

# In the steps of the Lark Force

When Royal Brisbane Hospital emergency physicians Drs David Rosengren and Sean Rothwell headed to Papua New Guinea's Lark Force Wilderness Track, they were focused on assessing medical services for trekkers and guides along the historical wartime trail.

But as they recounted to *Australian Medicine*, their journey promised a lot – and delivered so much more.



**FOR US**, the Province of East New Britain in Papua New Guinea had promised to tell the untold story of the Lark Force Battalion and provide a new jungle trek. It delivered so much more.

We were invited by South Sea Horizons ([www.southseahorizons.com](http://www.southseahorizons.com)) to join the inaugural Lark Force Wilderness Track (LFWT) in October. Our role was to implement a first aid training program for local guides and porters, assess priorities for medical services within local villages and develop risk management strategies for future trekkers along the physically challenging track.

The Lark Force Wilderness Track follows the jungle escape route of the little-known Australian 2/22nd Battalion (named the Lark Force). In January 1942, as WWII entered the southern hemisphere, the Lark Force was stationed at Rabaul on the island of New Britain in PNG. With the invasion of the Japanese army, the hopelessly outnumbered Lark Force troops were forced to scatter and retreat along the Track, winding nearly 60 km through rugged virgin rainforest, ending near Tol Plantation.

It was on the beach here that one separated group of 150 Australian soldiers were captured and bayoneted to death. A memorial at Tol has been placed in memory of the fallen Australians. With the assistance of native people and great tenacity and

courage, about another 450 soldiers and civilians evaded the Japanese army for months. Local plantation owners and the coastwatchers assisted their escape by sea.

The worst maritime disaster in Australian history was to follow, when more than 850 soldiers and 250 civilian prisoners of war perished when the unmarked Japanese transport ship, the *Montevideo Maru*, en route from Rabaul was sunk by an American submarine.

The track is managed by its native landowners and all the trek guides and porters come from local villages. The porters belong to the International Porters Protection Group ([www.ippg.net](http://www.ippg.net)) and the harsh terrain provides as many challenges to them as it does to the trekkers. The priorities for the education program were splinting traumatised joints, wound care, water purification and general food hygiene, and our guides were enthusiastic learners.

After flying into Rabaul we were met by the imposing view of Mt Tavurvur over the pristine clear coral waters of Blanche Bay. Since the eruption of Mt Tavurvur over Rabaul in 1994, the volcano has remained active. It discharges tons of ash over the city every day, leaving an incredible ash-laden moonscape and a few dogged residents who have stayed despite the relocation of the business centre to nearby Kokopo.



The Bitipaka War Memorial



Dr Rosengren hauls in a big wahoo on the boat trip back to Rabaul



David Rosengren examines a child with vomiting at Renagi village



Tribal dancers at the Mesubato Cultural Show, Karlai Village



Dr Rothwell examines a villager with a chest infection at Burum



Warriors at the Mesubato Cultural Show, Karlai Village

The trek commenced after a short drive from Kokopo to the village of Vunga. From here we traversed the Baining Mountain Range and headed for Mondrabet, a village near the northern coast of New Britain. Negotiating the steep terrain in oppressive heat and humidity through dense tropical jungle was occasionally very challenging. Malaria, dengue, travellers' diarrhoea, dehydration, heat-related illness and hyponatraemia were constant threats.

At each remote village we offered our medical services for a brief medical clinic. The main presentations were respiratory infections, gastroenteritis and numerous foot abscesses.

The tiny village of Baram, perched perfectly upon a mountain peak, is inhabited by two families. At the impromptu clinic here we encountered a young man who was tachycardic and tachypnoeic with grunting respirations. He appeared jaundiced and moderately dehydrated. He had been sick

with fevers for a week and was too ill to travel the two days' walk out of the jungle to seek medical attention. Examination findings were consistent with left lower lobe pneumonia and we treated him with 1g of intravenous ceftriaxone that evening. When we reviewed him again the next morning, he claimed to be feeling better. Although examination of his chest demonstrated improvement, he still looked unwell and we left him with oral cephalixin. In an environment where malaria, HIV and other infectious diseases are prevalent we recognised that his symptoms were not entirely consistent with a diagnosis of simple pneumonia. We therefore advised his family to accompany him on the trek to hospital if he did not continue to improve.

In addition to the multifaceted medical support we provided, we were privileged to witness some of the most fascinating and enlightening cultural displays PNG has to offer. We were spoiled with a visual spectacular of exotic and surreal costumes

and masks. The traditional fire dance of the Bainings people has to be seen to be believed. Men of the tribe, disguised in huge masks and costumes made from grass and leaves, jump in and out of massive bonfires. We were assured by the tribe elders that burns rarely occurred. At one stage, one of the fire dancers held a huge live python by the head with a young boy trailing behind to hold the tail. Each village displayed different dances and gave a glimpse into the rich cultural history of the Bainings people.

The successful completion of the challenging track was not the end of the adventure.

A banana boat ride down the crocodile-infested spectacular Mevelo River took us to the southern coast where we held a moving memorial dawn service at Tol for the fallen Australian soldiers whose path we had just followed. The final day was spent relaxing at a local plantation village with a cultural display performed by the four surrounding tribes. This was followed by a return trip aboard a luxury cruise vessel and some very successful fishing with a catch including large Spanish mackerel and wahoo. Other opportunities for holiday-makers include snorkelling or scuba diving among the spectacular local reefs or coral-clad wrecks or visiting the WWII relics, such as Japanese barge tunnels and Yamamoto's bunker.

While our involvement with the Lark Force Wilderness Track will be ongoing, the inaugural trek was a big success for everyone concerned. We felt privileged that our profession had taken us to active volcanoes, spectacular coral reefs, trekking through dense jungles, exotic remote-village cultural displays, crocodile sightings from a banana boat and luxury deep sea fishing.

The story of the Lark Force Battalion remains untold, but this trek is a small step in reminding Australians of their remarkable courage.



The trekkers and porters stop for a well-earned break