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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.

3:15 — 4:45 P.M. DAILY:

7:30 — 8:30 P.M.

DAILY:

Sunday and Holidays: 3:00-4:30; 7:00-8:30 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.

## Church Affiliation

#### NOVA SCOTIA SANATORIUM

#### **ANGLICAN**

Rector-Archdeacon L. W. Mosher Sanatorium Chaplain—Rev. J. A. Munroe

Minister-Rev. A. E. Griffin Lay Visitor-Mrs. Alice Porter

### **CHRISTIAN REFORMED**

Minister-Rev. J. G. Groen

#### PROTESTANT CHAPLAIN

Rev. Dale McTavish

ROMAN CATHOLIC
Parish Priest—Rev. J. F. DeLouchry
Asst. Priest—Rev. G. E. Saulnier
SALVATION ARMY

Capt. H. L. Kennedy

UNITED CHURCH

Minister—Rev. K. G. Sullivan Sanatorium Chaplain—Dr. D. Archibald

#### PENTECOSTAL Minister-Rev. Glen Kauffeldt

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 ROMAN CATHOLIC Parish Priest-Rev. R. Donnelly

UNITED CHURCH Rev. Robert Hutcheson PRESYTERIAN 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.



#### A MAGAZINE OF HEALTH AND GOOD CHEER

Authorized as Second Class Mail, Post Office Department, Ottawa And For Payment of Postage in Cash

Vol. 48

NOVEMBER, 1967

No. 10



#### IN FLANDERS FIELDS

In Flanders fields the poppies blow Between the crosses, row on row, That mark our place; and in the sky The larks, still bravely singing, fly Scarce heard amid the guns below.

We are the Dead. Short days ago
We lived, felt dawn, saw sunset glow,
Loved and were loved, and now we lie,
In Flanders Fields.

Take up our quarrel with the foe:
To you from failing hands we throw
The torch; be yours to hold it high.
If ye break faith with us who die
We shall not sleep, though poppies grow
In Flanders Fields.

-John McCrae

### Pleasant Memories

Helen Morse Senior Laboratory Technician N.S. Sanatorium

May I share a few pleasant memories with you of a trip that is two years old now and yet remains vividly etched in my mind?

Miss Joan Walker, Miss Virginia Allen, and I (all Sanatorium personnel), together with Mrs. Mae Margeson, who retired this past July, left Nova Scotia by air one evening during the first of April for London and the beginning of an eight-week trip that was to carry us through France, a bit of Spain, the French and Italian Riviera, Italy, Austria, Switzerland, Germany, Denmark, Holland, Belgium, back

My travelling companions were a congenial group and good sports in every respect. I would recommend them highly. Two were always striding off at quite a pace, whilst the third would be gazing up and around and usually at the tail end. Happily, the fourth kept an eye out for her and made sure that she didn't

wander off in another direction. Most weighty decisions were made with the assistance of Joan's "4" faithful playing cards; not always to her advantage, but a useful means of arbitration.

to Paris, London, and home.

We sampled London Theatre—"The Sound of Music" was a delight; Madame Theatre—"The Tussaud's, The Tower, and those gorgeous iewels: Westminster Abbev—a crown boys' choir was rehearsing for Easter and the sound of their voices with the magnificent organ accompaniment was very moving. Whitehall, Buckingham Palace and the changing of the guard; Trafalgan Square and its myriad pigeons; an excellent dinner at the "Cheshire Cheese" (Samuel Johnson's old haunt); a city bus tour—all of the usual "touristy" things, and yet very interesting and enjoyable for a "first timer.

We spent five days in Paris. There is a city to remember and to revisit. The metro made transportation so easy and speedy. Quite often a bus tour will give you a bird's eye view of your city and then you can pick and choose areas for exploration on your own. We spent several enjoyable hours in Montmartre wandering on foot near Sacre Coeur, the huge white Cathedral overlooking the city, and watching the artists painting in a large court nearby. Mae and I left our companions here and had a ramble through the narrow, winding streets to the old and very crowded Montmartre Cemetery with its distinct grave markers and beautiful flowers in small plots and unique con-

tainers.

We left Paris with Joan behind the wheel of our fine, little four-door Simca. It had absorbed our four bodies and 8-plus pieces of luggage in the trunk and was to expand gradually during the trip to accommodate our accumulation of trea-

We kept saying that our guardian angel seemed to be taking care of us as we drove through the countryside, up and around and over the mountains, and into the cities that were new and strange to us. "He" must have had some bad mom-ents but "He" kept his head and so did

Never having seen the mighty mountains of Canada and the USA, the mountains of Andorra, Switzerland and Austria were especially exciting for me, and in different ways. Driving towards Andorra, on our way to Sitges, a coastal resort south of Barcelona, our road ascended higher and higher with sharp switch back curves, leaving the timberline be-hind as we climbed, and snow to the road's edge. The signs reminding one that chains were to be used, and with visibility becoming poorer, did make us wonder a little. (no chains with us, of course) However, the car kept moving us onward and upward until we reached the summit, where the sun was shining brilliantly and the evergreens seemed almost black against the whiteness of the snow and skiers who were dotting the hillsides.

Austria and Switzerland's mountains were thrilling, too, and here we could use the cable cars and chair lifts to really feel their immensity and grandeur.

Probably this is why the small village of Oberammergau remains so clearly in my mind, for it seemed to be surrounded, or partly so, by snow-capped mountains. This picturesque mountain village of the wood-carvers and the location of the world famous "Passion Play", is situated in southern Germany, high in the Bavarian Alps, forty-five miles from Munich.

We stayed a short distance from the village in a very pretty chalet-style guest house with balconies gaily decorated on the side and front with colorful designs and scenes. From our balcony we could look toward the small village of Ettal and the Benedictine Monastery, and in another direction, toward the snow-capped mountains. Here it was, on a very early

morning stroll that I heard the Cuckoos. For a moment I thought that the monks were harboring some of the charming clocks from the Black Forest. Wild primulas were growing in the fields and small deer were abundant in the woods.

Oberammergau is unique because of the "Passion Play". It all came about during the thirty years war in 1633, when the village was afflicted with a severe outbreak of the plague. The village councillors, in order to avert the plague, made a solemn vow to present from then onwards, every ten years, the Passion and Death of Unrist. Legend says that thereafter the plague spared Oberammergau, although it had already claimed some victims. vow was implemented in when the first actual performance was started, and from then on, it has been faithfully kept. After the 1674 performance it was decided to advance the time for the next play to 1680 and to repeat it every ten years from that date.

At first there was only one performance of the play on each occasion and this was held inside the village Church. Gradually, the performances were increased and the scene changed to the churchyard and much later the first seats were installed under cover of a roof. The village council decided to eliminate the existing auditorium for the 1900 series and to build the hall substantially as it is today. When the stage was rebuilt in 1930 the seating capacity was increased from 4,200 to 5,200. The audience is under cover of the roof, whilst the stage is out in the open with the distant mountains rising in the background.

The Play has suffered very few interruptions since its inception. After 16 performances had been given in 1870, the Franco-Prussian War broke out and they were suspended until 1871 when the series was completed with 19 further performances. The 1920 performance was postponed to 1922, due to the unsettled conditions resulting from World War I, the loss of many of the village men, and the lack of good actors. The preparations for 1940 were already in hand when the second World War broke out. Everything had to be subordinated to the overriding demands of the war.

