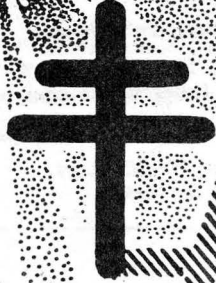




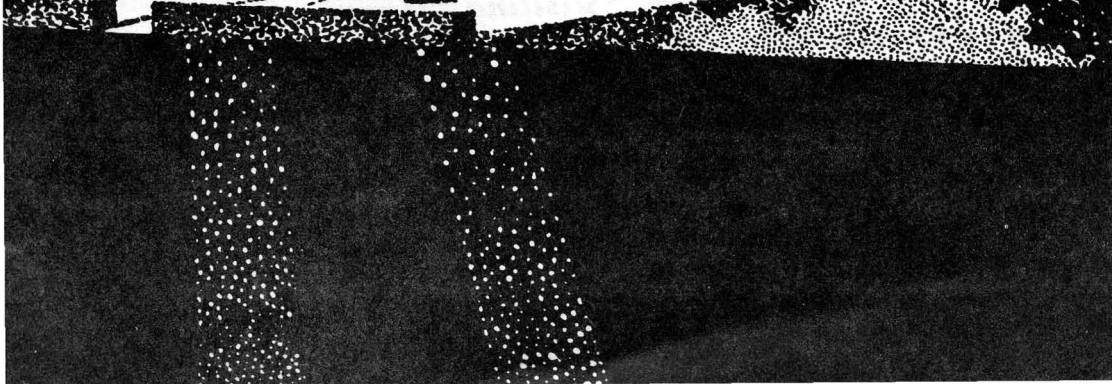
NOVA SCOTIA SANATORIUM
VOL. 5 AUGUST - SEPTEMBER, 1970 No. 8

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Health Rays



HEALTH RAYS

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Sanatorium Visiting Hours

NOVA SCOTIA SANATORIUM

POINT EDWARD HOSPITAL

DAILY: 10:15 — 11:45 A.M. Monday — Saturday: 3:30-4:30; 7:30-8:30 P.M.
DAILY: 3:15 — 4:45 P.M. Sunday and Holidays: 3:00-4:30; 7:00-8:30 P.M.
DAILY: 7:30 — 8:30 P.M.

Absolutely NO VISITORS permitted during

QUIET REST PERIOD 1:00 P.M. - 3:00 P.M.

Patients are asked to notify friends and relatives to this effect.

Mother's Apron

I used to say to mother
 When friends dropped in for tea
 "Oh, mother, take your apron off,
 And don't embarrass me."
 But mother simply smiled and said:
 "I will when I get through —
 But I have need of it just now,
 There's work for me to do."

I argued and apologized,
 And often I opined
 That wearing aprons gave a hint
 That one was not refined
 But mother took the restless babe
 Upon her aproned knee;
 Quite undisturbed by what I said,
 And rocked on cheerfully.

And when the older boys came in
 A giggling, happy lot —
 My mother, with the babe in arms,
 Would stir the old iron pot;
 And from her kitchen she would bring
 A dinner well prepared
 By loving hands for healthy youths
 Who seldom thought or cared.

And thus to labor and to serve,
 My mother always wore
 A large, white, crispy apron,
 In happy days of yore.
 And when the evening meal was done,
 I'd say, "Oh mother, do
 Take off your apron," she'd reply,
 "I will when I get through."

T'was thus the happy years sped on,
 Her children grew and wed,
 And mother nursed her grandchildren
 In her own children's stead.
 She always found the time to go
 To soothe a neighbor's cough,
 But never could she find the time
 To take her apron off.

The corner of her apron served
 To dry our childish tears —
 It was a screen for peek-a-boo
 For more than fifty years.
 It told each hungry stranger
 Who came shivering to our door,
 "My apron's on — I'm here to serve
 Until life's day is o'er."

So faithfully she worked away —
 She had so much to do —
 And always of her apron said:
 "I will when I get through."
 And when one night, with weary feet
 She climbed the old home stair,
 And with a conquering sigh she sat
 Down in her bedroom chair.

And folding up her apron white —
 As she was wont to do —
 She handed it to me and sighed,
 "Well, daughter, I am through."
 And peacefully she entered into
 Rest — so nobly earned,
 And as the lonely years passed by,
 This lesson I have learned —

My mother's apron symbol was
 Of service — for her King.
 Now in my treasure chest it lies,
 A sacred, precious thing.

— Jane Scott

Happy Memories

There's a humble little cottage, down a little
 country lane,
 Where in by-gone days I'd visit and through
 summer days remain.
 With a couple, old and kindly, many happy
 days I spent,
 'Neath their roof I soon discovered just
 what real contentment meant.
 With a nice big apple orchard and a flower-
 garden there,
 One could find a joy in livin', as you
 breathed the country air.
 Just a stone's throw from the cottage you
 could fish in peaceful streams,
 Stand in fields of luscious berries, that I
 picture in my dreams.
 When the summer days are with us, and
 vacation time comes 'round
 In a lot of different places peace and quiet-
 ness can be found.
 Though today I seldom travel, once those
 things I could attain —
 In a humble cottage, down a little country
 lane.

— Danny W. Boutillier

MY VISITOR

Ralph A. Doherty
Patient, N. S. Sanatorium

One of the main groups of people in our lives here at the San are our visitors, and I would like to pay tribute to the faithful ones who haven't forgotten us here while we are patients. I know when persons who are well and healthy and have a friend, who is ill or shut in, they mean well when they say, "I must go and see so and so," but they never get around to doing this. How many times have you said it yourself? When we are on the "side line" for any length of time, at times we may think that we are passed by. Some of our friends are miles away and the only way they can visit is by way of their letters or cards. When our lives become changed and we are away for any length of time, away from our families and friends, then the role that our visitors play becomes very important. They can keep us in touch with the "outside world" and we can share their experiences. We can make plans for tomorrow and you as a visitor can share our hopes and dreams and sometimes take part in our plans.

When we are patients little things become important and time means a great deal to us. The walk we took last year down by the old fishing hole, this year becomes a very important memory. The laughter of our loved one's voice and the smile of her face becomes priceless with each passing day. When you have a family as I do, each son and daughter stands out and you can remember your children when they look into your face and ask questions. You will remember your son's letters when he says, "Dad you may be sick in the hospital but you are the greatest Dad in the whole wide world, and I always want to follow in your footsteps." What can a father say to sons who say something like that? There is a poem which I remember concerning a boy:

YOUR POWER WITH A BOY

"I took a piece of plastic clay and idly fashioned it one day, and as my fingers pressed it, still it bent and yielded to my will.

I came again when days were past, the bit of clay was hard at last; my early impress still it bore, and I could change its form no more.

You take a piece of living clay and gently form it day by day; moulding with your power and art a young boys soft and yielding heart.

You come again when days are gone, it is a man you look upon; your early impress still it bore and you can change him never more."

Thanks, sons, for something to cling to; I hope you will share my dreams and plans.

They have seven rules here at the San for our visitors:

1. You're welcome when you're well. If you have a cold or other illness it may be serious if we caught it from you.

2. You're welcome during regular visiting hours because if you arrive at rest period or some other busy hour, the hospital may have to disappoint both you and the patient by preventing you from visiting.

