

The WWII Bunkers of the *Hôpital Morvan*—Brest (FR)

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Abstract

A search at the *Archives Départementales du Finistère* in Quimper permitted to find documents indicating the presence of WWII bunkers in the area of the nowadays *Hôpital Morvan* in Brest. However, the visit of the area permitted to ascertain that several more bunkers were actually built. The visits permitted their identification and to ascertain that some of them are presently in good preservation state, others partially demolished and integrated in a modern hospital building, and some other completely demolished. The bunker demolition technology employed is documented by images and commented. Notwithstanding the ancient hospital buildings were classified as historical monuments and so protected against alterations and demolitions. No protection is ensured to the bunkers which risk is to be altered or demolished according to circumstances, depending on the development of the hospital.

Keywords

WWII, Brest, Atlantic Wall, *Hôpital Morvan*, Bunkers, *Blockhaus*, *Organisation Todt*

1. Introduction

It was the fortuitous encounter, in the past, with a WWII Great Bunker in the area of the nowadays *Hôpital Morvan* in Brest that pushed us to visit the area in looking for possible other WWII constructions. An article published on the newspaper *Le Télégramme* (Le Guen, 2023) informed that three WWII bunkers actually existed in the area and that the Great Bunker escaped the destruction because of the high demolition costs and two others were partially demolished and integrated in a new building. This information pushed us to a detailed investigation and to further visits on the area.

2. Hospital History

At the beginning of 19th century, the hospital district of Brest comprised eighty-four municipalities for a total of 250,000 inhabitants and had only an old, 590-beds hospital at the town centre dating from the XVIIth century. Its antiquated state and exiguous numbers of beds let apparent to the Municipality the urgency for a new, spacious and modern furnished hospital (Lullien, 1946a).

The question of the construction of a new hospital in Brest ascended to 1863 and was raised in different occasions, but it entered in the decisive phase on 1929. The chosen terrain was situated outside the Brest walls on an area named *Camps des Fédérés* dominating the Bay of Brest. It was oriented North-South and extended on nine hectares. The Administrative Commission on 21st January 1930 decided to proceed to the area expropriation in the shortest possible delay and to establish a hospital draft construction project.

The French Presidential decree of 23rd June 1931 declared the public utility of a new hospital in Brest. The Brest mayor was authorised to acquire by expropriation the area necessary for the project. The cost of 3,201,275 Frs was paid by resources coming from the alienation of part of the endowments and by a loan of 1500000.00 Frs contracted with the *Caisse des Dépôts et Consignations*.

The competition for the choice of an architectural project took place on 13th June 1932. The appointed Jury selected the *Nord-Sud* project of Lopez and Gravereaux architects of Paris. The project which, initially, envisaged 500 beds was amplified to 800 and successively to 1000 beds. The Administrative Commission deliberated to invite the architects to submit a draft project for the appreciation of the Superior Council of Hygiene.

In the meeting of 2nd November 1933, the Administrative Commission set to 45000000.00 Frs the sum to not exceed for the construction of the new hospital, comprising the cost of the materials. On 4th December 1934, the Administrative Commission deliberated an estimated expenditure, in round figures, of 45976000.00 Frs for the terrain, the construction and the adaptation of the buildings. To deal with such a sum it was decided to obtain a state subvention of 50% through the fonds of *Paris Mutuel* and to cover the rest by a General Council subvention decided on 10th October 1934, a loan to be contracted with the *Hospices de Brest*, the sale of the old hospital, the products of the Metivier legacy and annual securities (Ropass, 1942).

The project finally envisaged the institution of 800 hospitalisation beds, 106 personnel beds, 10 departmental childbirth school beds, a central steam and hot water production plant, a general kitchen, staff canteens, a pharmacy, material depots, stores, workshops, a laundry, a general hydrotherapy service, a central bakery, a dead service, a consultation building with anti-tuberculosis and anti-venereal dispensaries, lodgements for the Director, the Treasurer, midwife masters, internal guards and the accommodation of a religious community for 25 nuns with a chapel. On 24th June 1936, the hospital general plan was approved by the French Public Health Ministry (Tandas, 1941).