Today, the Play has to be carefully and extensively rehearsed before-hand. The training school for actors is the so-called "Exercise Plays," which are performed every year in the small village theatre during the nine years between each performance of the "Passion Play" proper. The music and choir also require constant practise during the intervening years and thus to some extent the "Passion Play"

sets its imprint on the village, for it is at all times under its influence. The inhabitants reflect, in attude and manner, this influence and all it stands for.

Actual preparation for the Play requires about two years. Every citizen who is a native of the village, or has resided there for at least twenty years, is entitled to co-operate. About 1,400, of whom 600 are actors, collaborate in the production. One year before the Play the men begin growing beards and permit their hair to grow.

Rehearsals commence during the autumn preceding the year of the Play and they are continued every day throughout the winter. All preparations must be completed early in May. Each performance occupies a whole day with a break of two hours at mid-day. In seven hours the spectator witnesses 16 acts—26 scenes of the Passion of Christ from Jerusalem to Golgotha. The scene has to be shifted 40 times during one performance. The use of articial light is banned. The table of the Last Supper is two hundred years old. For the actual Crucifixion there is the Crucifix to which the actor is held fast by devices which do not obtrude. For the actor, this scene, lasting twenty minutes, is a severe physical trial. There are over one thousand costumes for the actors, often very valuable garments and made in the village.

Towards the end of September, as the days get shorter and colder, the performances come to an end. One and one half million people sought admission in 1960, but the total number the Theatre can accommodate in one season is five hundred and twenty thousand.

To visit Oberammegau the year prior to the Play's performance would be an interesting experience as you mix with the kindly people and with bearded gentlemen and watch them freshening the colorful designs on their houses.

Should you plan to attend the "Passion Play", reservations must be made a year in advance. You will be permitted to stay in the village for only two days, as they try to accommodate as many visitors as possible from May to September.

It would be a grand treat to be seated in the Play House and to see this marvelous Play first hand in 1970. What a fine vacation that would make. I wonder how my fellow travellers feel about it?

It is good to have money and the things money can buy, but it is good, too, to check up once in a while to make sure you haven't lost the things money can't buy.

### The Sanatorium Cracker Barrel

J. E. Hiltz, M.D.



The Men's Annex is now a thing of the past. It was built in 1917 to 1918 and served for many years to provide accommodation for some of our patients who were on exercise and able to walk around more than Infirmary patients. When I came to the Sanatorium in 1935, the Annex was one of the buildings assigned

to me. It contained about twenty patients and tray service was available to them. In the early days, two orderlies carried the food to the Annex from the kitchen in a long covered box with two handles front and back. A stranger on the grounds might well wonder whether it was food being carried in or a patient carried out! In 1943, the building was considered to be unsuitable and inconvenient for patient care and so it was converted to a residence for male staff. Many are the stories of happy events and sad occasions, of pleasure and of tragedy that this old building could have told if the walls had been equipped with tongues. It has stood idle and empty since June 4, 1962, when staff living there were transferred to Pavilion 7. Now it is no more, but memories linger on.

Our best wishes go with Mr. Fred Barrett who left us to join the Department of Education on October 18. As Director of Rehabilitation at the Sanatorium and for the Tuberculosis Hospital since February 1, 1956, he has been such an integral part of life at the Sanatorium that he has left a very great void to be filled by his successor, Mr. Donald Brown, B.A., B.Ed., M.S.W., who now becomes our Director of Rehabilitation and Social Services at the Sanatorium. Not only has Mr. Barrett left behind him fond memories of himself. he has left for the rest of us a fine tradition of human relationships and "heart" in his approach to the work of his department. The Sanatorium and all of us who were associated with him are better for his stay among us.

This year the theme will be "Tuber-culosis" when the Department of Public Health holds its annual meeting at the Sanatorium on November 6 and 7. Some two hundred staff members will spend more than one whole day discussing the

problems of prevention, diagnosis and treatment, and the easing of problems created by this insidious and still very troublesome disease. Subsequent issues of Health Rays will carry more information regarding this meeting. We consider it a privilege to host this meeting at the Sanatorium

The following two days, November 8 and 9, the Nova Scotia Branch of the Canadian Public Health Association will hold its annual meeting at the Cornwallis Inn in Kentville. The President is Dr. Clarence Young of Pictou who, for many years, was on the medical staff of this institution and then Medical Superintendent of Point Edward Hospital.

What does a patient expect of his doctor that the latter also expects of the patient. The answer is integrity. Every patient must be able to rely upon what his physician tells him and must have confidence that the prescribed treatment is the very best and is designed to fit his particular needs—for each patient is different in some respect from each other patient. By the same token, the physician has every reason to expect that when a patient promises to do something, it will be done without fail. The cure of tuberculosis is like the yoke on an ox team, the physician and the patient must pull along together joined by a bond of mutual trust. This is integrity.

This month, **Health Rays** celebrates its 48th Birthday. Congratulations to its staff. To say "only two more years until its Golden Jubilee" is something like saying "only 25 more shopping days until Christmas". It comes as a shock but 1969 should be a big year for the oldest Sanatorium magazine in Canada, in North America, and probably in the whole world.

FACE THE FACTS

Life in a TB Sanatorium is a fearful and wonderful experience. Here is found a heterogeneous group of people in close association — a degree of intimacy in personal relationships without equal. And it is here, too, that we are offered the ideal opportunity to learn how to live with others and for others. If we keep ever in the foreground of our thoughts an ageold maxim "Do unto others..." we should emerge from here, in due time, with a host of firm friends, better persons ourselves, and a comforting sense of well-being.

-San-O-Zark

### Self-Discipline And Sanatorium Discipline

None of us likes discipline. We would like to do as we please, to follow our impulses, satisfy our immediate desires. But in many, many things in this life, discipline is an absolute necessity. One of these things is the curing of tuberculosis.

Patients whose future, whose very life is at stake, often must call upon every bit of will power they possess to resist doing things that are detrimental to their condition and their chances of recovery.

In the army, discipline is necessary. In the sanatorium, to obtain the best results, it is also necessary. The motives of sanatorium rules are: Help the patient get well by making things conducive to rest convenient and by taking some of the responsibility off the patient's shoulders. The second motive is economical. To bring about the first motive with the smallest possible staff, this calls for a more strict discipline. From an unprejudiced viewpoint, one realizes we are to assist the patient in getting well. Our superintendent has often stressed the point. The restrictions were not made to take the pleasure out of life but to restore health so that pleasures and the following of one's impulses will not be detrimental.

A doctor always calls in another physician when one of his own family is ill. He himself would probably let his personal feelings interfere with his judgment. The physician called in will analyze the symptoms, diagnose and prescribe with a cold, professional, impersonal thoroughness. So it is with the sanatorium doctor. He must make rules that are conducive to curing tuberculosis. He must look upon the patient's body from an impersonal dispassionate viewpoint.