3. You're welcome when you follow hospital routine as we have rules such as, "please don't sit on the bed."

4. You're welcome when you don't stay too long. Visitors are like strong medicine to a sick person. The right amount at the right time acts like a tonic and makes the patient feel better. Too many at too long a visit may tire the patient and act like an overdose and do the patient harm.

5. You're welcome when you are cheerful. Keep your troubles to yourself. He'll like you best if you treat him like a grown up, not like someone who ought to be pitied.

6. You're welcome when you show understanding and common sense. Urge the patient to stick with his treatment. The patient will be helped towards recovery by your encouragement.

7. Do these things and you can be sure that you are a welcome visitor.

I want to say to my faithful visitors that you have been as much help as part of my treatment, and I shall never forget you because you have given me strength along my road to good health. Thanks for your smiles and your glad hello's. I shall never forget you.

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THE LUNGS

M. S. LAUDER, M.D.

As the lungs are the organs most commonly affected by tuberculosis, and as their structure and function are responsible both for their susceptibility and for the course and nature of pulmonary tuberculosis, it behooves us to understand how they work and why.

First, let us consider why we need lungs. All living organisms live by means of chemical changes taking place in each cell in the body. The cell is the unit by which the body is composed. They are widely different in size, shape, and function, but their essential structure is the same. And in every cell in the body the chemical reactions essential to life are going on. These processes need oxygen from the air, just as a fire does. It might be possible for a few cells on the very surface of the body to obtain oxygen directly, but the others are shut away from the air. Oxygen must be taken to them, and their waste products removed. This is done by the blood. However, the blood, in its turn, must be exposed to the air in order to permit it to absorb oxygen and give off carbon dioxide from the billions of tiny cells. In the fish, the blood is aerated as it passes through the gills. While gills are suitable for the fish, they are not so practicable for land animals. So the lungs were developed as a substitute.

Each lung is composed of a sponge-like tissue, full of very minute, very thin-walled air spaces, between which run many very fine blood vessels. Each alveolus, as an air sac is called, is ventilated by means of a bronchiole or fine air tube. Each bronchiole is the twig at the end of a branch, the main part of which is a main bronchus. The two main bronchi — one from each lung — join to form the trachea, or windpipe, which passes up through the neck to the throat.

That is wonderful; but it still won't work without some means of changing the air in alveoli. This could be done either by using a pumping station or, more simply, by using the lung itself as one.

The lungs are enclosed in an airtight case, the chest, the only opening being the windpipe. If the size of the case is increased, air enters the lung; if the size of the case decreases, air is forced out of the lung.

In man, the case is the chest. In the middle of the chest is the heart with the big blood vessels entering and leaving it. These, together with the windpipe and supporting tissue, occupy a compartment called

the mediastinum. On either side of the mediastinum is a lung. The big blood vessels and the main bronchus enter each lung close together, then branch out into the lung. The point where the structures enter is called the "root". The rest of the lung is covered with a smooth surface membrane, called the pleura, which is continuous at the root with the same membrane lining the chest wall. It is the same as pushing your fist into a rubber balloon. Your fist represents the lung, the wrist, the root of the lung, and two thicknesses of the balloon the two layers of pleura. It is most important to remember that the one layer of pleura is part of the lung, and the other is part of the chest wall, but that they are not fastened together anywhere. The lung lies free in the chest, except at the root, and the pleural layers serve to permit free movement. The lung normally fills the chest; there is no space between the layers of pleura. They are everywhere in contact, but not adherent, just as two leaves of a book are in contact but not adherent.

The lung is elastic and always trying to contract away from the chest, but cannot do so because no air can get between the pleural layers — that is, into the "pleural space." If the pleural space is opened to the outside, the lung collapses. It should be remembered that each lung has a separate pleural covering, and that there is no connection between the two sides of the chest.

Now the capacity of the chest can be varied by muscular action. This rhythmic variation in chest capacity is what we call breathing, and permits ventilation of the lung by changing the air in it.

The chest is composed of the ribs and the muscles between and over them, and it is separated from the abdomen by a muscular partition, the diaphragm. The ribs are roughly semi-circular, but they hang

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THE PASSION PLAY 1970

ANNE MARIE BELLIVEAU
N. S. Sanatorium

On May 6, 1970, thirteen of us travelling as a group organized by Mgr. J. N. Theriault, pastor of St. Joseph's Church, Kentville, left Halifax, airborne, for a month-long tour of Europe. The purpose of our trip was to see the Passion Play at Oberammergau, so I shall describe that portion of the trip. We also visited Portugal and Spain, and made short stops in Amsterdam, Munich, Vienna, Rome, Lucerne, Paris and London.

Oberammergau is an enchanting village in the Bavarian Alps, 60 miles south of Munich. Some of the homes are decorated, depicting scenes from Grimm's fairy tales such as Hansel and Gretel, and Red Riding Hood and the Wolf. Others have frescoes representing stories from the Bible. There are only a few hotels in Oberammergau but during the "Passion Play Year" most of the inhabitants put their homes at the disposal of the tourists. We stayed in a private home, at the Kruger's, and its cleanliness was surpassed only by Mrs. Kruger's cooking. What delicious rolls we had for breakfast!

The origin of the Passion Play goes back to 1633 when the plague, known also as the Black Death, ravaged Europe. There were only 800 inhabitants in Oberammergau when the plague struck the village, and within a few days 84 of them had died and many more were afflicted. The villagers, naturally, became alarmed that the entire village would be wiped out. Having a strong faith, they went to the church and before the altar vowed that if God spared the village they would, every ten years, stage a play based on the life and sufferings of Christ. From then on, no more deaths took place and those who were ill recovered.

Perhaps you wonder as I did why they vowed to stage a play rather than make a pilgrimage, the form with which we in this country are more familiar. Apparently theatrical performances, usually in the form of Mystery Plays, were quite popular in some parts of Europe as far back as the 13th century. It was quite natural, therefore, that when the villagers wished to give tangible expression of their gratitude to God, staging a play depicting the Passion, Death, and Resurrection of Christ seemed most appropriate.

In 1634 the first Passion Play was inaugurated. It was presented every ten

years until 1674 when it was decided to perform it again in 1680 and each decade thereafter. The 1920 performance was postponed to 1922 due to the catastrophic consequence of World War I, and the 1940 one was cancelled altogether due to World War II. Attendance to the play has shown a steady increase since 1950.

The actors of the Passion Play are all residents of the village, amateur players who carry off their parts as competently as any professionals. They must be born in Oberammergau or have lived there for 20 years. The actors cannot apply make-up nor wear wigs—the men and women of the village let their hair grow long approximately a year before the event. The costumes are hand-made locally, and the actors closely resemble true biblical characters.

The play this year runs from May 18 to September 28, three performances a week. The audience (over 5,000 at each performance) sits in a roofed auditorium with an open arch facing the stage, which is in the open air, with a view of the mountains in the background. The actors are exposed to both sun and rain. In fact, we were told that it snowed on the opening date this year. We were there on May 29 and found it quite cold in the morning. The play begins at 8:30 a.m. and ends at 5:00 p.m., with a two-hour break from 11:00 a.m. to 1:00 p.m. for lunch. It is played in German but is easily followed in other languages through books purchased prior to the performance.