Because of difficulties in acquiring the financial resources, the Administrative

Commission had to wait the Programs of Great Works for acquiring the sum for starting the construction of the new hospital. With respect to the full new hospital project, the Administrative Commission decided to proceed with a first hospital tranche, corresponding to a half of the project, comprising the construction of a Consultation Pavilion, a Maternity and Surgery Pavilion, and a Small Payers Pavilion of 470 beds, waiting for the second construction tranche comprising a boiler house, workshops and enclosure walls (Ropass, 1942).

The earth moving works started on 1936. The laying of the first stone took place on 3rd November 1937 (Lullien, 1946a).

The work progress was somewhat thwarted by the application of the 40-hour week and severely hampered by the provisions of the decree of 12th November 1938 dealing with the revision of public works. A demand of derogation addressed by the Administrative Commission received satisfaction, but strictly for the works necessary to the preservation and protection of the buildings already built, exterior glazing, sewer system and lightning rod installation. The raw construction materials, mainly reserved for the armament effort, were rarefied. When the French mobilization occurred, the site was virtually closed. Nevertheless, the rainwater and other drainage works were already commissioned. The structural works of roofing and waterproofing, interior and exterior carpentry, as well as the installation of a wastewater treatment plant, were practically finished when the war against Germany was declared. In normal times, the termination of the first tranche was planned for July 1942 (Ropass, 1942).

On 13th September 1939 the representative of the First Sub-Area Base of the British Army declared to have taken possession of the ground floor and of the 1st to 4th floors of building No. I. A visit of these floors permitted to ascertain that no traces of degradation were brought to the structures (Kermack, 1939). The British Army used these floors as garrison; subsequently, the *Marine Nationale* used these floors as material depots (Lullien, 1946a).

After the German invasion of France, on 4th December 1940, a first requisition of the hospital buildings until an indefinite date took place by order of the German occupation authority. Interrupted for about six months, the construction works resumed at the end of February 1941, thanks to the financial assistance to the Administrative Commission by the Armistice Commission. The work continuation had the purpose to allow the use of the hospital as Marine hospital under the direction of the architects who received instructions for the completion of the works directly by the German *Marine-Bauamt*. To give satisfaction to the German authorities, the Administrative Commission asked the Brest prefect to proceed to the tendering of works according to the conditions of the Circular No. 97 of the French Ministry of Public Works of 6th October 1939 (Ropass, 1942).

A second requisition assigned the buildings as naval quarter for the German *Kriegsmarine* (Lullien, 1946a). The *9. U-Flotille* constituted on 1st September 1941 in Brest, arranged its quarters in the new hospital buildings the construction of which continued as ordered by the *Kriegsmarine*. It decided, at the be-

ginning, to install there its military hospital (Hellwinkel, 2022). During the work running, the project parts suffered deep modifications which escaped to the Administrative Commission. However, the architects tried to save the interest of the Administrative Commission. They were able to follow, in agreement with the German authorities, the corrections made to the plans, avoiding many demolitions and very expensive recoveries (Ropass, 1942). Two documents (Cleuss, 1941a; Cleuss, 1941b) mentioned the occupation of about three hectares of the area of the new hospital on the Avenue Foch by the *Oberbauleitung Nord, O.T., Einsatz Westküste, Abteilung Nachschub Ju: La, Einheit, Feldpost 43903*, without defining the purpose. The bombardments of 10th February and 15th April 1941, which destroyed the old hospital except for the Administrative Pavilion, rendered necessary the completion of the new hospital with shorter delay (Tandas, 1941).

On 5th December 1941, the Inspector and Manager of Naval Works in Brest with the letter No. I806/2 made known that all the buildings of the new hospital have to be completed for receiving German soldiers. This letter modified the Convention of 3rd December 1940 according to which no important changes were foreseen to the original program and all the buildings have to retain their hospital character (Ropass, 1942).

The Application 400 to the *Service d'Aide aux Forces Alliées* and to the mayor of Brest (Hurley, 1944) informed that the buildings No. 1 and No. 2 of the new hospital (Figure 1) were occupied by the American Army from 21st December 1944.