Occasionally a patient expresses re-sentment at the many "musts" and "don'ts." Most objections can be blamed on the patient's nervous condition. He is just "blowing off steam." But sometimes the patient, chafing at restrictions and isolations, really meaning it, will wail, "This is too much like a jail." Well, you can leave any time you wish, but to a certain extent the fellow is right. He is a sort of prisoner but not of the sanatorium. He is a victim of circumstances and his disease is his prisoner, his disease imposes the restrictions. The sanatorium merely takes some of the responsibility off him. To illustrate further, the patient, if he followed the only known methods of curing rigidly, would necessarily restrict himself even in his own home. The medical officials only advise the things that have proved to be best in getting a patient

well of his tuberculosis. He must, largely on his own, restrict and deny himself to gain a cure that means a return to normal living, to return from circumstantial "prison" to freedom of action.

As an example of following one's desires, let's see how some patients, who are lax in their restrictions of themselves, get along.

There was a girl who left the sanatorium to go home to resume treatment and rest at home. A few weeks later a friend called to see how the patient was getting along and the mother said, "Yes, I am making Sue stay in bed and she is taking good care of herself. She was out until 3:00 A.M. dancing, but I am making her stay in bed until eleven o'clock this morning to make up for it."

The situation is not understood by the mother, because one can tear down more in a few hours' dancing than one builds up in weeks, or even months. You positively can't "catch up" in that.

The active case is in no condition to stand physical exertion and when the patient, fretting at sanatorium rules, paints a glowing picture of what he would be doing if he were home, his imagination is getting away from him, or he is ready to give up his chances of curing his disease. Once in a while we will see a patient who packs and says, "I am going out and enjoy myself and to heck with the consequences." Well, we doubt if there will be much of a good time to be had while toxic poisons are coursing through one's system. Fever, cough, weakness, etc., will surely take all of the enjoyment out of life, of which there will not be much if he persists in omitting the usual rules for curing.

Fortunately, the patient who cannot adjust himself to routine, reconcile himself to rest and other rules, is a rare thing; at most, a very small minority.

Self-discipline, or sanatorium discipline; whether one is at the sanatorium or at home, the doctor advises the same treatment and restrictions. Let us all remember that.

—Mountain Air Via The Link

THE NEW CAR
Father: "How are the gears?"
Mother: "Is the upholstery nice?"
Daughter: "Has it a nice sounding horn?"

Son: "How fast can it go?"
The neighbours: "How can the

The neighbours: "How can they afford it?"

### You Are There With Your Canadian Red Cross

Remember the television program "You Are There," hosted a few years ago by commentator Walter Cronkite? It's an apt title to describe your personal association with the work of our Canadian Red Cross.

Why?

Because through Red Cross you are there when help is needed. In 1966, for instance, you were there to provide bedding and clothing when 14 Kentville people lost their homes through fire. You were there at the bedside of 121 patients in the Nova Scotia Sanatorium and 398 in the Blanchard Fraser Memorial Hospital when they needed blood transfusions. You were there when another 134 people from the Kentville area needed sickroom equipment loans. And you were there when Red Cross Youth members from Kentville schools "adopted" a handicapped child or distributed Christmas gifts to hospital patients.

But you didn't limit your help to the Kentville area. Provincially, you were there to provide 42,269 units of blood for 12,366 hospital patients during the year. Nationally, you were there at 1566 open heart operations. And, internationally, you were there to help thousands of flood victims in places as far apart as Malaysia and Italy.

"Red Cross stretches its donations a long way," said provincial president, A. F. Wigglesworth, recently. "Whether people give their time, blood, or money, they are assured maximum value for their gift."

In spending money, for example, he noted that the latest financial statement for the Canadian Red Cross shows an annual overhead in administrative salaries and expenses of only 6.7 per cent. All remaining funds are channelled into providing the Society's many vital services.

Canadian Red Cross work varies from province to province, depending on the need for its services. In Nova Scotia, for instance, the Society operates 15 services—all directed to helping others in illness, disaster, and need, or in training our youth to become healthier and better citizens.

How Red Cross Began

Originally, Red Cross was conceived to provide a single service: volunteer aid to sick and wounded soldiers in wartime. Its founder, Henry Dunant, of Geneva, Switzerland, pressed for urgent humanitarian action, after seeing the shocking carnage at the battle of Solferino, Italy, in 1859.

Describing the battle in his book, A Memory of Solferino, Dunant wrote:

"Here is a hand-to-hand struggle in all its horror and frightfulness; Austrians and Allies trampling each other underfoot; killing one another on piles of bleeding corpses; felling their enemies with their rifle-butts; crushing skulls; ripping bellies open with sabre and bayonet. No quarter is given; it is sheer butchery; a struggle between savage beasts, maddened with blood and fury. Even the wounded fight to the last gasp. When they have no weapon left, they seize their enemies by the throat and tear them with their teeth... the soil is literally puddled with blood, and the plain littered with human remains . . . .

"I sought to organize as best I could relief in the quarters where it seemed to be most lacking, and I adopted in particular one of the Castiglione churches . . . Nearly five hundred soldiers were there, piled in the church, and a hundred more lay outside on straw in front of the church, with strips of canvas to protect them from the sun . . . .

"Would it not be possible, in time of peace and quiet, to form relief societies for the purpose of having care given to the wounded in wartime by zealous, devoted, and thoroughly qualified volunteers?"

His question was answered by delegates from 16 nations who met in 1863 to draft plans for the kind of society he recommended. The following year, 17 states met to approve the internationally famous Geneva Convention. Another outcome of these meetings was the adoption of the reverse of the Swiss flag—a red cross on a white background—as the society's emblem in honor of its founder. The Red Cross Society was born!

Growth and Organization

When an urgent need is found and filled, expansion soon follows. So it was with Red Cross. Twenty-two nations had signed and ratified the Convention by 1866. Since then, this international movement has grown to include 107 national Societies and 200 million members around the world.

Through the years, too, Red Cross grew broader in scope. Its original concept of voluntary wartime service was expanded to incorporate many peacetime functions. Mainly these are directed to services for the improvement of health, the prevention of disease and the mitigation of suffering throughout the world.

At the national level, the Canadian Red Cross Society is governed by a Central Council consisting of not more than 58 volunteer members. Officers of the Society and members of the National Executive Committee are elected by Central Council from among its members. The National Executive Committee functions from offices in Toronto when the full Council is not in session.

Each province is represented on Central Council by three or more members. Provincially, the organization consists of one Division, known by the name of the provincial Division, in turn, consists of all Branches within the province. Each Branch usually is known by the name of the municipality, or locally, in which it is organized (e.g., Kentville Branch).

#### Red Cross Services

Most people recognize the familiar Red Cross symbol and have a general knowledge of the Society's work. To many, however, it comes as a surprise to learn the wide range of its activities. Every dollar contributed to Red Cross helps to support not one, but many services.

Nova Scotia Red Cross, for instance, operates a total of 15 services—all focussed on programs of help to others. Here's a capsule glance at some of our provincial

society's main programs in 1966: **Blood Transfusion Service** — Saves lives and restores thousands to health by providing blood for transfusion therapy. During the year our provincial service held 175 clinics and received 37,917 donations. **Red Cross Corps** — Mainly interested in the welfare of veterans and their dependents. But these volunteers also assist the handicapped, the blind, the crippled, unescorted children, senior citizens, at blood donor clinics, and at the Halifax Port Nursery.

**Disaster Service** — Provides emergency relief, clothing, feeding and shelter to disaster victims. Our provincial Red Crosss assisted 333 adults and 490 children at 157 disasters, mostly house fires, during the year.

