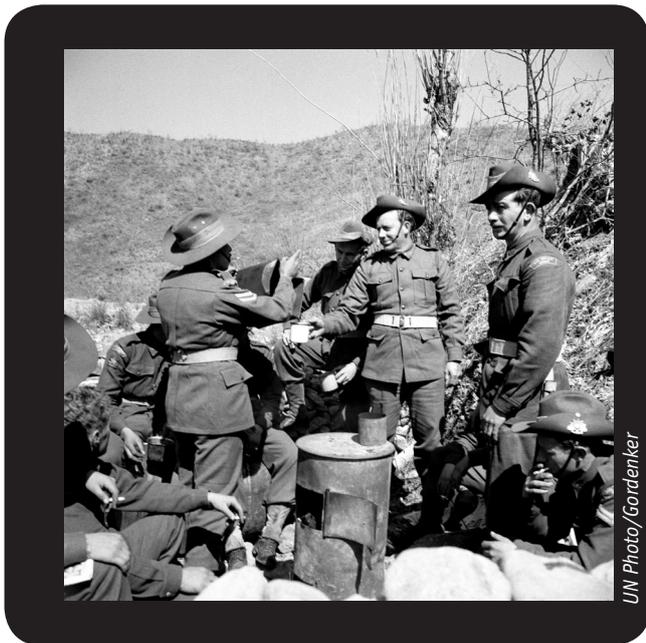
"I'll never forget the first day we went to the front line, and there were guns firing everywhere. I remember walking up the hills and I could smell the Korean pine trees, a sweet scented smell. But with that smell was another smell, a terrible, awful, sinister, sickening, terrible smell of death. And then I looked and everywhere, everywhere there were rotting corpses on the side of the hill and they were rotting into the ground. This was trench warfare of the worst kind. Of the four of us who went I was the only one who came back. My great mate was killed beside me."

Peter Cundall served with the Australian army in Korea

Prisoners of War

The 29 Australians taken prisoner by North Korean forces confronted varying conditions. Horace Slim Madden died of malnutrition and mistreatment in captivity, the only Australian prisoner to do so. In contrast, three others were released after a program of political indoctrination.

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Australian troops in Korea: 1951

"I remember leaving [Korea] after spending a year in a hole in a ground. I thought I would never get that smell out of my nostrils, and I left a hillside of corpses. But to leave the death and absolute desolation and slaughter and to suddenly arrive back in Australia was a profound shock. To come back to so called normality ... to come back and see people are going to parties and clubs and going to the cinema and dancing. It is a weird sensation ... And it doesn't affect you until years later."

Peter Cundall

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5. Ikin J F. et al, 'Anxiety, post-traumatic stress disorder and depression in Korean War veterans 50 years after the war', *British Journal of Psychiatry*, Vol. 190, 2007.
6. Peter Cundall spoke at an MAPW gathering in Melbourne, 24 April 2012. His quotes are from that presentation.

Impact on mental health

In general, Korean War veterans are less happy with their lives than the rest of the population. A report found only 18% said they were "delighted or pleased with their life", compared to 40% of a general Australian test group. Surveys of their mental health have uncovered many ongoing issues. Between a third to one half meet the criteria for PTSD (see box), or depression. In Korean veterans, PTSD is associated with lower rank, the severity of combat exposure and deployment to Korea in the active warfare phase generally. Korean veterans also have an elevated suicide rate. The Department of Veteran Affairs found that suicide, for unknown reasons, was higher in veterans who served as peacekeepers during the ceasefire phase.

Addiction

Alcohol and cigarettes were readily available to Australian troops in Korea, and there were reports of morphine abuse. Morphine abuse has not been an ongoing problem, but Australian Korean War veterans are more likely to abuse alcohol and more likely to have a history of smoking. They are three times more likely to meet the criteria for alcohol-related health problems. They have higher rates of lung cancer and liver disease.

Post Traumatic Stress Disorder (PTSD)

PTSD results from intense negative experiences, including threatened and actual physical harm, major loss of personal freedom or infringement of personal principles. Long-term symptoms include avoidance of reminders of the event, and distressing unwanted recollections, such as vivid flash-backs or nightmares. Sufferers remain emotionally on edge, unable to enjoy normal social interaction. Their symptoms include sleeplessness, anxiety, irritability, depression and mood swings, as well as social withdrawal and alcoholism.