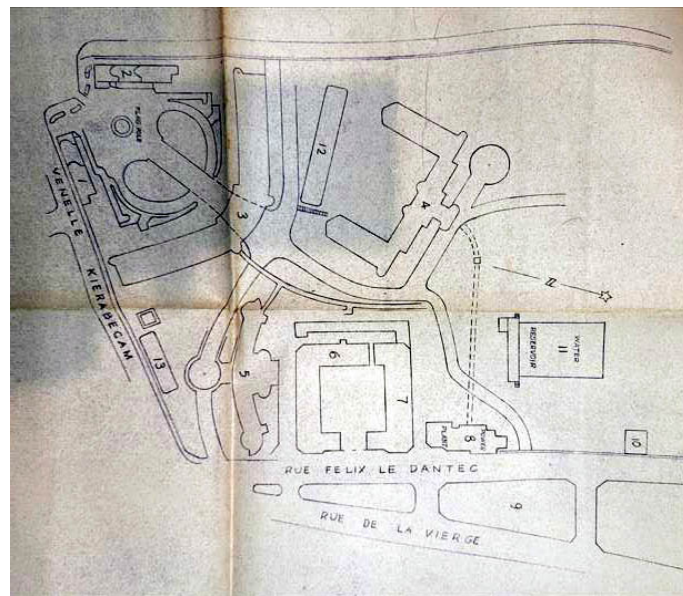


Figure 1. Plot Plan—Civil and Military Hospital—Brest, Office of the Engineer, Brittany, Base Section—Com. Z. Etoussa—1 building No. 1; 2 building No. 2; 3 Consultation Pavilion; 4 Maternity and Surgery Pavilion; 5 Small Payers* Pavilion; 6 building No. 6; 7 building No. 7; 8 Power Plant bunkers and annexed house; 9 Felix Le Dantec road buildings; 10 bunker SK; 11 Water reservoir; 12 Great Bunker—SK/M × 3; 13 bunker SK/M × 2. (Hurley, 1944) * Small payers were persons able to pay only part the medical expenses.

On 23rd October 1946, the French Reconstruction and Urbanism Ministry decided the reconstruction of the Civil Hospital of Brest damaged by the bombardments of August and September 1944 and the German occupation during the years 1940-1944 subject to the eventual recovery of the works made by the enemy (Lullien, 1946b). The *Marine Nationale* acquired the hospital buildings for concentrating different serviced dispersed in the town, despite the opposition of the Brest major and the hospital administrators. An agreement was reached between the *Préfet Maritime* and the Brest major according to which the *Marine Nationale* abandoned the Consultation building and the hospital entrance buildings at the demand of the architects of the new hospital and a third building, in principle, on 1st January 1947. This permitted the resumption of the completion works of the first hospital tranche. The completion works of the new hospital continued following the reconstruction of the town of Brest (Lullien, 1946a).

A document (Lullien, 1947) listed the constructions built during the hostilities on the territory of the municipality of Brest. **Table 1** specifically mentions a basin and two bunkers or shelters in the new hospital area without specifying their characteristics; however, the visits on the area permitted to establish that more than two bunkers were actually built (Figure 1).

Table 1. Constructions built during the hostilities in the area of the new hospital (Lullien, 1947).

Structure	Description Surface etc.	Emplacement	Preservation State
Basin	Water reservoir against fire	Courtyard of the New Hospital	Good
Concrete shelter	2 reinforced concrete bunkers	Dependence of the New Hospital	Good

On January 1951 the new hospital received its first patients. It was officially inaugurated on 1953 and dedicated to the Breton physician and politician August in Morvan.

A document of the hospital Economic Services (*Services Economiques*, 1957) informed that a bunker facing the central boiler house, hosted a transformer station and a water reservoir superimposed on the couverture. Because of rain water infiltrations in the transformer station, possibly causing severe accidents, the bunker sealing was carried out and the reinforced concrete water reservoir was demolished. The works involved an ex-penditure of 529859.00 Frs.