Emergency Aid — Where no municipal or welfare agancy is active, provides medical, optical and orthopaedic assistance. Served 157 cases in Nova Scotia last year

157 cases in Nova Scotia last year. **Homemaker Service** — Assists families when mothers are ill to permit the breadwinner to continue working. Served 238 families with 803 children in the province in 1966.

Red Cross Youth — Organized 1362 branches with 57,355 members in provincial elementary and high schools. Members sponsor a variety of projects, ranging from handicapped and crippled chil-

dren's work to programs of international assistance.

Water Safety — Enrolled 34,488 in swimming classes and conducted 20 leadership training courses in the province.

Veterans' Services — In addition to hospital visiting, the Society operated Red Cross Lodge in Halifax and conducted arts and crafts instruction for hospitalized veterans.

Women's Work — Thousands of volunteer members produce sewn and knitted articles, mostly used in international relief. In addition, our provincial workers produced more than 500,000 dressings for blood donor services last year.

Sickroom Loan Service — Provides free loan of essential equipment to support home care of the sick. Loans in Nova Scotia totalled 4,895 items last year.

Nursing Services—Red Cross home nursing courses are popular in many provincial communities. Last year, 36 classes were conducted with 822 students completing the training.

Your donations to Red Cross are vital in meeting the growing demand for all these services. And every gift means you answer someone's call for help when it is needed. With your Canadian Red Cross—you are there.

#### THREE GATES

If you are tempted to reveal A tale to you someone has told About another, make it pass, Before you speak, three gates of gold. These narrow gates: First, "Is it true?" Then. "Is it needful?" In your mind Give truthful answer. And the next Is last and narrowest, "Is it kind?" And if to reach your lips at last It passes through these gateways three, Then you may tell the tale, nor fear What the result of speech may be.

\* \* From the Arabian

#### **NOVEMBER**

The melancholy days are come, the saddest of the year,

Of wailing winds and naked woods, and meadows brown and sere.

Heaped in the hollows of the grove, the autumn leaves lie dead;

They hustle to the eddying gust, and to the rabbit's tread.

The robin and the wren are flown, and from the shrubs the jay,

And from the woodtop calls the crow through all the gloomy day.

-William Cullen Bryant

## Nursing News

Mrs. Harriet Robertson, R.N., a former retired staff member (O. P. D.), visited friends in Kentyille and the Sanatorium. She looked well and told us she had made seven trips to "Expo".

Mrs. Joan Fox, R.N., has returned with

her family from Ottawa, and it is hoped she will once more be on our Nursing

Mrs. Marie (Maguire) Twohig, R.N., who has been relieving on the Nursing Staff since returning to Kentville, is now a full-time staff member.

Mrs. Maxine Pineo, R.N., who has been a relief staff member for some time, is to

be Head Nurse on Floor 1, East.

Mrs. Kathleen Dakin, R.N., is in the
Nursing Office and Miss E. Jean Dobson, R.N., is on leave attending Mount St. Vincent University for two years.

A most delightful get together of staff members was held on one of the best nights of the year (weatherwise) at the Misses Skerry and Wilson's new cottage

at Borgal's Point. A going-away gift was presented to Miss Jean Dobson.

Mrs. Earl Craig, formerly "Proc" Woodworth, visited the Sanatorium to see old friends. "Proc" was on the Nursing Staff

in the 1930's.

Many staff members have visited "Expo". It might be a good idea if they shared their trip with us.

Mrs. Janice Sullivan, G.N., has resigned and is visiting her parents in California.

Mrs. Cheryl Lamoureux, R.N., has rejoined the Nursing Staff in the Teaching Department.

Other newcomers to the Nursing Staff

include:

Part time: Mrs. Alice Hines, R.N.; Mrs. Lorraine Lovett, R.N.; Mrs. Shirley Lockhart, R.N.; Mrs. S. Hopper, R.N.; Mrs. M. DesBarres, R.N.; Mrs. J. Whitfield, R.N.; Mrs. Bessie Flanders, R.N.; Mrs. Maude Black, R.N. (from full time to part time); Mrs. Beverly Arenburg, C.N.S.; Mrs. Mildred Aker, C.N.S. (a former staff member).

Full-time: Mrs. I. Smith (Nurses Aide); Miss Phyllis Mayers, C.N.A. (Class of 1964); Miss Sharon Stronach (Recently graduated from the School of Nursing Assistants); Miss Linda Morse (Class of '66); Mrs. Gail Poirier (Ward Clerk); Mrs. Marion Johnston (Nurses Aide); Mrs.

Georgie Young, C.N.A.

The Graduating Class held a dance at the Dormitory on September 4, 1967.

Forty student nursing assistants arrived on September 25th. This is the largest class enrolled in the School for Nursing Assistants.

Miss Mary Lou Parker, Mrs. Janet Newton, and Miss Barbara Clark, University students working as aides during the summer, have returned to their studies.

The Nursing Staff were delighted to have Mrs. Muriel Kay, a former House Mother, drop in for a visit while she was in Kentville.

Mrs. Florence England, C.N.A., resigned, but will be returning, we hope, after a "blessed event".

Congratulations are extended to Miss Sharon Stronach on her recent marriage. She leaves with her husband for the Canadian North.

Fire Chief Illsley, Lieut. Baird, Fireman Patterson of the Kentville Fire Department, visited the Sanatorium to instruct the Student Nursing Assistants in Fire Prevention and in the use of Fire Fighting Equipment. Mr. Sweet, Maintenance Department, demonstrated the use of Fire Extinguishers used at the Sanatorium. New members of the Nursing

Staff were also in attendance.

Mrs. Maryon Grant, Provincial Nursing Office, St. John Ambulance, Halifax, visited the Sanatorium recently to discuss with Certified Nursing Assistants the possibility of forming a Nursing Division.

FAREWELL TEA

Staff members gathered in the Coffee Bar on the afternoon of October 17th to pay tribute to Mr. Fred Barrett, who, after eleven years as Director of Rehabilitation, has resigned to accept a position with the Adult Education Department.

Dr. Hiltz, as spokesman for the group, expressed his appreciation of the work done by Mr. Barrett during his years at

the San.

Don Brown, the new Director of Rehabilitation, presented Mr. Barrett with a travelling bag—a gift from the members

of the Rehab Department.

Delicious refreshments were served by the Dietary Staff after which all present had an opportunity to say "au revoir" to Mr. Barrett, and to wish him well in his new position.

#### WHAM!

"Doesn't your wife miss you when you stay out till three in the morning?"

"Occasionally, but usually her aim is perfect.'

#### ON THE WAY TO THE MORNING TRAIN

Mr. Swank: "Are you, too, walking to reduce."

Mr. Frank: "Not on your life! I'm reduced to walking."

## Question Box

J. J. Quinlan, M.D.



(Q) If you start smoking early and quit in your teen years will you get lung cancer?