The play is presented using living tableaux, a chorus of 48 voices, and the stage players. The significance of the tableaux is explained by the chorus, and each tableau represents a symbol which forms a link with the corresponding scene from the New Testament. The role of Christ this year is being played by a 36-year old lawyer—his is the most exacting feat of memory and physical en-

(Continued on Page 14)

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Notes From Reports of Meetings

The annual meeting of the N. S. Tuberculosis Association was held in Halifax on May 2, 1970. Dr. H. B. Colford, Acting Administrator of Tuberculosis Control Services, reported that there has been no appreciable decrease in the numbers of new active tuberculosis cases discovered during 1969. The number was 165 compared to 206 in 1968, 174 in 1967 and 217 in 1966. To those 165 new active cases in 1969 must be added 43 persons whose tuberculosis, previously inactive, became active again during the year to give a new treatment load of 208 persons. At the close of 1969 there were in Nova Scotia 369 cases with active lung tuberculosis 17 additional persons with active tuberculosis of other parts of the body. The inactive cases numbered 11,782 for tuberculosis of the lung and 647 for other tuberculosis. During 1969 there were 24 deaths from tuberculosis in Nova Scotia compared to 27 in 1968.

A report of the medical advisory board, also presented by Dr. Colford, indicated that at the last meeting of the board, which was held in October 1969, much discussion took place as to how far the TB Association could go in dealing with respiratory diseases other than tuberculosis and how soon it should start in this new direction. A study was carried out during the summer of 1969 and a report on this was consequently produced. All that could be said as the result of this study was that "Cigarette smoking plays a major role in aggravating pre-existing lung disease, delaying or impeding recovery, adversely affecting the mechanical functions of the organ and probably plays a major role in the etiology of these diseases."

The seventieth annual meeting of the Canadian Tuberculosis and Respiratory Association met in Winnipeg in June 1970. One of the resource persons, Dr. Stefan Grzybowski, Associate Professor of Medicine at the University of British Columbia, suggested that one means of accelerating the rate of decline in active cases of tuberculosis is Chemo-prophylaxis—the administration of the anti-tuberculosis drug INH in order to prevent the disease. Any person infected with the

tubercle bacillus is under some risk of developing tuberculosis, and that risk can be appreciably diminished by a course of preventing drug therapy. However, Dr. Grzybowski pointed out, "In most of us, who have a positive tuberculin reaction as the only evidence of encounter with tubercle bacilli, that risk is very small—and it may seem like using a sledge hammer to crack a nut to take drugs for one and a half years in order to make this very small chance still smaller."

Furthermore, he explained, over one-fifth of the Canadian population is positive to the tuberculin skin tests and it would be highly impractical to place four million people on anti-TB pills.

Which groups of infected Canadians should receive chemo-prophylaxis? Dr. Grzybowski named those people with inactive tuberculosis, who had no previous adequate drug treatment, as the most important group, as about one per cent of them develop active disease every year. Secondly, persons who have come into contact with active tuberculosis for the first time should be offered the course of drug prophylaxis, since the risks of developing disease are very high.

"Tuberculosis infection is particularly dangerous in infancy and adolescence, and recently infected individuals in these two groups should also receive priority. Although it is important to be selective, Dr. Grzybowski advised the extensive use of chemo-prophylaxis in high risk groups, saying this would go a long way toward the rapid reduction of the residual tuberculosis problem in Canada.

HONORARY LIFE MEMBERSHIP: Among the five who were awarded honorary life membership at the annual meeting of the Canadian TB and Respiratory Diseases Association was Dr. Eric Found, former Director of Tuberculosis Control and Superintendent of the Provincial Sanatorium, Charlottetown, P.E.I.

A former patient, Dr. Found first began to work in the TB field in 1937 when he accepted the position of Senior Physician at the Nova Scotia Sanatorium.

In 1942 he returned to his native province where he served as Assistant Superintendent of the Provincial Sanatorium for 15 years.

In 1959 Dr. Found was elected a Fellow of American College of Chest Physicians and in 1962 was nominated Islander of the Year. He served as president of the C.T.R.D.A. in 1964 and also was president of the P.E.I. Division of the Canadian Medical Association the same year.

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Question Box

By J. J. Quinlan, M.D.



Q. When a biopsy is taken of a gland, such as a lymph gland, is the whole gland removed, or is it a section of the gland that is taken?

A. In the surgical removal of lymph glands for examination, it is preferable to excise the entire gland. This serves two purposes. In the first place, the pathologist can get a much better idea of what disease is present in the gland if it is intact and, secondly, contamination of the adjacent tissues by infection or tumour cell is less likely to occur.

Q. When a segment of a lung is resected, do the sutures make an air tight seal, or is it through the healing process that it becomes air tight?

A. When a segmental resection is carried out, every attempt is made to ensure that the separation of the segment from its neighbours is carried out through the proper intersegmental plane. If this is done, only minimal air leak and oozing are present at the conclusion of the procedure. In many cases it is unnecessary to use sutures, the healing process making the lung air tight in a matter of hours. Where the air leaks are larger, or where there is more than usual bleeding, it will be necessary to use sutures. The important thing is that continuous suction be applied to the drainage tube which is left in the pleural space so that any air and/or blood may be evacuated and the lung allowed to quickly re-expand.

Q. Following lung surgery does some internal bleeding continue? Is the drainage tube to handle the leakage of air from the lung, or for fluid that has accumulated?

A. There is always a certain amount of bleeding associated with surgical procedures carried out inside the chest. For example, following the ordinary routine lung resection for tuberculosis, an average of about 400 cc of blood is lost into the pleural space during the first 24 hours after operation. Where the resection has been carried out in the presence of dense adhesions, the blood loss may be considerably more. The important factor here is not so much loss of blood

which can be quite easily replaced, but rather that blood left inside the pleural cavity will clot and thus prevent proper expansion of the lung. It is for that reason that routinely a drainage tube is left in the pleural cavity to remove both blood and, in some cases as noted above, air. The blood is collected in a graduated bottle and accurately measured. If any significant amount is lost, blood transfusion is given.

Q. What is meant by atelectasis?

A. Atelectasis is a condition in which lung tissue becomes airless. It is due to obstruction of the bronchial tube. This obstruction may be due to inflammation of the bronchial wall as in certain cases of tuberculosis, to tumour or foreign body, or most commonly as in the post-operative variety, by secretions which are not coughed up by the patient. When the bronchus becomes blocked, air is unable to enter, and the air already present quickly absorbs. The atelectatic lung then takes on the appearance of liver, becoming solid and bluish red in colour. Small bronchial tubes are more easily blocked than large ones, and consequently while it is not uncommon to have a segmental or even lobar atelectasis, fortunately we rarely see atelectasis of an entire lung where the main bronchus has been occluded. This last variety is known as massive atelectasis and, as might be expected, has a very profound deleterious effect on the patient's condition and must be relieved immediately.

The best treatment of atelecatasis is prevention, and it is for this reason that deep breathing and vigorous coughing are encouraged in the immediate post-operative period following thoracic operations. Once the atelectasis occurs, bronchoscopic examination should be carried out and the usually thick secretion removed by suction.

Q. Most of us recognize poison ivy when we see it, but written articles often make mention of poison oak and sumac. Do we have any poison oak in this area? Does the sumac mentioned in these articles differ from the shrubs by that name on the Sanatorium grounds—such as to the west of the Rehabilitation building?

