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The secret scalpel: plastic surgery for wartime disguise

Roderick Bailey

Wellcome Trust Research Fellow, Wellcome Unit for the History of Medicine, University of Oxford, Oxford OX2 6PE, UK roderick.bailey@wuhmo.ox.ac.uk

In 1945, with the fighting in Europe over, a curious story appeared in the pages of British newspapers. It concerned the war record of James Hutchison, an army colonel standing for Parliament in that July's general election. A year earlier, so Hutchison had revealed to the press, he had parachuted into Nazi-occupied France to work with the French Resistance. What had really caught journalists' attention, however, was his claim to have disguised his wartime identity by undergoing surgery to his face.

Changing someone surgically for the purposes of disguise might seem the sort of practice confined to the Mafia and the minds of screenwriters. That, at least, is how it seemed to me until I began my research into physicians employed by Britain's Special Operations Executive (SOE). A secret organisation set up early in the Second World War, SOE had the job of training and dispatching clandestine operatives to encourage resistance and carry out sabotage inside enemy territory. Much of my research examines the work of psychiatrists and psychologists in assessing and selecting prospective SOE agents. I look, too, at the procedures in place for treating operatives who survived their missions but returned with psychological problems. Another strand of my work concerns the activities of young medical officers who themselves were sent out as agents. But an unexpected discovery during the course of my research is perhaps the most remarkable point at which the wartime worlds of medicine and clandestine warfare intersected: the use of plastic surgeons to change agents' faces.

The long-secret services that these surgeons provided are emerging only gradually. The memoirs of two or three ex-SOE agents describe isolated examples of face-disguising surgery before missions in occupied Denmark and France. (They include James Hutchison's *That Drug Danger*.) The odd anecdote can be found among veterans' interviews recorded by London's Imperial War Museum. But firm evidence in the form of contemporary documentation is coming to light chiefly through the ongoing declassification of wartime files in British and American archives.

SOE's own records are still being opened at the National Archives in Kew, outside London. The relevant files concern individual agents and the work of SOE's Camouflage Section. The latter was a support department responsible for ensuring that agents and equipment earmarked for enemy territory would blend in seamlessly when they arrived. Many of the Camouflage Section's efforts were devoted to issuing agents with authentic-looking kit, clothing, and paperwork that would hopefully pass muster behind the lines. Sometimes it went further.

A Harley Street dentist, the files reveal, was brought on board to ensure that bridgework and other dentistry looked convincingly Continental. Porcelain caps could also be produced for concealing existing gold teeth. But more extreme procedures were reserved for agents whose looks, SOE felt, required more drastic alteration. Many agents were nationals of the countries to which they were being sent, they had friends and family there, and, in a few cases, mug shots in official files, so there was a danger of them being recognised once home. Some sported distinctive features, like facial scars, large ears, or a badly broken nose, and here again a need existed to avoid them standing out. So, in cases like these, SOE resorted to what it called “permanent make-up”.

As with dentistry, plastic surgery had to be out-sourced. One surgeon whom SOE used was George Bankoff. Of Bulgarian and Russian roots, Bankoff had been living and working in London since the mid-1930s and had first come to SOE’s attention as a prospective agent: a declassified note from 1941 records that “this man informed a friend that if... he could get to Switzerland he could arrange to become one of Hitler’s medical attendants. He was willing to try and get there”. But a man on whom the organisation seems to have relied much more—and who is probably the same man described anonymously in its files as “an eminent plastic surgeon” who, with his staff, carried out “a great many operations”—was Rainsford Mowlem.

A New Zealander, Mowlem was one of the leading plastic surgeons working in Britain when the Second World War broke out. Skilled, energetic, and no-nonsense, he was 36 years old at the start of the war. By the end of it, his career had been busy and varied. Throughout, he ran the plastic surgery unit at Hill End Hospital at St Albans, Hertfordshire, dealing with both civilian and service casualties. He was also plastic surgeon to Birmingham’s Selly Oak Hospital and maintained a private practice in partnership with Harold Gillies and Archibald McIndoe. On one occasion, so a former colleague, R L J Dawson, would recall, Mowlem treated Winston Churchill for a minor burn injury after the Prime Minister stubbed out a cigar in what he rapidly and painfully discovered was a box of matches.