To produce lung cancer, the irritation caused by the tar that is present in cigarette smoke must be operative for a long period of time. Cancer production from

any cause is a very slow process in

most cases. From the available statistics it would seem that to develop a lung cancer, the individual should be a male who has smoked at least twenty cigarettes a day for a period of at least twenty years. Therefore, a teenager who has smoked for some time and who stopped smoking is in no danger of developing a

smoker's lung cancer. Unfortunately, the boy or girl who begins to smoke very frequently be-comes "hooked" or addicted and finds it extremely difficult to give up cigarettes. The young individual who decides not to take up smoking makes an extremely wise decis-

It should be pointed out that lung cancer, while a dreadful affliction, is only one of the important diseases linked with cigarette smoking. Far more common, and frequently just as fatal, are such conditions as pulmonary emphysema, and coronary heart disease. Emphysema is by far the most common chronic lung disease in the population nowadays, and while we do not know all the factors that work in causing it, there is no doubt that heavy cigarette smoking is of considerable importance.

(Q) Is it desirable to form calcified areas in the lungs when they heal? Why do some people heal this way while other do not?

(A) Calcification in the tuberculous lesion represents a very successful at-tempt of the body to wall-off in-fection and as such it may be considered a desirable occurrence. However, it is by no means necessary for calcification to occur and in the great majority of cases the disease

will undergo healing without any evidence of calcification. The process occurs in disease of long standing and is brought about by the crystalization of lime salts from tissue fluids in the debris of broken down lung. When effective chemotherapy is administered early, calcification is not so apt to occur as the disease is more likely either to resolve completely or to be replaced by scar tissue.

Will an x-ray film disclose without fail an area of the lung regardless of its size and location?

In an ordinary x-ray film of the chest, a not inconsiderable portion of the lungs is hidden by the shadows of solid structures such as the heart, the bones and the diaphragm. This is why, in many cases, we obtain a film of the chest in the lateral projection which is particularly useful in defining the portions of the lungs in front of and behind the heart.

(Q) How long does a TB germ live after

being coughed into the air?

(A) The tubercle bacillus is very vunerable to direct sunlight and dies very quickly. However, it was de-monstrated as long ago as 1908 that sputum of tuberculous patients, allowed to dry in a dark room still contained germs capable of causing disease after fifteen days.

In the infection of a susceptible individual by a person with active pulmonary tuberculosis the most important mechanism is the almost immediate inhalation of the spray

ejected in coughing.

(Q) Does pulmonary tuberculosis ever cause damage to the heart?

Except as a manifestation of generalized miliary tuberculosis, involvement of the valves, lining and muscle of the heart is extremely rare in the disease. However, tuberculosis of the pericardium is not at all uncommon, the pericardium being the membrane covering the heart. In tuberculosis, the most serious aftermath is the production of what we call "constrictive pericarditis" where the pericardium becomes thickened, hardened and sometimes calcified. Heart action is interfered with and if the condition is not relieved failure will eventually ensue. Constrictive pericarditis is treated by the operation of pericardiectomy or surgical removal of the thickened pericardium.

### Patients' Activities

Callow Coach Drive

On October 3rd and 4th our patients were taken for drives in the Callow Coach. This year only one Coach was available, rather than the two which have been brought on other years. This was due to the temporary absence of their second driver and of their senior Hostess, Miss MacEachern. Driver John Dunbar and Hostess Mrs. G. N. Bairsto made three trips, however, and approximately fifty patients enjoyed the outings. Lunches were provided through our Dietary Department and were eaten at pleasant roadside tables.

Our sincere thanks to Mr. R. J. Moore, Manager of the Callow Veterans' and Invalids' Welfare League, as well as to Mr. Dunbar and Mrs. Bairsto.

#### CENTENNIAL TRAIN

There can be few people in the Kentville area who were not aware of the presence of the Centennial Train on October 16th and 17th. The frequent sounding of its distinctive whistle (with the first four notes of "O Canada") set it apart from the usual sounds that are wafted upward from the railway yards.

For those of us who have occasion to make regular trips through town we were doubly aware of its presence! There it was, royal blue in color, stretching prac-tically the full length of the business section, and blocking off the Aberdeen Street crossing! And what a congestion of traffic, with the regular and special police, together with the Kentville Fire Department, busy on every intersection

of the Town!

We were pleased that so many of the patients were able to tour the Train. The usual comments heard afterward were that the exhibits were well chosen and that the project was well worthwhile— with one of the few criticisms being that they would have enjoyed being able to move through the Train at a more leisurely pace. Considering the large numbers of persons to accommodate, the forty minutes, or so, was a reasonable time. The writer, having stood in line for two hours in the evening, found that the pace was far from fast—up to the time that he entered the Train!

Our thanks to the members of the Kentville Rotary Club who, under the leadership of Mr. Don Hiltz, provided most of the transportation to and from

the Train. Through arrangements made by this organization our San patients were permitted to go directly onto the Train and thus avoided the tiring line-up.

#### HALLOWE'EN PARTY

On November 1st, a Hallowe'en party sponsored by the Catholic Women's League of St. Joseph's Parish, Kentville, was held in the Recreation Hall. Members were Mrs. G. Wood, president, Mrs. B. MacDonald, Mrs. B. Williams, and Mrs. E. Guild.

E. Guild.

In the eerie atmosphere of ghosts, witches, coffins, black cats and bats, the patient spent a very pleasant evening. Various games were played with prizes awarded as follows: Auction 45's, Ladies' high: Jean Maillet; low: Mary Berkelaar. Gent's high: Harry Downey; low: Michael Deveau. Crokinole, High: Michael Lucas; low: Arthur Reid. Cribbage, High, Jacques LeBlanc; low: Scott Reid. Special prizes were awarded to Margaret Hurley, Nelson Melanson. Charles Moore. Rose Coson Melanson, Charles Moore, Rose Comeau, Linda Amirault, Percy Wentzell.

The decorating of the hall was done by the students of Clare District Regional High School, who are now patients at the San. These girls and boys did a fine job and their work contributed greatly to the

success of the party.

The highlight of the evening was a musi-cal program provided by "The Isle of Time", a popular Valley group who, with their manager Lorne Fevens, gladly gave of their time and talent to entertain the San patients.

Delicious refreshments were served by the Dietary Department. A special treat -a box of delicious appels-was provided by Mrs. Annie Cleyle, a member of the

Mrs. Mary MacKinnon, representing the Rehabilitation Department, thanked the members of the Catholic Women's League, and the orchestra for making possible a very enjoyable evening.

STOCKS AND CHEQUES
Why is it called a "cheque"? Because 300 years ago in England, when a man put money in the bank, the deposit was recorded by irregularly notching a stick. The stick was then split lengthwise, the depositor keeping one half (the "bank stock") and the bank, the other (the "cheque"). Withdrawing, necessitated matching "stock" with "cheque".

This learned I from the shadow of a tree, Which, to and fro, did sway against a wall:

Our shadow-selves, our influence, may fall Where we can never be.

-A. E. Hamilton

## HEALTH RAY

Vol. 48

NOVEMBER, 1967

No. 10

#### STAFF

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. Marguerite B. MacLeod Assistant Editor

Business Manager . . . . John Akin Subscription Manager . . Steve E. Mullen

Published monthly by the Nova Scotia Sanatorium, Kentville, N. S., in the interests of better health, and as a contribution to the anti-tuberculosis campaign.