A. Poison ivy, poison oak, and poison sumac are all members of the Rhus family of trees and shrubs. These plants are

(Continued on Page 16, Col. 2)

Editorial Comment

Health Rays Magazine is published eleven times yearly and we are again combining the August-September issue, which helps us through the period of summer vacations. This makes it seem that some of our material has been on hand for a considerable length of time—such as our photos and write-up of the picnic which was held in early July. It seems like a long time ago, doesn't it.

It has been a lovely summer and most people who were fortunate enough to have vacations or passes must have struck favorable weather. Not only favorable, but down-right hot at times—so much so that we understand that there wasn't an electric fan to be found in any of the Kentville stores at one time.

Among our pleasant experiences was a trip from Yarmouth to Portland on the "Prince of Fundy" for the first time. On that day it was warm and calm all the way across, making it a very pleasant cruise and in considerably less time than one could go by highway. We then spent a number of days in New Hampshire, still favored by very good weather conditions.

As I write this it still seems very difficult to get with the business of gathering material together and getting this issue out on time. We have been literally "all tied up" over the death of our Mother. No matter how we think that we are prepared for such things in the case of someone who is elderly, it is a sad event none-the-less. One doesn't realize just how empty the old homestead can be. . . .

I would like to take this opportunity to thank the many friends for their kind messages of sympathy.

* * * * *

We should offer an explanation to our friends, the Public Health Nurses, regarding subscriptions. The Department has cut the number of subscriptions to the equivalent of one copy per office, rather than one copy to each nurse as before. So, it isn't that you have been forgotten; it is likely just a move in the direction of economy!

THE LUNGS —

(Continued from Page 3)

down. The centre of the curve is lower than the ends so that the circles overlap. When these ribs are lifted by the muscles towards a horizontal position, it is evident that the size of the chest is increased.

The diaphragm is not a flat partition but is curved upwards very considerably. When the muscle in it contracts it is flattened out, thus increasing the size of the chest. This is the method used in ordinary light breathing, the movement of the ribs being reserved for heavy breathing.

We have, therefore, an effective means of aerating the blood by exposing it to air that is constantly being changed.

All the blood that reaches the heart from the body goes directly to the lungs before it is returned to the body. Therefore any germ in the blood has a chance at the lung; likewise any germ carried in with the air may cause trouble.

The lung, however, is not defenseless. The air passages are moistened constantly by secretions which trap dust and germs before they get any distance. The lining of the bronchus, besides being washed, is covered with extremely fine hair-like structures, which are constantly in motion, sweeping any matter upwards toward the windpipe where it is coughed up.

— The Valley Echo

HEALTH RAYS

GOLDEN JUBILEE FUND

Contributions to this fund may be addressed to:

*Health Rays Jubilee Fund
Nova Scotia Sanatorium
Kentville, N. S.*

An official receipt will be sent to all contributors. Your donation will help Health Rays to survive.

The standing of this fund as of August 28, 1970:

Previously acknowledged \$3,130.26

Recent contributors:

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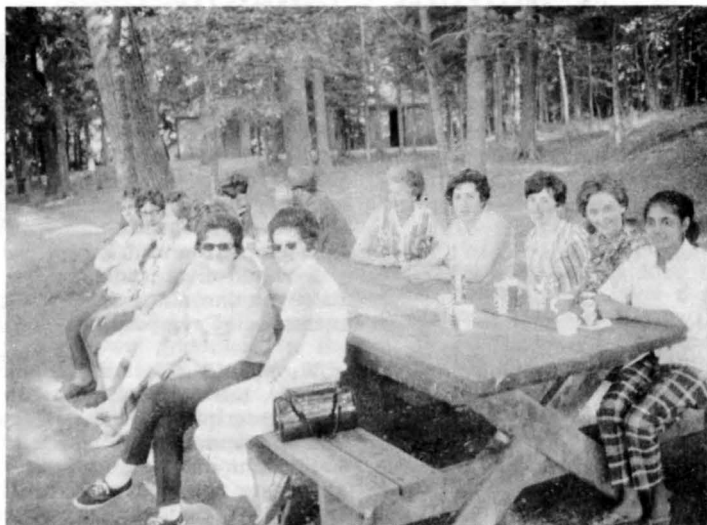
Nil

Patrons:

Sidney B. Brown
Genevieve Carter
Mrs. Keith Morton

Total 28.25

Grand Total \$3,158.51



Shown above are patients and staff at the N. S. Sanatorium Picnic. Lack of space prevents naming all. If it is true that "the best looking ones hide from the camera" they must, indeed, be a good-looking group judging from the ones who are shown in the pictures. Photos are by Dr. J. J. Quinlan.



Sanatorium Picnic

The Sanatorium Picnic for patients and staff was a huge success in every way. The storm that had been forecast did not materialize, and the day was perfect. The sight was the Kentville Research Station Picnic Grounds and was ideally suited to our purpose, having sunshine, shade, tables with benches and, not least important a barbecue pit for the male members of the Dietary Staff to barbecue chicken (and themselves to a lesser degree). Mr. Moody of the Research Station Staff in charge of the picnic grounds, had sprayed the area so that there were practically no mosquitoes, even in the evening.

Staff members participated with enthusiasm, with the nurses providing cars for the majority of the patients and most went for drives before going to the picnic grounds. We believe that 71 of the patients attended—out of the 75 on the list. The staff members exceeded their estimate, with 94 expected and possibly as many as 120 in attendance. Fortunately Miss Quinlan allows for extras when planning the provisions, for we understand that just about everything was used up.

Musical entertainment was headed by Ken Wheatley and his trio known as The Fugitives. By request several patients took part as well for solo numbers. They were John Googoo, with two guitar num-

bers; Doug Smith who sang two selections, and Reg Clements who played and sang two numbers.

Front: Mrs. Sarsfield, Peggy MacEacheran, Anne Marie Belliveau, Dr. Maria Rostocka, Eleanor Chase, John Googoo, Lucie Furlot, Back: John Lawrence, John Akin, Jean Ells.

A number of patients played croquet, thanks to Dr. G. A. Kloss who lent his croquet set for the occasion.

Our thanks to the members of the staff who provided cars for transportation, to the musicians who provided the entertainment, to the Kentville Research Station for the use of the picnic grounds and, above all, to Miss Quinlan and the members of the Dietary Department who did most of the work involved in making this such a successful outing.

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Chaplain's Corner

LAUGHTER

DR. DOUGLAS ARCHIBALD
United Church Chaplain,
N. S. Sanatorium

One of the outstanding events for the parents of a new baby is the day when their progeny gives the world its first smile. That date is promptly set down in the baby's record book and heavily underlined. The cynic might say it was not a smile at all but simply a grimace, the result of a pain from an over full stomach, but you could never convince the parents that it was anything but genuine—a hundred per cent smile.

As we come to maturity we discover there are different kinds of laughter. Long ago the writers of the Bible recognized this and spelled them out. Some of these we shall look at now.

THE LAUGHTER OF SCORN AND RIDICULE:

There is a kind of laughter that is mean and injurious and intended so to be. The Old Testament tells of Nehemiah with his vision of the walls of Jerusalem rebuilt, and its former glory restored. Along with a group of followers he begins to bring his dream to life. They start to rebuild. Their enemies gather to laugh at them. They go into a huddle. They point their fingers in scorn at Nehemiah. They ridicule him, and he records the actions of his enemies in the words, "They laughed us to scorn and despised us."