3. The Visits

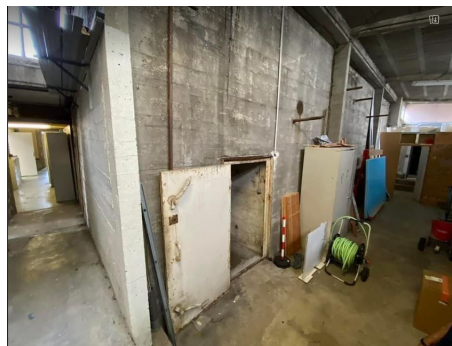
Various visits on the area of the *Hôpital Morvan* (Figure 1) took place from 2nd December 2018 to 5th September 2023 and the last on 16th September 2023. The WWII constructions identified were the following.

A pale orange painted Official Housing 8a (48°23'40.54"N, 4°29'6.41"W,



Figure 2. Water reservoir and WWII bunkers in the new hospital area after the WWII-4 building No. 4; 5 building No. 5; 6 building No. 6; 7 building No. 7; 8a Official Housing; 8b bunker; 8c bunker; 8d bunker with possible *tobruck* superimposed; 8e power generator bunker with superimposed water reservoir; 8f aerial electrical power line from bunker 8e to shacks near building No. 4; 9 Felix Le Dantec road building; 10 bunker *SK*; 11 water reservoir; 13 bunker *SK/M* × 2; 14 bunker *SK*.

C0417-0351_1946_CDP2274_0174, no. 174, 1/1425, Argenticque, 13/12/1946



(a)



(b)

Figure 3. Bunker *SK 10*—(a) external view; (b) plan.

height 71.5 m) (**Figure 2** and **Figure 3**) (Appendix **Figure A2**), which probably hosted the lodgements of the Director and the Treasurer. Its external structure was in good preservation state without damages due to bombardments or combats. The interior was inaccessible; therefore, it was not possible to ascertain the internal preservation state.

A bunker 8b (48°23'40.54"N, 4°29'6.48"W, h. 71.42 m) completely demolished. A portion of its portal and its underground rooms were integrated in a new building.

A bunker 8c (48°23'40.01"N, 4°29'6.41"W, h. 71.37 m) partially demolished. A side wall portion on Le Dantec road and its underground rooms were integrated in the new building.

A bunker 8d (48°23'40.01"N, 4°29'6.32"W, h. 71.27 m) partially demolished. A side wall portion, letting visible formwork traces and *Ero Vili* pebbles (Tomezzoli & Marzin, 2015). Its underground rooms were integrated in the new build-

ing.

A 12×12 m bunker 8e ($48^{\circ}23'39.26''\text{N}$, $4^{\circ}29'6.24''\text{W}$, h. 70.87 m). Its external structure, letting visible formwork traces and *Ero Vili* pebbles, was in good preservation state without damages due to bombardments or combats. The interior was inaccessible; therefore, it was not possible to ascertain the internal preservation state.

The Felix Le Dantec road building 9 ($48^{\circ}23'40.45''\text{N}$, $4^{\circ}29'4.76''\text{W}$, h. 71.72 m), of French construction, was in good preservation state without damages due to bombardments or combats. Two building inhabitants, interrogated by the authors, excluded the presence of a bunker in the internal building court.

A bunker *SK* 10 ($48^{\circ}23'43.31''\text{N}$, $4^{\circ}29'7.61''\text{W}$, h. 72.65 m) integrated in a new building (Figure 3). Its external structure, letting visible formwork traces and *Ero Vili* pebbles, was in good preservation state without damages due to bombardments or combats. The internal rooms were in good preservation state and used as material depots.

A 50×20 m water reservoir 11 ($48^{\circ}23'41.67''\text{N}$, $4^{\circ}29'7.76''\text{W}$, h. 71.54 m) buried in the terrain under a hospital parking.

A 14×45 m *SK/M* \times 2 bunker 13 ($48^{\circ}23'34.34''\text{N}$, $4^{\circ}29'6.65''\text{W}$, h. 64.11 m) completely demolished after the WWII.

A 7×14 m *SK* bunker 14 ($48^{\circ}23'33.99''\text{N}$, $4^{\circ}29'8.75''\text{W}$, h. 63.23 m) disappeared.