Subscription rates \_\_\_\_\_\_ 15 cents per copy \_\_\_\_\_\_ \$1.00 per year

#### COMMENT EDITORIAL

Certainly the most important happening in our Rehabilitation Department in reour Renabilitation Department in recent months was Mr. Fred Barrett's departure from our midst on October 17th, when he transferred to the Adult Education Division of The Department Of Education. The importance of this event is more widespread than merely our loss of the senior member of our Department. Mr. Barrett has made a valuable contribution to the repabilitation program tion to the rehabilitation program throughout the province; first as Rehabilitation Officer with the Department of Veterans' Affairs at the Cornwallis Military Hospital, following his discharge from the R.C.A.F. in 1946. Two years later, he was appointed Director of Rehabilitation for the Nova Scotia Tuberculosis Association—a position which he held until his transfer to the Department of Public Health in 1956. While with the N.S.T.A. he was responsible for directing the in-hospital programs at the tubercu-losis hospitals and sanatoria, as well as visiting and assisting those discharged pa-tients who required rehabilitation ser-

In the time that Mr. Barrett has been directing the program there have been many changes, as one treatment centre after another has closed. Further to this, Mr. F. G. Wellard, Director of Rehabilitation Services, and his staff at the Halifax office and in the project of the project have office and in the regional offices, have taken on the responsibility of providing rehabilitation services to discharged patients. Mr. Barrett maintained his energetic approach to rehabilitation, however, and has continued to put a good deal of himself into his work. In addition to his work he has also been active in the Canadian Mental Health Association and in organizations such as the Valley Amateur Radio Association. He has encouraged community organizations to maintain an

interest in our patients, which is of benefit to the Sanatorium and to the patients alike.

Mr.. Barrett's association with the HEALTH RAYS dates from 1956 when he became Director of Rehabilitation at the Sanatorium. We have continued to feel that this publication is a part of the Rehab Program, and this became more of a reality than a feeling in November of 1966 when Mr. Barrett became Managing Editor. Those of you who read HEALTH RAYS regularly will have realized that in this, as well as in his other work, Mr. Barrett has shown a good deal of enthus-Barrett has shown a good deal of enthusiasm and has endeavored to have each month's issue written around a specific theme. He has tried to present as much original material as possible and has encouraged patients and staff to contribute original articles for publication.

Mr. Barrett will be missed by the Sanatorium—and by the Rehabilitation Department and HEALTH RAYS, in particular. We are sure that we speak on behalf of all in saying, "Thank you, Fred, and good luck in your new job."

Those of us in the Rehabilitation Deheading to be after HEALTH RAYS, essentially Miss Marguerite MacLeod, Mrs. Mary MacKinnon, and myself. We will do our best to carry on the work in the good traditions of the magazine's previous editors. We thank our magazine advantages contributors and publishers, advertisers, contributors, and subscribers, for your helpful support and encouragement.

Do not look for the flaws as you go through life,

And even when you find them, It's wise and kind to be somewhat blind, And look for the virtues behind them. -Ella Wheeler Wilcox

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MISS MARLENE WATT

Queen of the Beaver Dam Sports Meet (Shelburne County) and First Lady in Waiting to the Queen of the Sea (Fisherman's Exhibition, Lunenburg), 1967. Miss Watt is a student at the Barrington High School, and an ex-Sanatorium patient.

According to the West Penn News, a woman stalled on the highway flagged down a passing motorist and explained that she was out of gas. "Would it hurt the car", she wanted to know, "if I drive home with the tank empty?"

### Frosty Morning

Frosty November mornings reveal the beauty of simple things, for this is the season when the most fragile of all common crystals makes a dazzling wonder-land of the countryside. But to see it one must be abroad at sunrise, before the night's chill has begun to relax. The white

magic cannot endure the day.

For that first hour, before the sun has warmed its fingers, every blade of grass and every weed stem is transformed. Frost-edged, they shimmer in an incredible variety of patterns freshly seen. Empty milkweed pods are gleaming shells, jeweled and crusted with diamonds. Brown goldenrod stems are crowned with crystal where the tiny tufted seeds have flown. A drift of maple leaves is a miser's hoard of gold enhanced with priceless spangles. Beneath the oaks, empty acorn cups are tiny chalices carved from

the rarest crystal.

The old barn, weathered by the years, reveals the tough grain of its old boards in the frost patterns. Its shingled roof is a geometric diagram of its forgotten builder's skill, inscribed in dazzling white. The pasture gate could vanish by noon, for it is fashioned of frozen mist. And the pines just beyond the house are, for this

brief hour, hoary with age.

You walk with the sunrise and the frost, frost even in the gleam of your own breath. But as you walk the sun warms the air a few degrees. Here and there a thin curl of mist appears and the night's white magic begins to disappear as the day takes charge.

—N.Y. Times

The doorbell rang the other evening. When I answered it, there was a small boy in an outlandish costume.

He held out a paper bag and shouted, "Trick or treat!."

"Hey, Hallowe'en was a month ago," I told him.

"I know," he said, "But I was sick,"

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## Chaplain's Corner

#### THE SPIRIT OF THE TIMES

Rev. G. E. Saulnier, Assistant of St. Joseph's Church, Kentville

During the past year, we have had a large influx of teenaged patients. Even though you are kept rather busy with your studies, you still have time to think or read about the confusion and turmoil in the minds of youth today regarding life itself and faith of the teenager. May I say at the outset of this article that your thoughts and doubts are perfectly normal and none other than the spirit

of the times in which you live.

At your age, it is a time for action, the time of the happening; a time for soaring, roaring, marching, and dancing. All this, where change in the world and in your lives is the spirit of the times. This time of adolescence is full of mystery and doubt, but a time we must all go through. It is a time when we search for the meaning of life when there seems to be so much uncertainty and change, that we even start questioning ourselves. For all teenagers, it's a time of confusion, a time of noise, a time full of modern music, a time for doing things—if we only knew what was worth doing. It's a time for no longer accepting what others say but for looking at and questioning our own beliefs in our search to find something meaningful . . . for our action depends on our belief in a thing.

History has always been full of change from the time of the cave man to the days of the Roman Colosseum down to the latest youth fads of hair-styles, clothes and dances. In the Colosseum young Christians were thrown to the lions, and died for something they believed in. Today there are teenaged heroes, too, fighting the same kind of battle, holding on to what is real for them and getting "involved" in the really big issues of the

times.

All through history the mystery of youth has continued. Once an Old Testament Prophet told his own people, "Thus says the Lord... These people honor me with their lips, but their hearts are far from me." Today, seeing our own rebellions, our changing times, that same Prophet could say: "Thus says the Lord... These youths do not honor me with their lips, but their hearts are close to me."

Everyone at one time or another asks himself how God and religion fit into this spirit of change. Can Religion handle the riddles of life like creation, suffering, death, and why people act the way they do? "Yes, I want to believe in God," modern youth says, "but I've got to be sure that I'm not just fooling myself, inventing a faith because it makes me feel better."

Some people call it a "crisis of faith", but young people have always been like this, questioning, rethinking and reconstructing the old, patterned ways of doing things. This is healthy and perfectly normal for you at your age to do this. However, you should not spend your every moment trying to revolutionize things which you must go through in order to become a more mature adult later on.

