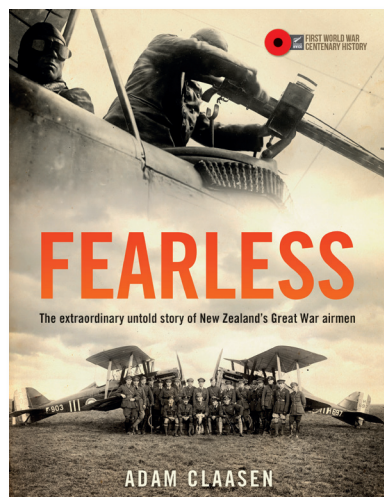


# Fearless

## *The extraordinary untold story of New Zealand's Great War airmen*

ADAM CLAASEN



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### THE FASCINATING AND LITTLE-KNOWN STORY OF NEW ZEALAND'S DARING MILITARY AVIATION PIONEERS

*'Thank God for this book' — Jim Mora, RNZ*

During the Great War New Zealanders were keen participants in the new field of military aviation. Close to 850 men, and a small number of women, from the Empire's southernmost dominion sought positions in the British and Australian air services.

Drawing on extensive archival material from New Zealand, Australia and Britain, historian Dr Adam Claasen explores New Zealand's reluctance to embrace military aviation, the challenges facing the establishment of local flying schools and the journey undertaken by the New Zealanders from their antipodean farms and towns to the battlefields of the Great War. In spite of their modest numbers, the New Zealanders' wartime experiences were incredibly varied. Across the conflict, New Zealand aviators could be found flying above the sands of the Middle East and Mesopotamia, the grey waters of the North Sea, the jungles of East Africa, the sprawling metropolis of London and the rolling hills of northern France and Belgium. Flying in open-cockpit wood-and-wire biplanes, New Zealanders undertook reconnaissance sorties, carried out bombing raids, photographed enemy entrenchments, defended England from German airships, strafed artillery emplacements and engaged enemy fighters. By the time the war ended many had been killed, others highly decorated, some elevated to 'ace' status and a handful occupied positions of considerable command. This book tells their unique and extraordinary untold story.

#### ABOUT THE AUTHOR

**Adam Claasen** is a senior lecturer in history at Massey University's Albany campus. His teaching and research is focused on the New Zealand military experience, German history, the Second World War in Europe and the relationship between film and history. He has received a Smithsonian Institution Fellowship, was the Fulbright Visiting Lecturer in New Zealand Studies at Georgetown University, and has been presented with a Vice-Chancellor's Award for Sustained Excellence in Teaching. His doctoral thesis was published as *Hitler's Northern War: the Luftwaffe's Ill-fated Campaign, 1940-1945* (Kansas UP, 2001). More recently he has written on the part played by New Zealand and Australian airmen in the Battle of Britain: *Dogfight: the Battle of Britain* (Exisle, 2011). He has presented conference papers and published articles in scholarly journals on military intelligence, the Luftwaffe, general airpower and geo-strategy in war.

#### SALES POINTS

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CHAPTER FIVE

**DUST AND  
DYSENTERY**

1915

The biplane shown in the picture was built by a Frenchman named Louis Blériot. It was the first aircraft to cross the English Channel. The engine was a 12-horsepower V-engine. The wings were made of fabric and were supported by a system of struts. The landing gear was a simple two-wheel design. The biplane was built in 1908 and was used for both racing and transport.

11. **Answer: A** The patient is exhibiting signs of hypoxemia, tachypnea, and tachycardia, which are consistent with a pulmonary embolism. The patient's oxygen saturation is 90% on 2L of oxygen, which is a concerning finding. The patient's chest exam is clear, which makes a pneumonia less likely. The patient's heart rate is 110 bpm, which is a concerning finding. The patient's blood pressure is 100/60 mmHg, which is a concerning finding. The patient's respiratory rate is 24 breaths per minute, which is a concerning finding. The patient's temperature is 38.5°C, which is a concerning finding. The patient's pulse oximetry is 90% on 2L of oxygen, which is a concerning finding. The patient's arterial blood gas (ABG) shows a pH of 7.35, a pCO<sub>2</sub> of 40 mmHg, a pO<sub>2</sub> of 80 mmHg, an HCO<sub>3</sub><sup>-</sup> of 24 mmol/L, and an SpO<sub>2</sub> of 90% on 2L of oxygen. The patient's D-dimer is 1.5 μg/mL, which is a concerning finding. The patient's chest X-ray is clear, which makes a pneumonia less likely. The patient's ECG shows a sinus tachycardia, which is a concerning finding. The patient's CT scan of the chest shows a filling defect in the right main bronchus, which is a concerning finding. The patient's ultrasound of the lower extremities shows a deep vein thrombosis in the right leg, which is a concerning finding. The patient's clinical presentation and findings are consistent with a pulmonary embolism. The patient's oxygen saturation is 90% on 2L of oxygen, which is a concerning finding. The patient's heart rate is 110 bpm, which is a concerning finding. The patient's blood pressure is 100/60 mmHg, which is a concerning finding. The patient's respiratory rate is 24 breaths per minute, which is a concerning finding. The patient's temperature is 38.5°C, which is a concerning finding. The patient's pulse oximetry is 90% on 2L of oxygen, which is a concerning finding. The patient's ABG shows a pH of 7.35, a pCO<sub>2</sub> of 40 mmHg, a pO<sub>2</sub> of 80 mmHg, an HCO<sub>3</sub><sup>-</sup> of 24 mmol/L, and an SpO<sub>2</sub> of 90% on 2L of oxygen. The patient's D-dimer is 1.5 μg/mL, which is a concerning finding. The patient's chest X-ray is clear, which makes a pneumonia less likely. The patient's ECG shows a sinus tachycardia, which is a concerning finding. The patient's CT scan of the chest shows a filling defect in the right main bronchus, which is a concerning finding. The patient's ultrasound of the lower extremities shows a deep vein thrombosis in the right leg, which is a concerning finding. The patient's clinical presentation and findings are consistent with a pulmonary embolism.

		
<b>Edward Willard</b>	<b>Vincent Tuckman</b>	<b>Wesley Spragg</b>
		
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