There are some things Christians should scorn with laughter such as the empty claims of the forces of evil; the shallow, meaningless excuses that people make when asked to take some worthwhile responsibility. There are sham and hypocrisy. They, too, deserve the laughter of scorn. We do well, however, to be careful of the scornful laughter that would hold some earnest, sincere person up to ridicule with the purpose of making him seem small in the sight of others and his own eyes.

How often it is the word of encouragement such a person needs and deserves instead of the laughter of scorn and ridicule. How often a good cause has been permanently injured just by the curled lip of scorn being turned on it. It can be a powerful weapon to hurt and harm.

THE EMPTY LAUGHTER OF THE FOOL:

Here again we find in the Bible a comparison that is apt, made by the writer of Ecclesiastes when he says, "For as the crackling of thorns under a pot, so is the laughter of fools." There is a loud, raucous, harsh laughter which comes from the mouth of someone who is devoid of decency and good sense. We have heard it often. It is frequently that person's reaction to something foul and unclean, to something that smacks of the indecent; the empty head and cruel heart.

This ancient writer who makes this comparison has described this kind of laughter well when he says it is like the crackling of thorns under a pot. A crackling fire is not a hot fire. The wood that crackles as it burns is unsatisfactory. It does not last. That is why we prefer hardwood to soft for our fireplaces and stoves. The hardwood burns quietly and steadily, and lasts. The other flares up and is gone. The empty laughter of the fool lacks judgement and consistency.

Haven't you heard that kind of laughter? It flares up and is gone. It is ill timed and badly judged. A person is known by that at which he will laugh, just as well as by the friendship he makes.

THE LAUGHTER THAT DOETH GOOD LIKE MEDICINE

We take medicine when we are sick to bring us back to normal health. The writer of the Book of Proverbs saw medicinal value in laughter.

During the early days of the Second World War, Dr. Leslie Weatherhead wrote a book to which he gave the title, "This is the Victory." One section of the book he entitled, "Some of Faith's Allies," and there he lists such allies as Faith, Beauty, Patience, Hope, Truth and Humor. There, in those dark days, when there seemed to be but one thing of which the people of the British Isles could be sure, and that was the terrible struggle and suffering of an all-out war with its "blood, sweat, and tears," this great preacher and student of human nature reminded them of the need of humor, with its laughter, to brighten their burdens and keep the lamp of faith burning.

There was a time when it was thought to be a sinful thing for people to laugh, and entirely unchristian. Lord Chester-

field said, "How low and unbecoming a thing laughter is," and then he goes on to say, "I am sure that since I have had the full force of my reason nobody has ever heard me laugh." We pity his poor wife and family! In contrast with this we think of Jesus and the joy that was His, so much so that his enemies spoke of Him as, "A gluttonous man and a wine bibber." Someone has said, "Jesus must have been the most radiant man to be found in His day in Palestine." Little wonder we read, "Then were the disciples glad when they saw the Lord," when he came to them in the upper room after the resurrection.

Later on, St. Paul would write to a group of early Christians, "Rejoice, and again I say, rejoice." We find St. Francis of Assisi capturing with a smile and radiancy an age that had grown old and gray, and we remember the words of Robert Louis Stevenson, an exile from his native land in search for health. Now he is beset by great weakness, and death isn't far away and here is his prayer, "Give us to awaken with smiles; give us to labor smiling; as the sun lightens the world, so let our loving kindness make bright this house of our habitation." What a brave prayer it is! He had overcome his sickness and fears like the great master before him who could say to His followers, "Be of Good Cheer, I have overcome the world."

One thinks of this issue of the **Health Rays** as it goes out to former patients, scattered far and wide from the East and West Infirmaries, or the old Pavillions up on the hill. Then there are those who are on the cure now, all who may read the words I have written. There are many blessings I might wish for you wherever you are today but among life's choicest gifts are the qualities of heart and mind that will give you, "The merry heart that doeth good like medicine." It is like Shakespeare's description of mercy, he who has it is twice blest. It blesses him who gives and him who receives.

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THE REGISTER, BERWICK

RON ILLSLEY

ESSO SERVICE STATION



RELIGIOUS SERVICES AT THE NOVA SCOTIA SANATORIUM

PROTESTANT

Worship Service (Chapel)

Sunday: 10:00 a.m.

Vesper Service (Station San)

Monday through Saturday: 6:25 p.m.

Sunday: 5:45 p.m.

This Is My Story (Station San)

Tuesday 7:00 p.m.

Communion is served quarterly in the East and West Infirmaries.

ROMAN CATHOLIC

The Sacrifice of The Mass (Chapel)

Sunday: 7:00 a.m.

The Rosary (Station San)

Monday through Saturday: 6:45 p.m.

Sunday: 6:15 p.m.

The Hour of the Crucified (Station San)

Sunday: 6:30 p.m.

Notes And News

Dr. Holden and Dr. Quinlan were on vacation during the month of August and have now returned, looking sun tanned and rested.

* * * *

Mrs. Violet Silver has been on sick leave for the past seven weeks, at the time of writing, and we hope that she will soon be returning to the Rehab Department.

* * * *

Congratulations to Ralph Doherty on the satisfactory completion of his course leading to a certificate as a Certified Jeweller.

* * * *

The staff of the Nova Scotia Sanatorium extend their sympathy to Donald and Allan Brown, as well as to other members of the family, on the death of their mother, Mrs. Ethel Brown of Lawrencetown, who passed away on August 28th in her 88th year.

OLD TIMERS

We have a goodly number of notes from Anne Marie, some of which she gathers from Le Petit Courier:

Congratulations to the former Josephine Muise of Meteghan River who was married in June to Mr. Hanna of the Staff of Ste. Anne's College. Their honeymoon was spent in London. Josephine was among the Clare District High School students at the Sanatorium in 1967.

Bob Melanson of Belleville, Yarmouth County, who was here in 1953 was visiting the San in July. He tells of seeing Mrs. Dorothy Muise (formerly Hubbard) of Yarmouth who was here in 1961, and her sister Mrs. Gladys Surette, also of Yarmouth, who was here in 1956. They are both well.

Bob also sees Theodore Muise of Quin-an. Theodore was here in 1962 and has since sold his store.

Another old-timer who cured in Roseway with Bob, is Simon Saulnier who works as a barber in Pat Comeau's Barber Shop in Saulnierville. Both Simon and Pat keep well.

Bob also sees Bill Doucet of Yarmouth occasionally, and Mrs. Rosilda Deveau of Cape Ste. Marie. They, too, are well.

Stella McKeen of Aspen, Guysborough County, who was here in 1936 attended the convention of the Order of the Eastern Star that was held in Kentville early in July, and visited her friends at the San.

Lou Dakin, Digby, who was here in 1946, visited here in July also. He works as a freight clerk at the ferry terminal in Digby.

Marjorie and Hugh Cook of Truro who were in 1956 and 1962 respectively, dropped in for a visit while on vacation. They seemed to be in the best of health.

When Mary and Percy Doucet were down to Yarmouth on holidays they stopped in Comeauville to see Mrs. Agnes Comeau who was here in 1967. Mrs. Comeau was busy making pies and she has kept well.