There is a definite plan that God has for you as teenagers. Right now the most important work in your life is your school work. Even though you may be right in saying that the environment is not ideal for study, still you have to put to good use the opportunities available to do your work. Perhaps your tests or exam results may not be the best in the world but what is pleasing to God is that you study to the best of your ability and that you show a sense of responsibility in applying yourself. By doing this, you will not only feel a sense of accomplishment but you will gain much peace of mind and soul. Without a doubt, those who do not work eventually become bored, sad and completely miserable. This has a tremendous impact on a person's prayer-life as well. When one becomes depressed he begins to panic and everything becomes somewhat confused, especially ones confidence in God's help. Therefore, what you have to do, do it well and with faith in God.

If the purpose of life or study seems confused to you, you need not panic. We are all joined together in this and though no one of us has all the answers, for guidance and strength we can lean on one another as we search for meaning and the security of faith in our lives.

Let us be joyful then for God is not dead. He is very much alive and we have found Him in action inspiring these changes in our lives as we live in a world where change is the spirit of the times.

Kindness is the golden chain by which society is bound together.

—Goethe

Living for others is life's fullness; living for self is poverty, nakedness, starvation.

—Theodore G. Weld

### Patients Are People

Eugene T. Kozlowski, Editor Sunshine News, Mount View Hospital Lockport, New York

Since I'm a patient with tuberculosis, I have not only lived through the disease but reflect back upon its emotional aspects. It came as a blow to me as it does to everyone. Every patient is depressed and anxious when confronted with the diagnosis of tuberculosis. No one is made

cheerful by this diagnosis.

All tuberculosis patients must accept a universal struggle: the necessity of regression back to childhood. They must be completely dependent upon doctors, nurses, and non-professional personnel for everything. How well they accept this is a measure of their maturity and closely reflects their childhood experiences with mother, father and teacher, but particularly mother. Tuberculosis means the loss of all freedom, and what is most painful for the man in our society, loss of all aggressive action.

The inability to express physical aggression, of having physical outlets for emotional tensions, often results in hostility to the doctor, nurse, the hospital, or just simply the food. What the patient is really angry about is being forced into a dependent role. He can no longer be the bread-winner, or she can no longer be the home-maker, and they are both threatened with financial and social in-

security.

It seems to me that a considerable proportion of people in these close-knit hospital communities are failing to under-



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people, not cases.

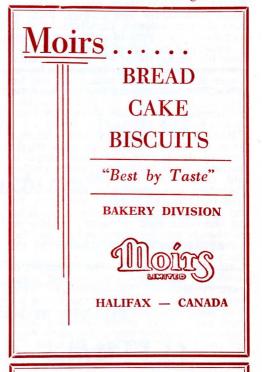
The cases are the filing cabinets, the people are in the beds; and doctors are people. They all come together with their own short-comings and talents. The only trouble is that one of them is "it." It is more important to know "what kind of fellow has the germ" than "what kind of germ has the fellow."

Accepting complete dependence on others is essential to physical and mental rest. But I must emphasize that those entrusted with the patients' care should realize that this dependence on them is

often a resentful dependence.

The patient with the "painless disease" tuberculosis is sick all over till it hurts. He is angry; he is afraid. His cheerfulness is a defence. Awareness by the staff workers of the patients' everyday human needs will help him accept his role of dependency.

—The Oregon Pulse



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### **Old Timers**

November—the month of Remembrance. And how much there is to remember! The sacrifice of so many lives and the bloom of health of so many others to preserve our freedom—so dear—yet so taken for granted. But every month is remembrance time when old timers get together and reminisce. And that is what our Anne Marie and Rose Marie MacDonald of Halifax did one Sunday recently, with the happenings of seventeen years to catch up on! Although Rose Marie has changed her name to Giles, and has three sons going to school, the passing years have served only to heighten her healthy glow and loveliness.

Carl Wagner also had a visit from an

Carl Wagner also had a visit from an old timer—Bob Ross of Culloden, Digby County. Bob, who was Canteen Boy here in 1947, is presently employed in fishing

with his brother.

Lillian Romkey, who is employed by the Department of Public Welfare in Halifax, was in for a check-up. Lillian cured here in 1952, and is looking very well. She sees Isabel MacLellan and Maizie Howard from time to time, and reports that they are both in good health. Both girls were here in 1941, and are currently employed by The Department of Public Welfare and The Tourist Bureau, respectively.

The Tourist Bureau, respectively.
Steve Mullen heard from Tom and Etta (Daye) Murray of Nanaimo, B.C., who wrote to renew their subscription to Health Rays. Both are ex-patients, and some of us also remember Etta as the

kindest and best of night nurses. Tom's jewellery business is thriving and Etta is giving him her full support as "clerk, bookkeeper, stenographer, and errand boy", as well as housewife and nurse. "It's a full-time job, believe me", writes Etta. This vigorous and ambitious couple have a finger in many pies. Etta has taken a course in haidressing, and, characteristically, uses her skill mainly to help the sick and elderly. Tom is one of the heads of the Moose Lodge, is active with the Canadian Legion, and is soon to sponsor cribbage and dart tournaments. They sent regards to friends.

From the Chronicle-Herald we learn that Kevin LeMorvan who was a patient here in 1960, has returned to the Coady Institute in Antigonish as tutor and lecturer. Kevin, who is a native of Manchester, England, and a graduate of the London School of Economics, was a member of the first graduating class of the Coady Institute in 1961. He has spent a great deal of time in Ecuador and Venezuela and since leaving the Sanatorium has married, and has a family of three.

When your columnist was weekending in Liverpool recently, she spent a very pleasant evening with Marjorie Bain, who cured here in the Thirties. A very happy event took place in the Bain home on September 4th when the whole family were together to help their parents celebrate their diamond wedding.

#### **PATROTISM**

He serves his country best Who lives pure life and doeth righteous deed,

And walks straight paths however others stray,

And leaves his sons, as uttermost bequest, A stainless record which all men may read;

This is the better way.

No drop but serves the slowly lifting tide; No dew but has an errand to some flower; No smallest star but sheds some helpful ray,

And man by man, each helping all the rest, Make the firm bulwark of the country's power;

There is no better way.

—Susan Coolidge

### THIS HALF PAGE WITH THE COMPLIMENTS OF

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#### AGE

Age is a quality of mind. If you've left your dreams behind, If hope is cold. If you no longer look ahead, If your ambition's fires are dead, Then you are old.

But if from life you take the best, If in life you keep the zest, If love you hold, No matter how the years go by, No matter how the birthdays fly, You are not old.

-Edward Tuck

#### REHABILITATION IN TB TREATMENT

Unless TB patients can again become useful and reasonably happy citizens, they may fail to complete treatment or may relapse after treatment—becoming a source of infection to their families and to other members of the community.

Rehabilitation is a vital part of tuberculosis treatment. Its objectives are to help the patient, primarily in these areas:

1. Adjust to the treatment.

2. Solve personal and family problems that may interfere with his successful treatment or normal living after he has left the hospital.

3. If he needs to change his type of work, decide on what work he can do, prepare for it and get a suitable job.

4. Resume his old place among his

family and friends.

A rehabilitated TB patient becomes an asset to his community, rather than a liability or a public charge.

-San-O-Zark

#### ROYAL COLLEGE OF PHYSICIANS

On Thursday, May 25, 1967, at a meeting of the Royal College of Physicians of London, held at the new college premises at St. Andrews Square, Regents Park, London, England; a number of new Fellows were elected. Among those to receive this notable senior award in medicine was Dr. C. E. van Rooyen, Director of Nova Scotia Public Health Laboratories, Halifax, Nova Scotia. The Royal College of Physicians of London is the oldest medical licensing body in Great Britain and received its Parliamentary Charter from King Henry VIII in the year 1518.