Until now, a single published source seems to have linked Mowlem to SOE. That source is Hutchison’s memoir, *That Drug Danger*. This recounts how, to make him less recognisable, Mowlem had operated on Hutchison’s face at the London Clinic, a private hospital in Marylebone, clipping off the tops of his ears, reducing the size of his nose, and fashioning a more prominent chin. Hutchison would add that he had been pleased with the result. Once the swelling had subsided, all that remained was a single scar.

Some 70 years on, declassified British records confirm that operations like this one had indeed taken place. They also provide examples of the sort of work that was done. “Mr Derringer’s [existing] scar can be improved”, reads a letter from Mowlem to SOE from July, 1943. “The chief advantage will be the elimination of surface irregularity as well as improvement in colour and texture. I will want him for a day and a night in the Clinic & then he can go and return for dressing.” Mr Derringer was Henri Derringer, a French cavalry officer who, 2 months later, dropped by parachute into France.

The files of the Office of Strategic Services (OSS), SOE's American opposite number, are also illuminating, since the Americans, lacking their own facilities for this kind of surgery, had to rely for a time on what the British could provide. "Scars that show are definite and dangerous marks of identification which should always be eliminated if possible", explains a note written after OSS gleaned details of what the British were doing in London. "An operation lasting two to three hours and removal of stitches after seven to ten days are all that are necessary." Nose operations, OSS also recorded, usually required "about a week or ten days hospital care, but a month must be counted upon before all swelling has gone down and the resulting 'black eyes' have disappeared". Prominent ears, meanwhile, "are dealt with by pinning them back. This leaves a small inconspicuous scar where the skin joins the ear to the head. Two to three weeks should be allowed for this."

Surgery was also considered for the removal of tattoos. Here, though, common sense prevailed, if only, perhaps, after some unfortunate trial and error. "Tattoo marks are most difficult to remove", says an SOE note on the subject. "The process is long and painful...By far the most satisfactory treatment has been found to be re-tattooing with larger and more elaborate designs. Skilful blending can achieve amazing results."

To judge from a surviving selection of before-and-after photographs, pinned-back ears or a restructured nose could certainly make a difference to an agent's face. But the degree to which plastic surgery contributed positively to agents' careers (and chances of survival) is hard to assess, not least because of the difficulty of establishing who actually received it. Security surrounding the practice was extremely tight: "our British friends consider the whole subject of personal disguise as most secret, particularly surgery", noted OSS, "[so] the smallest possible circulation should be given to this subject". This may explain why no list of recipients appears to survive among the available records. Indeed, even the agents in those before-and-after snapshots are anonymous. I confirmed one identity purely by chance, searching other files for something unrelated and turning up a corroboratory photograph of Lieutenant Maurice Pertschuk. Before being sent to France in 1942, Pertschuk received a reshaped nose.

OSS heard the British explain that surgery made a "valuable" man "less noticeable, harder to describe, more one of the crowd". But a dissenting voice can be heard in an interview recorded by the Imperial War Museum. "They had tried to change his face so that even his family wouldn't recognise him", remembered the wife of Flemming Muus, one of SOE's Danish agents, "but they hadn't done a very good job; they'd left some very big scars along his ears. Well, he was the only man in Denmark who had those scars so he was terribly vulnerable to being recognised". Bankoff was apparently the surgeon who performed the procedure: an original form, signed by Muus, consenting to an operation by Bankoff, "the object of which is to alter my face", is also preserved in the Imperial War Museum.

Bankoff later claimed in print to have performed facial operations on numerous secret agents. (Perhaps some were for MI6, SOE's similarly secret cousin, which also had agents requiring personal camouflage, but its records remain classified.) By contrast, Rainsford Mowlem seems never to have disclosed his own work for SOE. After he died in 1986, none of his obituaries mentioned it. Nor does any reference appear in a fine and long-deserved

profile in the *Journal of Medical Biography*. Possibly he had never spoken about it at all. Among men and women engaged in clandestine warfare, those who approach their jobs most professionally are not unknown for taking their secrets to the grave.

Further reading

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7. US National Archives, College Park, MD. Records of the Office of Strategic Services
8. For more on the Imperial War Museum. see <http://www.iwm.org.uk>
9. For more on the National Archives UK. see <http://www.nationalarchives.gov.uk>
10. For more on the US National Archives. see <http://www.archives.gov>

Figure 1.