Gerald Robertson who was here in 1945 paid a visit to the San near the end of July. When a patient, he was in the Navy and made his home in Halifax, but now resides in Toronto and works in the electronics industry in Scarborough.

Vivian Talamini of Long Island, N. Y., also visited her friends at the San in July while she was holidaying in Parker's Cove. Vivian was here in 1939.

Frances Toomey, R.N., was visiting her mother in Kentville prior to taking a tour around the world. Frances works at the Royal Victoria Hospital, Montreal, and was a patient here in 1955.

Lillian Legacy, Amherst, here in 1942, was visiting friends at the San in July. She wished to be remembered to her friends at the San.

Elliott Cooley, Truro, who was here in 1941 has just returned from Ontario and was on a business trip in the Valley when he dropped in at the San for a short visit.

Barb (Cochrane) and Bob Hagen were vacationing in the Valley in August. They now live in Sarnia, Ontario, and have four children. Bob says that they are getting along fine and "making a million dollars" but Barb felt that he may be exaggerating!!! Both were here in 1947.

When Bun and Bessie Akin were on vacation they saw Mrs. Florence Bauchman of Falmouth. She was here in 1949 and has been well since then.

In Shelburne they saw Vange and Allan Whippie (a former San romance). Allan works as bookkeeper in a garage, and Vange works as a C.N.A. at Roseway Hospital.

In Liverpool they ran into Kelly Croft of West Dublin who was travelling around that part of the province.

Joan Walker tells us that Mr. and Mrs. Douglas MacLeod of Baddeck, were here early in August to see Dr. Holden. He was a patient here about 1945 and visiting the Sanatorium for the first time since his discharge. They were attending the convention of Order of the Eastern Star, Mr. MacLeod being a Worthy Patron of the Victoria Chapter, No. 19 of Baddeck and is employed with the Department of Highways.

A clipping has come our way showing a photo of Monsignor J. H. Durney and the caption reads: "Patients from Camp Hill Hospital are enjoying a series of Sunday drives this summer provided by volunteers from a number of local organizations. Monsignor Durney is organizer of the drives." We remember, with gratitude, that he used to organize Sunday

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drives and many other "extras" for our San patients.

Also, some of you (the male readers anyway) may have noticed a bevy of attractive young ladies on the front page of the Chronicle Herald July 13 issue, with a further picture on an inside page. Anyway, one of them was Esther Blaxall who was a patient here in 1965 and the young ladies were candidates for the Miss Halifax contest for the Halifax Natal Day Ceremonies.

Recently Mr. Thomas Sing visited and showed us the school grades of Bernie Hum, Halifax, who was here during 1966-67. Bernie completed Grade IV while at the San and his teachers remarked that he was an excellent student. We are pleased to report that his marks were in the high 90's except for one mark in Industrial Arts. Keep up the good work, Bernie.

Mrs. Margaret Monroe, here in 1967, was a recent visitor. She and her husband, Rev. William Monroe, are being transferred to Vermont. It will be remembered that Mrs. Monroe and Virginia Wheaton sang duets on a number of occasions at Chapel services.

Marguerite MacLeod visited the Sanatorium on August 26 and here are some notes from her:

On Saturday, August 22, Max and I motored to Shelburne to keep a supper date with the Wessell's. Arriving in the town, we went in to Robertson's Hardware and had a brief conversation with Roy O'Donnell, owner of the store. He had just had the store completely renovated and modernized. Roy was a Sanatorium patient in the early sixties, and deserves much credit for his enterprise.

Crossing over to Shelco, we ran into Bertha Allen and had a most enjoyable chat with her. Bertha cured at the San in the 'Forties.

When we arrived at our destination we learned from Olive Wessell that Gaston d'Entremont, who spent a few months as a youth at Roseway Hospital, is now a parish priest in Shelburne. Olive, who was also a patient at Roseway in its earliest days, is now Business Manager of the institution.

Rev. J. A. Alton Alexander, who was student chaplain at the Sanatorium some four years ago, took a course in alcohol studies at Rutgers University, New Brun-

swick, New Jersey, during the summer. The course was very interesting, but the heat was excessive, so that he was glad to get back to Nova Scotia and his Milton-Charleston-Port Medway charge.

About a week ago we had a most delightful visit from Alta Covert, former Rehab. Secretary, and hubby Murray and family. They were camping for the weekend at Ponbook Lake and drove in to spend the afternoon with us.

From Truro friends we learned that Mary Grace, an Old Timer of the Thirties and porchmate of mine on East I, has retired and lives in Truro. After being discharged from the San, Mary did secretarial work for Cunard Lines in Montreal until her recent retirement. Prior to her San days she was on the staff of Mack Business College in Kentville.

Anne MacLeod, who was also a patient in the Thirties, and subsequently on the staff, still lives in Truro and teaches school there.

Two other Old Timers, Lic. Ernest and Ellen Nickerson, wrote recently to say that they had spent part of their vacation in Tallahassee, Florida, and part in Nova Scotia on Cape Island. They live in Hatfield Point, New Brunswick, now, and Ernest pastors several churches in the area.

Marlene Vivian Watt, Barrington Passage, here for a short time in 1966-67, was married on August 22 at St. Philip's Catholic Church, Barrington, to Rudolph J. DeRose. Marlene is a third year student at Dalhousie University.

In Appreciation

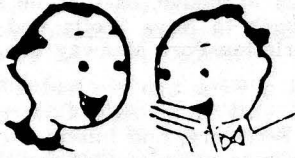
I would like to sincerely thank Dr. J. J. Quinlan, Dr. A. Laretei and the Annex nurses for my treatment at the N. S. Sanatorium.

I will always remember, too, the patients and nurses of East III, who were so very good to me after my operation.

Since I expect to be going home soon, I want to say goodbye to all my friends here, and to wish them a quick return to good health.

Robert Morton

Just Jesting



Before marriage a man yearns for a woman. After marriage the "Y" is silent.

* * * *

A TV executive's secretary, expecting a baby, started her letter of resignation: "Dear Boss, I'm getting to big for this job".

* * * *

Boss to departing secretary: "Miss Ruth-erford, when the little bell on your type-writer rings, it doesn't mean it's time for a coffee break".

* * * *

A boss was upset because his new stenographer was late. Fuming, he said as she finally came in: "You should have been here at nine!" "Why?" she asked, "What happened?"

* * * *

The old narrow trails where two carts could barely pass without colliding are happily being replaced by splendid wide highways on which six or eight cars can collide at one time.

* * * *

Sign in a Pentagon office: "Look alive, remember, you can be replaced by a button".

* * * *

Her dress was like a barbed wire fence — enough to protect the property but not enough to spoil the view.

* * * *

A woman is a person who will spend twenty dollars on a beautiful slip and then be annoyed if it shows.

* * * *

A boy becomes a man when he stops asking his father for money and requests a loan.

* * * *

Wife at breakfast table to grumpy husband. "Look on the bright side. In sixteen hours you'll be back in bed".

* * * *

When the woman motorist was called upon to stop, she asked indignantly, "What do you want with me?" "You were travelling at forty miles an hour," answered the officer. "Forty miles an hour? Why I haven't been out an hour", said the woman.

NURSERY RHYME

Mary had a little lime
And quite a lot of gin,
Everywhere that Mary went
She didn't know she'd been.