A 68×13 m *SK/M* \times 3 Great Bunker 12 ($48^{\circ}23'36.3''\text{N}$, $4^{\circ}29'13.53''\text{W}$, h. 62.6 m), also named *Grand Blockhaus* (Figures 3-6) (Appendix Figure A1). Its external structure was in good preservation state. Only one of its corners appeared slightly damaged probably because of the removal works of the terrain on its sides and coverage (Figure 2). On the front side, six entrances were in good preservation state preserving their original white painting. On the walls formwork traces and *Ero Vili* pebbles were clearly visible. Bitumen traces, probably for watertight insulation, were clearly visible on a corner. On the rear side was visible a *tobruck*, or chimney or emergency exit not in the original plan (Appendix Figure A1). The interior was in good preservation state preserving some armoured doors, the original white room and corridor painting and dark grey skirtings. All the original furniture disappeared and only aeration conduit portions were in place on the walls. Some internal rooms were occupied by hospital archive material and audiometric materials no longer in use. A portion occupied by the Hospital Workers' Association was not accessible.

4. The Partial Demolition of Bunkers 8b - 8d

Figures 7(a)-(j) document the partial demolition phases of bunkers 8b - 8d.

Figure 7(a) and Figure 7(b) show respectively bunker 8b, provided with an entrance portal letting visible formwork traces, bunkers 8c with three entrances, bunkers 8d - 8e on the background before the bunker 8b - 8d partial demolition.



Figure 4. Great Bunker and buildings in the new hospital area after the WWII-1 building No. 1; 2 building No. 2; 3 building No. 3; 4 building No. 4; 12 Great Bunker. C0417-0351_1946_CDP2274_0038, no. 38, 1/1530, Argentique, 30/10/1944



(a)



(b)



(c)



(d)



(e)



(f)



(g)

Figure 5. Great Bunker external details—(a) front side with entrances; (b) corner with air intake grilles and bitumen traces; (c) *Ero Vili* pebbles and formwork traces; (d) ground floor emergency exit; (e) first floor emergency exit used by the conditioning system; (f) rear side *tobruck*, or chimney or emergency exit (g) rear side and coverage, on the far right the *tobruck*, chimney or emergency exit.

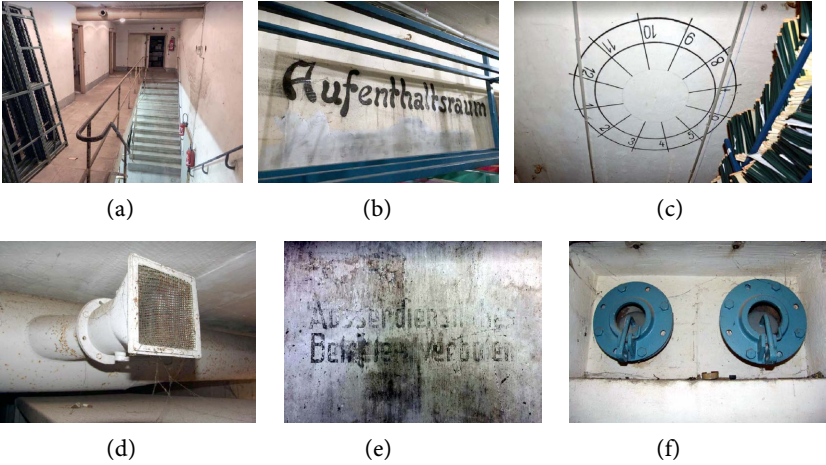


Figure 6. Great bunker internal details—(a) internal stairs; (b) rest room; (c) hour dial; (d) ventilation system grid; (e) Out of service house Entering prohibited; (f) ventilation system valves.