—The Lighthouse

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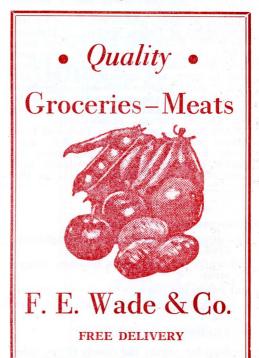
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## Just Jesting

Miss Lacey: "Where is the English Chan-

Michael: "I don't know; we can't get it \* \* \* \* \*

on our television set."

For three nights father had struggled dutifully to help his little daughter unravel the puzzling arithmetic problems she had been given for home work. They weren't making much progress.

"Daddy, it's going to be even worse next week," she warned him.

"What's going to happen next week?"

he demanded, his drooping spirits sinking even lower.

"Next week," she said, "we start using the dismal system."

Bill: "Notice any improvement since last year, caddy?"
Caddy: "Had your clubs shined up,

ain't you mister?" \* \* \* \* \* \*

Mrs. Misner: "Where was the Declaration of Independence signed?"
Ronald: "At the bottom."

\* \* \* \* \*

"Hullo! What are you doing here, old

"I'm on my honeymoon."

"Where's your wife?"

"Well, somebody had to remain at home to look after the shop."

\* \* \* \* \* \* \*

Whatever trouble Adam had, No man in days of yore, Could say when Adam cracked a joke— "I've heard that one before."

Edith: "What are you doing?" Virginia: "I'm knitting. The garage man told me my car needed a muffler.'

\* \* \* \* \* Helen: "It's about time you cleaned out your drawer, it looks like the House of Magic.

Hazel: "You mean Wonderland. I wonder what I got and wonder where it is."

\* \* \* \* \* Harriett: "We women are biased

Mildred: "Yes, buy us this, and buy us

Betty: "Can you drive with one hand?" Nelson: "Yes." Betty: "Have an apple then."

TAKE TIME TO GIVE—It is too short a day to be selfish.

Julien: "You say, why worry about a cavity?"

Russell: "Sure, what's a cavity? It's only a hole. A hole is nothing, so why worry about nothing?" \* \* \*

Joe: "I can tell you the score of the

game before it starts."

Steve: "What is it?"

Joe: "Nothing to nothing before it starts." \* \* \* \*

Elvis: "Don't cry, Troy, I'll play Indian with you."

Troy: "But you won't do, you're scalped already."

Tracey was just home after her first day at school. "Well, darling," asked her mother, "what did they teach you?"
"Not much," replied Tracey. "I've gotta

go again."

Margaret: "How did you come to write a poem on the back of a government bond?"

Florence: "I was tired of hearing you say that my stuff wasn't worth the paper it was written on."

\* \* \* \* \* Doctor Hiltz: "Have you ever been up

Roy: "I don't know, Doctor; what time do you get up?"

A little boy was saying his go-to-bed prayers in a very low voice. "I can't hear you, dear," his mother whispered. "Wasn't talking to you," said the small one firmly.

Two spinsters were discussing men. "Which would you desire most in a husband—brains, wealth, or appearance?"
"Appearance," snapped the other, "and the sooner the better."

\* \* \* \* \* \*

Boss: "Well, did you read the letter I sent you?"

Office Boy: "Yes, sir, I read it inside and outside. On the inside it said, 'You are fired,' and on the outside it said, 'Return in five days,' so here I am."

Visitor: "How many patients are there taking the cure at this Sanatorium?"

Doctor: "Oh, about half of them, I \* \* \* \*

Visitor: "What is your occupation?" Mary: "It isn't an occupation, it's a pursuit. I'm a cure-chaser.

## INS and OUTS

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#### CHILDREN'S HALLOWE'EN PARTY

The Red Cross Branch of Central Kings High School, Cambridge, were hosts on Saturday, October 28th, of a Hallowe'en party for the children in the Annex.

The children had been busy for days cutting out pumpkins, black cats, and witches; so when the big day finally arrived, the walls of the playroom were well decorated with these symbols of Hallowe'en.

Mr. Terry Mitchell, president of the Stu-dents' Council was in charge, Treats were given out, games were played, and all co-operated to see that the children had a good time.

The party ended with a special supper served by the Annex dietary staff.

A passenger in a plane sat relaxed at a window observing the spectacle of the heavens. Suddenly a parachutist appeared and drifted by.

"Going to join me?" cried the parachutist.

"No, I'm very happy where I am."

"Suit yourself," yelled the parachutist,

"But I'm the pilot."

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Born in Factoryville, Pa., in 1889, young Christy was constantly throwing rocks— particularly flat stones—and he often said that this gave him the control of curves which later fooled so many batters. The local baseball team was composed of men who, without a pitcher and an important game scheduled, called on this 14-year-old boy to pitch. He did and Fac-

toryville won.

The first money he earned was during these teen years. Paid a dollar a game by a neighboring town's team he gave the sport his best effort. Always a strong youth, he spared no physical effort to give his best performance each time he pitched. He worked his way through Bucknell College by pitching during the summer. After graduating, when 20 years old, he went to the New York Giants. His greatest years as a pitcher started in 1903 when for three consecutive years he won 30 or more games. In the 1905 world series he led the Giants to a victory over Cincinnati with three shut-out games. This performance continued until 1914, when his over-worked arm began to fail.

In 18 years as a pitcher he had won 373 games as well as the respect of his opponents. But "Big Six", as he was known throughout the sporting world, was a true professional and his interest in the game did not lessen. At this time he became the much loved manager of

the Cincinnati club.

When the United States entered the first World War Mathewson went to France with the "Flame and Gas" division. With thousands of others he was gassed. Thus weakened, he was an easy victim to influenza, and when he returned to this

country he was suffering from what was diagnosed as "chronic bronchits". Neverthe-less he returned to baseball until his trouble was found to be tuberculosis. He attacked this new problem with the same enthusiasm he had shown on the pitcher's

Within three years, and without the benefit of drugs, he returned to baseball as president and part owner of the Boston Braves. All went well until 1925, when during spring training, he found his strength depleted. In spite of the best medical care then available he developed tuberculous pneumonia and passed away October 7, 1925. In 1937 the "Big Six" was elected to the National Hall of Fame. Unquestionably this honor was deserved.

-Stethoscope

#### A DREAM OF PEACE

Last night I had the strangest dream And hoped it wouldn't cease . . .

I dreamed I was a soldier in A great World War of Peace! We had ten million fighting men Enrolled from different lands . . . Men who instead of rattling arms

Were gaily shaking hands!

Suspicion was the enemy . . .

His allies Hate and Greed . . . Their hordes were garbed in envy and

"There is no God" their creed. Our first shot was a trusting smile

That won friends from the start . . . We used our secret weapon then

An understanding heart! Our statesmen all were brilliant men

Who wanted strife no more . . . In fact they spent as much on peace

As they had spent on War! "Twas such a strange and wondrous dream

And yet it could come true . . . This world is big enough for all . . .

If mortals only knew.

—Itam

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