* * * *

What can a giraffe do that you can't? —
Kiss the Jolly Green Giant.

* * * *

What do you get when you cross a mink
and a kangaroo? A fur coat with pockets.

* * * *

Husband to wife: "Well in a way it's a
two week vacation — I take a week and
then the boss takes a week."

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Dolly had returned from her first day at school. "Well Darling", asked her mother, "What did they teach you?" "Not too much", replied the child, "I've got to go again".

* * * *

Father looking over the report card, to son: "One thing in your favor — with grades like this, you couldn't possibly be cheating".

THE PASSION PLAY —

(Continued from Page 4)

duration. The cross he carries weighs 80 pounds and he hangs on it motionless for 20 minutes.

It is hard to describe the Passion Play, one must really see it to appreciate it. I hope that I have given you some inkling of it. One of the things that impressed me was the absence of loud stage effect sounds; even when Christ dies on the cross the rumble of thunder is not a loud one and does not detract from the scene on the stage.

The last tableau, the Triumph and Glorification of Christ, will remain vivid in my mind for a long time. The chorus, to the accompaniment of the 65-piece orchestra, sang Dedler's "Hallelujah," and the scene reminded me of the passage in the Bible where Peter, James, and John said to Our Lord, "It is good to be here"—it was so beautiful and peaceful a tableau.

Ins And Outs



NOVA SCOTIA SANATORIUM

Admissions: June 16 to August 15, 1970

MRS. MYRTLE WHALEN, Highbury, R.R. 3, Kentville; MRS. ANNE DUBE, 2094 Elm Street, Halifax; EDWARD CLARK, Box 1003 Dartmouth (Halifax County Hospital); JUDITH GAIL MacKENZIE, P. O. Box 161, Canso, Guys. Co.; MRS. VIOLET M. JOUDREY, 448 Main Street, East, Kingston; LEONARD PATRIQUIN, 836 Summar Street, New Glasgow; BELOMIE (BEN) DEVEAU, Little Brook, Digby Co.; FREDERICK CARL DENNIS, Port Williams, P. O. Box 143, Kings Co.; JOSEPH ALPHEE POIRIER, 1271 Wright Avenue, Halifax; MRS. VIOLET ROSALIE CROFT, Danesville, Italy Cross, R.R. 1, Queens Co.; MRS. MARIE ELIZABETH FLYNN, Meteghan River, Digby Co.; ARTHUR MILLETT ABBOTT, 758 Prince St., Sydney; FREDERICK JAMES BISSETT, Cow Bay, R. R. 1, Eastern Passage, Halifax Co.; LINDA MARLENE MURPHY, 345 Prince Street, Truro, Col. Co.; WILLIAM FREEMAN AULENBACK, Farmville, R.R. 1, Blockhouse, Lun. Co.; JOSEPH BENJAMIN THOMAS, Box 26, East Preston, Halifax Co.; AMEDEE JOSEPH DUGAS, Grosses Coques, R.R. 1, Church Point, Digby Co.; TAMMY LYNN ANDERSON, 5691 Cogswell St., Halifax; AUBREY GIDEON CORKUM, Pleasantville, Lun. Co.; MRS. MARGUERITE DIMOCK, 63 Maple Ave., Wolfville; ROY WILLIAM FREDERICKS, Bedford, R.R. 1, Halifax Co.

Discharges: June 16 to August 15, 1970

MRS. MADELINE P. FERGUSON, Apt. 1, 13 North St., Dartmouth; ORGERINE CLAYTON, c/o Nancy Jackson, 2100 Maynard St., Halifax; ANNIS CLAYTON MOSHER, New Germany; EVELYN MARION FREDA, Home for the Disabled, Dayspring, Lun. Co.; MRS. CHRISTINA CHISHOLM, 117 College St., Antigonish; MRS. KATHLEEN OLIVE ZWICKER, Somerset, Kings Co. (EXPIRED); CHARLES H. CROWE, 17 Sutherland St., Sydney; FRASER KEITH CONNELL, 239 Lower Truro Road, Col. Co.; MRS. MARIE SAULNIER, Box 68, Saulnierville, Digby Co.; MISS MARY V.

LOWERY, 33 Clearview St., Halifax; LAWRENCE AUBREY OSMOND, c/o Canada Manpower, Dartmouth; ERNEST RUSSELL PARIS, Bayfield, Antigonish Co.; MARK ABRAHAM BOUTILIER, Sheet Harbour, R.R. 1, Halifax Co.; DR. POTTAYIL VARKEY THOMAS, Halifax Infirmary, Halifax; HOLMES MAGEE MORSE, New Minas, R. R. 3, Kentville; JAMES FRANCIS JORDAN, 777 Trenton Rd., New Glasgow, Pictou Co.; MRS. MYRTLE WHALEN, Highbury, Kings Co. (EXPIRED); HAROLD AUSTIN WEBSTER, Cambridge, Kings Co.; WILLIAM A. SMITH, R.R. 1, Goshen, Guys. Co.; ROBERT EARL SWEENEY, 30 A. Hartlen Ave., Spryfield, Halifax Co.; RONALD CHARLES MacLEAN, 135 Main St., Wolfville, (EXPIRED); RODERICK FRANCIS GRANT, Heatherton, Ant. Co.; ALASTAIR E. MacDONALD, 4 Pleasant St., Pictou; JOHN EDWARD DYKENS, Lower Wolfville, Kings Co., (Country Home Nursing Home, Kentville); LAWRENCE ALLAN MacLEOD, Prince St., Pictou (P. O. Box 441); NEIL DANIEL MacKINNON, Head of St. Margaret's Bay, Halifax Co.; ALEXANDER G. MacQUEEN, 39 Alma St., Yarmouth; HILTON LLOYD RUSHTON, Mass-town, Col. Co.; SISTER MARILYN ELIZABETH CURRY, St. Rita's Hospital, Sydney; GEORGE HENRY FLETCHER, 2501 Creighton St., Halifax; MAXWELL ALLEN BARCLAY, Pictou County Home for Disabled, Stellarton; MRS. GENEVIEVE J. CARTER, 42 Lyle St., Dartmouth; ALBERT EDWARD KAY, 27 Grandview, Trenton, Pictou Co.; GEORGE ALFRED RAFTER, Fall River, Halifax Co.; RAYMOND FREDERICK BROWN, Walton, Hants Co.; SIMON OBEDIAH HIRTLE, Milton, Queens Co.; MRS. NGAR CHUNG LAM, 6525 Bayers Road, Halifax; JANET FLORENCE SWINAMER, Western Shore, Lun. Co.; DOUGLAS BENJAMIN SMITH, 24 Hickman St., Amherst; MRS. DEANNA IVY BOND, Charles St., Kentville.

POINT EDWARD HOSPITAL

Admissions: June 16 to August 15, 1970
MR. MURDOCK RONALD ROSS, Margaree Valley; MRS. ALICE JANE RAM-

(Continued on Page 16)

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PETERS' LUNCH



NURSING TIDBITS

WE WELCOME:

To the teaching department, Miss Beverly Gardner, R.N., B.Sc. N.

OUR THANKS:

To Mrs. Whitfield Ells, Kentville, for the beautiful bouquets of gladioli she sends for distribution to patient areas.