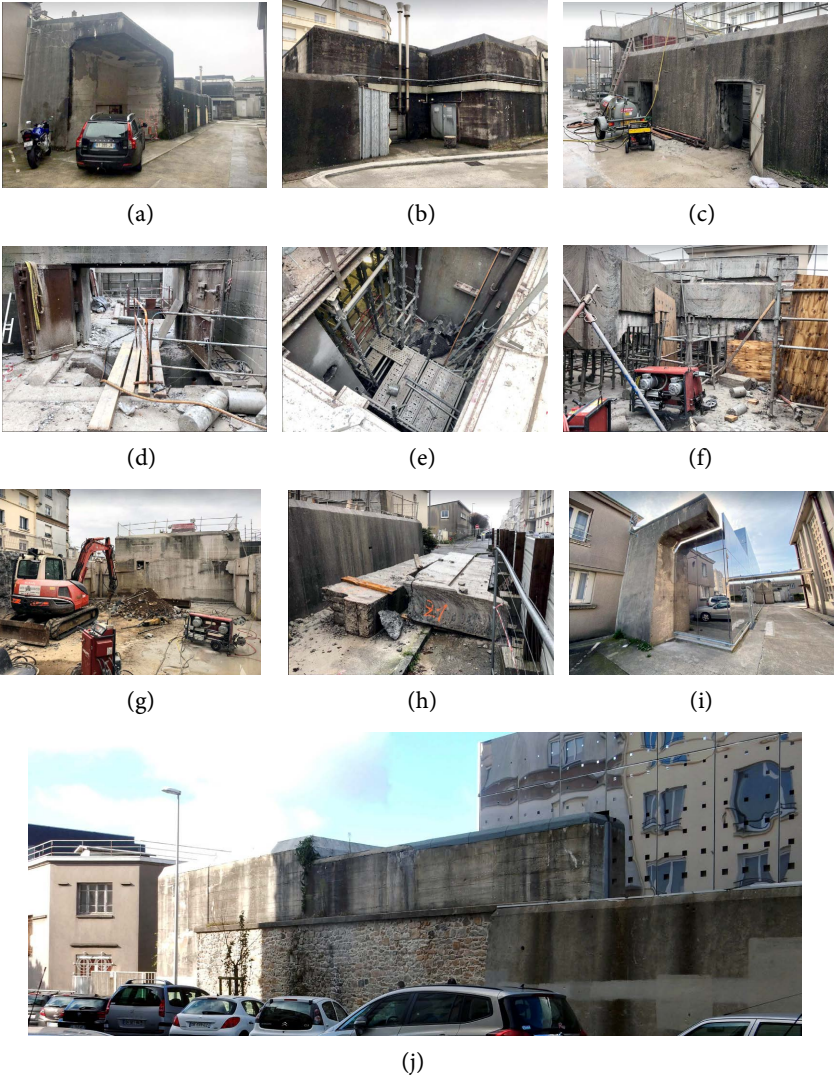


Figure 7. Power plant bunkers—(a)-(j) Power Plant bunkers partial demolition phases.

Figures 7(c)-(g) of 2nd December 2018 show respectively: the complete demolition of the bunker 8b of which only a portal portion remained sustained by metallic columnar supports and two opened doors of bunker 8c for its partial demolition start; an internal open, armoured door and the stair to the bunker 8c underground floors during the partial demolition works; the adaptation works of bunker 8c underground; the concrete sawing machine with two electrical motors and two pulleys to direct the concrete sawing diamond cable, at the bunker 8c interior; two detached bunker 8c concrete portions laid on Le Dantec road.

Figure 7(h) of 6th January 2019 shows the debris clearing and adaptation works of the bunker 8c interior: on the left excavator bulldozer, in the middle internal stair and access opening of bunker 8d, on the right the concrete sawing machine with attached sawing diamond cable.

Figure 7(i) of September 2019 shows bunker 8b portal portion remains integrated in the new building.

Figure 7(j) of 5th September 2023 shows the remains of bunkers 8c - 8d and bunker 8e on Le Dantec road.

5. Discussion

The various documents studied at the *Archives Départementales du Finistère* in Quimper on 13th July 2023, 18th July 2023 and 14th August 2023 are silent about the bunkers, built by the *Organisation Todt (O.T.)*, in the area of the new hospital (**Figure 1**). Although under the direction of the O.T., therefore under military secret, their construction was certainly be remarked because of the presence and the work of excavators, trucks, mixing machines and a great number of workers which surely perturbed the hospital area.

