

John Cameron MacEachern - WW1(KIA)



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Personal Profile

- Name: John Cameron McEachern (MacEachern... p. 3).
- Birth Date & Place: January 24, 1888, in Cape George, Antigonish County, Nova Scotia (MacEachern... pp. 1, 13).
- Occupation: Student (MacEachern... pp. 1, 14).
- Next of Kin: Lauchie (Lauchlin) McEachern (Father), residing in Inverness, Cape Breton, Nova Scotia (MacEachern... pp. 1, 13).
- Height 5'7, light complexion, brown hair, blue eyes - weight 130 lbs.

Enlistment & Service Timeline

- Enlistment: Enlisted on April 5, 1916, at Broughton, Cape Breton, Nova Scotia (MacEachern... pp. 1, 17).
- Unit: Assigned to the 185th Battalion, Canadian Expeditionary Force (Cape Breton Highlanders) (MacEachern... pp. 1-2).
- Regimental Number: 877949 (MacEachern... p. 1).
- Promotions: Enlisted as a Private; promoted to Provisional Corporal on May 29, 1916, and to Sergeant on June 14, 1916 (MacEachern... p. 15). His rank as Sergeant was officially confirmed upon arrival in England (MacEachern... p. 17).
- Overseas Deployment: Sailed from Halifax aboard the S.S. *Olympic* on October 12, 1916, arriving in England on October 18, 1916 (MacEachern... pp. 13, 17).

The HMT *Olympic*—sister ship to the ill-fated *Titanic* and *Britannic*—was one of the most successful and celebrated troopships of the First World War. Affectionately nicknamed "Old Reliable" by the troops, she served as a vital transatlantic ferry, carrying over 200,000 Allied soldiers (including tens of thousands of Canadians) safely across the Atlantic.

Medical History & Hospitalization

- Initial Illness: Admitted to the military hospital at Witley/Bramshott on March 17, 1917, suffering from influenza (MacEachern... p. 17).
- Invalided to Canada: Due to worsening health (later medical charts indicate a diagnosis related to "meningitis tubercular"), he was officially boarded for discharge and invalided back to Canada (MacEachern... pp. 17, 27).
- Return Voyage: Departed England on June 11, 1917, aboard the hospital ship S.S. *Araguaya*, arriving back in Canada to continue medical treatment (MacEachern... pp. 14, 17).

Initial Admission & Diagnostic Tests

- April 18, 1918: He was admitted to Ward K at Camp Hill Hospital (MacEachern... p. 25). His initial chart notes a severe, persistent headache (MacEachern... p. 35).
- April 28, 1918: At 7:00 AM, he was examined by Dr. Birt (MacEachern... p. 35). He was noted as vomiting undigested milk and complaining of a "severe headache" (MacEachern... p. 35). He was given Potassium Bromide (*Pot. Brom.*) and Morphine rectally and via hypodermic needle (*hypo*) to control the pain and restlessness (MacEachern... p. 35).
- Urine Analysis: A laboratory report shows his urine was cloudy straw-coloured, with an acidic reaction, a specific gravity of 1.030, and a "faint trace" of albumen (MacEachern... p. 37).

Onset of Delirium (Late April)

- April 29, 1918: He became "very restless" during the first part of the night (MacEachern... p. 35). Nurses attempted to give him a hypodermic injection of sterile water (a common historical practice as a placebo or mild sedative baseline), but he vomited again (MacEachern... p. 35). He required further morphine (MacEachern... p. 35).
- April 30, 1918: By 1:00 AM, he was "very restless becoming delirious" (MacEachern... p. 33). The logs note he did not sleep, was "very noisy at times and hard to keep in bed" (MacEachern... p. 33). He was given Citrate of Milk and an eggnog, but his bowel movements were recorded as "not good" (MacEachern... p. 33). Calomel (a mercury-based purgative common at the time) was administered (MacEachern... p. 33).

Neurological Decline (Early May)

- May 2–5, 1918: His delirium worsened significantly. The logs describe him as "irrational all a.m." and note that it was "difficult to keep in bed at times" (MacEachern... p. 32). He was given *Trional* (a sedative/hypnotic drug) to help him sleep, but by May 5, he was "very restless and irrational all night" (MacEachern... pp. 32-33).
- May 6, 1918 (Lumbar Puncture): At 11:15 AM, doctors performed a lumbar puncture (spinal tap) under chloroform anesthesia to relieve immense pressure on his brain (MacEachern... pp. 27, 32). The notes record that 3 oz of spinal fluid was successfully withdrawn (MacEachern... p. 32). Following the procedure, his pulse was clocked at 126, and he grew briefly quieter (MacEachern... p. 32).

Final Days & Convulsions

- May 7, 1918: He suffered a major convulsion (seizure) at 4:10 AM (MacEachern... p. 32). The nurse noted that during the convulsion, the patient became entirely "pulseless and rigid" (MacEachern... p. 32). By 4:50 AM, he was quiet, but his pulse remained dangerously weak (MacEachern... p. 32).
- May 7 (Daytime): Physical signs of advanced neurological failure emerged. His right eye pupil became completely dilated, and his right eyelid was drooping (ptosis) (MacEachern... p. 29). He experienced incontinence of urine (MacEachern... p. 29). He was given *Strychnine* subcutaneously to artificially stimulate his failing central nervous system and weak pulse (MacEachern... p. 29).

May 8, 1918: His Final Hours

- 8:30 AM: He was suffering from involuntary micturition (incontinence) (MacEachern... p. 29). Nurses gave him a warm bath and an alcohol rub for comfort (MacEachern... p. 29).
- 10:00 AM: Visited by Dr. Birt (MacEachern... p. 29). The notes state it was now "very difficult to swallow" nourishment (MacEachern... p. 29).
- 12:00 PM (Noon): The patient became heavily cyanosed (turning blue due to a lack of oxygen in the blood) (MacEachern... p. 29). His breathing is described as incredibly "shallow and weak" (MacEachern... p. 29).
- 3:30 PM: His pulse was recorded as "running," skyrocketing to an estimated 160 beats per minute, and growing progressively weaker (MacEachern... p. 29).
- 5:50 PM: The final entry reads simply: "Died." (MacEachern... pp. 27, 29)
- Death: Sergeant McEachern passed away at Camp Hill Hospital on May 8, 1918, at 5:50 PM, at the age of 20 (MacEachern... pp. 27, 29). His official records list his status as deceased due to his medical conditions (MacEachern... pp. 3, 23).

Tubercular meningitis (also called tuberculous meningitis or TB meningitis) is a severe, life-threatening form of bacterial meningitis caused when *Mycobacterium tuberculosis* bacteria invade the membranes surrounding the brain and spinal cord. It is the most fatal type of extrapulmonary tuberculosis.