RESIGNATIONS:

Miss E. Houghton, C.N.A.; Mrs. F. Harvey, C.N.A.; Miss C. Matthews, C.N.A.; Mrs. W. Moore, C.N.A.; Mrs. S. Forsythe, RN.

SHOWERS:

Mrs. Herbert was honored with a baby shower on August 19 in the Nurses Dormitory by her classmates of 70B, S.N.A.'s.

Mrs. Vickie Dekker of the Dietary Department was also honored with a baby shower in the Nurses Residence on August 20.

Both were recipients of many lovely gifts.

LEAVE OF ABSENCE:

Mrs. Florence Hersey will be attending Dalhousie University next year. We wish her success in her endeavours and hope to see her back next year.

INS AND OUTS —

(Continued from Page 15)

BEAU, Smelt Brook, Victoria Co.; MRS. MARGARET FASCIANI, 84 Grey St., Sydney; MRS. SARAH JANE MacDONALD; Birch Grove; Mr. GEORGE THOMAS MacNEIL, Wallace Road, New Victoria; MR. JOHN GORDON RYAN, Port Hawkesbury; MR. GEORGE IRVING WILLIAMS, 50 Clyde Ave., Sydney Mines; MR. MICHAEL FRANCIS GOULD, Eskasoni; MRS. LOUISE ISAAC, Barra Head; MRS. DONNA MARIE DAVID, Arichat, Richmond Co.; MRS. ELIZABETH BERTHIER, West L'Ardoise; MISS KATE MONTGOMERY, Sydney River; GARFIELD THOMAS MYLES, Mitchell Ave., Dominion; JOHN JOSEPH CAMPBELL, 75 North St., Glace Bay; FRANK MELVIN CLARK, 241 Commercial St., North Sydney; CLARENCE MURRAY MacINNIS, 62 Charlotte St., Sydney; THOMAS GEORGE POULETTE, Eskasoni; MRS. EVA JOHN MacKINNON, 68 Emerald St., New Waterford; KENNETH JOHN MacRAE,

R.R. 2, East Bay; DONALD BEATON RILEY, Port Hastings.

Discharges: June 16 to August 15, 1970

MRS. MARGARET FASCIANI, 84 Grey St., Sydney; NOEL MARTIN, Box 41, Whycomagh; MRS. FLORENCE ELLEN CARR, 181 Queen St., North Sydney; MISS MARY THERESA TONEY, Eskasoni; ERVIN RODERICK WILLIAMS, 19 Thomas St., Scotchtown; WILLIAM JOHN BEATON, 276 6th St., New Aberdeen; FREDERICK JOSEPH CORMIER, 182 Plummer Ave., New Waterford; MRS. SARAH WHALEN, 6 James St., New Waterford; THOMAS GEORGE MacNEIL, Wallace Rd., New Victoria; JOHN CHARLES ROBERTS, Sydney River; GARFIELD THOMAS MYLES, Mitchell Ave., Dominion; NOEL STEVENS, Nyanza; KENNETH ANGUS MacDONALD, 1708 Kings Rd., Sydney River; DENNIS DOYLE, 187 Wilson Ave., New Waterford; HENRY ALBERT ASHE, Birch Grove; MICHAEL FRANCIS GOULD, Eskasoni; RICHARD ADRIAN GALLIVAN, 90 Whalens Rd., Glace Bay.

QUESTION BOX —

(Continued from Page 6)

widespread in North America but in Nova Scotia the only important one is *Rhus toxicodendron*, most commonly known as poison ivy but sometimes as poison sumac. Usually the term sumac is applied principally to the nonpoisonous species of the *Rhus* family, and it is one of these varieties that exists on the Sanatorium grounds.

Her teeth are so yellow that her tongue has to wear sun glasses.

You have pretty hair. Where did you buy it?

DIGNITY is the one thing that CANNOT be preserved in ALCOHOL.

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Nova Scotia Sanatorium

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PETER S. MOSHER, B.Sc., D.H.A.	Administrator
J. J. QUINLAN, M.D., C.R.C.S. (C)	Surgeon
F. J. MISENER, M.D.	Radiologist
A. LARETEI, M.D.	Physician
MARIA ROSTOCKA, M.D.	Physician
G. A. KLOSS, M.D.	Physician
E. W. CROSSON, M.D.	Physician
V. D. SCHAFFNER, M.D., C.R.C.S. (C), F.A.C.S.	Consultant Surgeon
D. M. MacRAE, M.D., C.R.C.P. (C)	Consultant Bronchoscopist
B. F. MILLER, M.D., F.R.C.S. (Ed.) F.R.C.S. (C)	Consult. Ortho. Surg.
P. GEORGE, MD, C.R.C.P. (C)	Consultant Psychiatrist
D. H. KIRKPATRICK, M.D.	Courtesy Consultant in Anaesthesia
C. E. JEBSON, M.D., C.R.C.S. (C)	Consultant Urologist
MISS E. JEAN DOBSON, R.N., B.Sc.N.	Director of Nursing
MISS EILEEN QUINLAN, B.Sc. P.Dt.	Senior Dietitian
DONALD M. BROWN, B.A., B.Ed., M.S.W.	Director of Rehabilitation

Point Edward Hospital

D. S. ROBB, M.D.	Medical Superintendent
T. K. KRZYSKI, M.D.	Physician
W. MacISAAC, M.D.	Consultant Bronchoscopist
D. B. ARCHIBALD, M.D.	Consultant Urologist
MISS KATHERINE MacKENZIE, R.N.	Director of Nursing
MISS JOYCE LEWIS	Dietitian
MRS. A. WINNIFRED PROTHEROE	Supervisor of Rehabilitation

Church Affiliation

NOVA SCOTIA SANATORIUM

Co-ordinating Protestant Chaplain

Rev. Dale MacTavish

PENTECOSTAL

Minister—Rev. Robert Cross

ANGLICAN

Rector—Archdeacon L. W. Mosher
San. Chaplain—Rev. W. A. Trueman

ROMAN CATHOLIC

Parish Priest—Rt. Rev. J. N. Theriault
San. Chaplain—Rev. G. E. Saulnier

BAPTIST

Minister—Rev. A. E. Griffin
Lay Visitor—Mrs. H. J. Mosher

SALVATION ARMY

Capt. Charles Broughton

CHRISTIAN REFORMED

Minister—Rev. H. Vander Plaatz

UNITED CHURCH

Minister—Dr. K. G. Sullivan
San. Chaplain—Dr. Douglas Archibald

The above clergy are constant visitors at The Sanatorium. Patients wishing a special visit from their clergyman should request it through the nurse-in-charge.

POINT EDWARD HOSPITAL

ANGLICAN

Rev. Weldon Smith

UNITED CHURCH

Rev. Robert Hutcheson

ROMAN CATHOLIC

Parish Priest — Msgr. W. J. Gallivan

PRESBYTERIAN

Rev. E. H. Bean

SALVATION ARMY

Mr. William Brewer

The above clergy are visitors at this hospital. Besides the above named many other protestant clergy from the surrounding areas alternate in having weekly services for our patients.



The Canteen . . .

IS OPERATED FOR YOUR CONVENIENCE
AND BENEFIT

So Remember . . .

- A good stock of all occasion cards and stationery
- Gift suggestions, Novelties, Cups and Saucers
- Clocks, Watches, and Costume Jewellery
- A wide variety of grocery items
- Ladies' and Men's wear — Nylons