It was a common practice of the *Wehrmacht* to provide, where possible, the hospitals it occupied with at least a first-aid bunker in order to continue medical activities also during attack, as in the case of the bunker *R118* near the *Hôpital des Rosais* in Saint-Malo (*AOK7, KVA A1, KvGr Rance, KvUGr Festung Saint-Malo, Les Rosais, Ra281a*) (Tomezzoli & Pottier, 2016a). Therefore, the presence of bunkers in the area of the new hospital is not surprising. However, here the bunkers added a further purpose. The *9. U-Flotille* occupied the new hospital buildings (**Figure 1**) as follows: 1 Guard and Officers of personnel reserve; 2 *Flotille* commander lodgement, 3 *Flotille* administration services (*Haus Endrass*); 4 *Flotille* seamen lodgements (*Haus Gilardone*); 5 *Flotille* officers lodgements (*Haus Jürst*) (Biron et al., 2023). The Great Bunker 12 placed between the buildings 3 and 4 was foreseen for accommodating and protecting administrators and seamen in case of air attack and bunker 13 in front of building 5 for accommodating and protecting officers. The air attack protecting function of Great Bunker 12 and bunker 13 was actually the same accomplished by the German bunkers 47, 50, 56 of the *BDU (Befehlshaber der Unterseebootes)* West, admiral Dönitz, on the *Domaine de Pignerolle* (Tomezzoli, 2019).

The water reservoir 11 was intended as a pool as those at *Murs Erigné* (To-

mezzoli, 2016) and at the *Domaine de Pignerolle* for providing relax to the officers and seamen and water in case of fire to the buildings and bunkers in the hospital area (Tomezzoli, 2019). An athletic field was arranged between the water reservoir and building 4.

It is also not surprising that the vital devices of the Power Plant were protected by bunkers.

The technology adopted for the partial demolition of the bunkers 8b - 8c differs from that used for demolishing, on 2011, the *R661 Kriegsmarine* first-aid bunker of 1942 on the *Collège Moka - Sainte Famille* estate at Saint-Malo. That bunker faced the lines of the old Saint-Malo railway station and because of its position in the city area, the use of sticks of dynamite was inconceivable. The firm Karavis from Rennes drilled in *R661* concrete structure 650 holes of different depth in which expansive gas cartridges were slipped. Then, the bunker was enveloped with hay bales and covered by plastic sheeting, a new way for limiting the dispersion of concrete debris and mitigating noise and vibrations in the ground. The cartridges explosion weakened the *R661* structure opening cracking everywhere. Concrete portions and debris were evacuated by the city public services (Tomezzoli & Pottier, 2016b).

The bunker 8b (Appendix **Figure A2**) plan and images let no doubt about that it was used as garage or material store, the bunker 8e was used as a transformer station (Services Economiques, 1957), the usage of the other bunkers is unknown.

The Great Bunker plan is shown in Appendix **Figure A1**. It comprised a ground-floor (*Niveau Bas*) hosting the six front side entrances and a first-floor (*Niveau Haut*) hosting an emergency exit on each of its minor sides. The emergency exit of the ground floor is not present on the plan. Each floor was subdivided in three equal sections, each arranged around a double internal stair. Each section comprised four rectangular rooms, two facing the longer sides of the double stairs and two facing the minor sides. The tobruck or chimney or emergency exit (**Figure 6(d)**) is not present on the plan. The images of 1946 (**Figure 2** and **Figure 3**) show that, in origin, its coverage and three of its sides were covered by terrain letting uncovered only the front side with the six entrances. After the WWII a portion of it accommodated an audiometric division because of the bunker acoustic isolation and then an ophthalmological division. Nowadays, only a portion is in use by the hospital dependant Association. No further use of it is foreseen, although its coverage would be suitable for the landing of helicopters and drones.

A tunnel, about 130 m long, connected the Power Plant bunkers with the hospital building 4 (**Figure 1**) allowing the distribution of electricity and warm water. The construction of modern hospital buildings caused the suppression of the bunker 8e aerial electrical line and the shacks near building 4 (**Figure 2**).

Figure 2, **Figure 4** and **Figure 5** show that the area of the new hospital was not seriously damaged by allied air bombardments and battle of Brest combats.

6. Conclusion

Our visits and documentation study permitted to ascertain that eight bunkers were actually built in the area of the actual *Hôpital Morvan*. The Great Bunker and the other remaining bunkers are not classified as historical monuments notwithstanding all the ancient hospital buildings are so classified and so protected against alterations and demolitions (Le Guen, 2023); therefore, no protection is ensured to them against the risk to be demolished, according to the circumstances, due to the development of the hospital. Moreover, no information is given to the public about their existence and purposes. We hope that this article will attract the attention of archaeologists, administrators, scholars and a large public about the necessity of the preservation of the German military constructions in the *Hôpital Morvan* area.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this article.

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Appendix

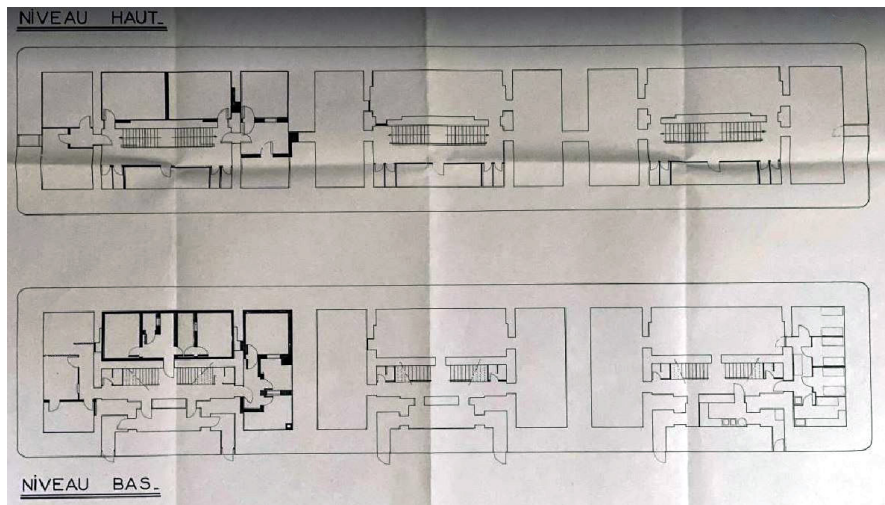
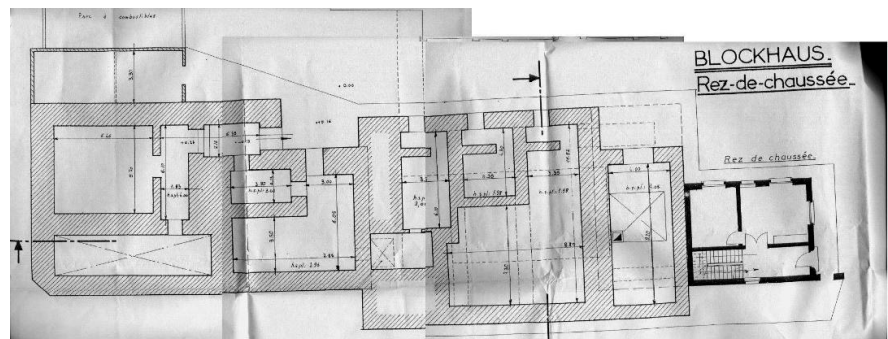
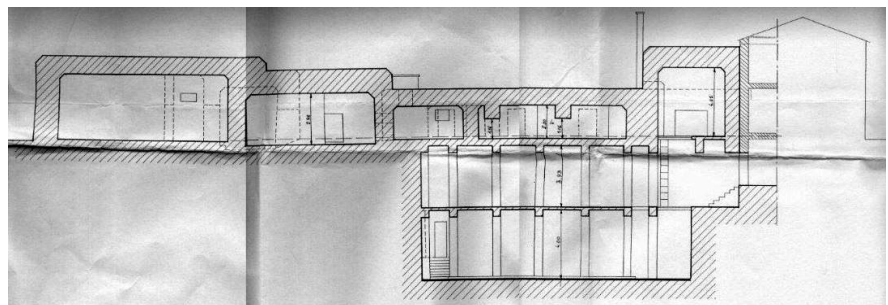


Figure A1. *Hôpital Morvan* Great Bunker (12) plan—Level High, Level Low.



(a)



(b)

Figure A2. *Hôpital Morvan* bunkers 8b - 8e—(a) Bunker ground floors (*BLOKHAUS - Rez de chaussée*); (b) Underground levels.