

THE NOVA SCOTIA SANATORIUM

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Health Rays



HEALTH RAYS

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Sanatorium Visiting Hours

NOVA SCOTIA SANATORIUM

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HEALTH RAYS THROUGH THE YEARS

By Eileen M. Hiltz

January 1947. World War 2 had been over for six months, but staff shortages continued at the Sanatorium in all departments. The number of full-time doctors on the medical staff was two! — Dr. Miller and Dr. Quinlan. As the patient count remained high, in the neighborhood of 400, one can imagine the long hours of duty performed by this faithful duo. **Health Rays** also felt the pinch, and editor George Brennan and a typist comprised the masthead. The Floor Reports continued to fill many pages with chatty gossip and some sly cracks.

By Spring the medical staff had been joined by Dr. J. D. Smith. And **Health Rays** began to run editorial comment over the initials "B. O'C", from which we surmise the writer was Brian O'Connell who later on became editor of *H. R.*, and when he left the San. assumed a position of prominence with St. Francis Xavier University. Some of his words of wisdom still ring true today: "Forget the popular misconception that the cure is time lost; a chunk savagely chopped from your God-given existence. Regard it as an adventure in Humanity and a new period of Education. Everything you learn and observe will prove useful later. If your cure time is wasted time, it will be because you wasted it".

The June cover pictures the Sanatorium float for the current Apple Blossom Festival parade. It shows an artistically designed lighthouse and bears the slogan: Beacon of Health, Nova Scotia Sanatorium.

A paragraph found in "Staff Activities" gives a sly peak into the future: "At present our Assistant Superintendent, Dr. Quinlan, is busily preparing the cottage for the big event; we haven't the exact date yet, but this snooper was informed that it's early in July".

The staff listing for the July issue shows a distinct boost in two departments — medical and nursing. Dr. Helen Holden rejoins the staff, which with the addition of Dr. J. S. Campbell brings to five the full-time San. physicians. And the name of Miss Adelaide Munro first appears as Superintendent of Nurses. Eminently qualified in her field, Miss Munro served as director of nursing at the Sanatorium for many years.

The opening paragraph of "Sanator-

ium Activities" makes a most happy announcement: "One of the most interesting events in the history of the Sanatorium was the marriage, on July 2nd, of our beloved Dr. Quinlan to Dr. Helen M. Holden, Toronto, a former member of the medical staff here. After honeymooning in Cape Breton, they returned to take up residence at the Sanatorium, where Dr. Quinlan is Assistant Medical Superintendent, and Dr. Holden has accepted a position on the medical staff. The best wishes of the patients and staff are extended to this young couple". Twenty-seven years later "this young couple" are still with us, and have been substance and cornerstone of the Sanatorium medical staff throughout that period.

The September issue of **Health Rays** heralds a major milestone in Sanatorium history — the retirement of Dr. A. F. Miller after 37 years as Medical Superintendent of the institution. As stated in a paragraph announcing his coming retirement: "Dr. Arthur Miller is ranked as one of the outstanding authorities on tuberculosis on the continent. His career has been somewhat that of a pioneer, as through the years he has given fine leadership in the war on tuberculosis. The Sanatorium today is an outstanding monument to a lifetime of devoted service".

In the same issue is a full account of a testimonial dinner tendered Dr. Miller by citizens of the town of Kentville and attended by distinguished medical men from throughout the province. The occasion was marked by the presentation of a bronze plaque (now gracing the hall of the East Infirmary) which bears the following inscription: "Placed in honor of Arthur Frederick Miller, M.D., C.M., F.C.C.P., LL.D., 1st Superintendent of this, the 1st provincial sanatorium in Canada, January 1910 to January 1947, by his former associates, his staff and his patients." Dr. Miller's reply to this, and to the laudatory addresses made to him was in his usual vein of excellence, as a master of words and a quietly forceful orator. From it I feel one paragraph stands out: "Whatever thoughts and hopes I may have had at the beginning of my

(Continued on Page 2)

HEALTH RAYS THROUGH—

(Continued from Page 1)

work to bring about expansion of the Sanatorium, have more than been fulfilled. Dr. Trudeau was a wise counsellor and friend, when he advised me to accept the position offered at Kentville with the hope that one day the small two-storeyed building, which I was to take over, might in time develop into an institution the size of his own. On that memorable occasion I could not visualize that this might ever happen. I have lived to see the Sanatorium grow from one building housing 18 patients, to that of twenty buildings with accommodation for 398 patients; a staff of one physician, myself, and two nurses, to that of five full-time residents and 35 nurses; a single structure valued at \$25,000 to a plant estimated to be worth \$1,500,000. Few men in their lifetime have been fortunate enough to see the fulfilment of their dreams".

And of course the Sanatorium marked the occasion of Dr. Miller's retirement. As reported in **San Activities**: "On the evening of September 29, over 200 patients, and staff assembled in the main dining room to honor Dr. Miller at a farewell banquet . . . Barb Penny spoke on behalf of the patients, and Pat MacEvoy represented the staff. Dr. Hiltz, who is to take over the superintendency upon Dr. Miller's retirement, spoke very highly of the fine work done by Dr. Miller, declaring: "I humbly accept the torch". It was good news to their multitude of friends in San. and town that Dr. and Mrs. Miller planned to make their home in Kentville.

The October 1947 **Health Rays** salutes the new Superintendent, Dr. J. E. Hiltz. Dr. Hiltz was no stranger to the Sanatorium, having joined the medical staff as a very junior physician in 1935. In 1937 he succeeded Dr. C. J. W. Beckwith as Assistant Medical Superintendent, which post he held until 1944, when he was given leave of absence from the San. to become Acting Superintendent of the Victoria General Hospital in Halifax. In 1946 there followed a nine-month stint in Shelburne, and the onerous task of converting the Naval Hospital there for civilian use, part general and part tuberculosis hospital. The following year was devoted to pursuing further studies, and the achievement of a degree in Public Health from the University of Toronto.

Then October 1, upon the retirement of Dr. Miller, he was appointed Medical Superintendent of the Sanatorium. The Superintendent's residence at the west end of the grounds became the home of the Hiltzes, with a succession of cocker spaniel dogs!

Health Rays acknowledged the appointment of the new superintendent with these kindly words: "And there seems to be no more fitting time or place in which to acknowledge the appointment of our new superintendent, than when we are celebrating Thanksgiving. Our hearts were heavy at the loss of Dr. Miller; but God has been good to us. For to the Sanatorium now comes a man who brings with him a vast amount of knowledge and experience concerning our disease, in addition to an outstandingly sincere determination to put each and every one of us on the road to recovery. Welcome, Dr. Hiltz! We are indeed blessed!"

Health Rays itself underwent staff changes with this issue. Mary Muirhead becomes Editor, with Barbara Penny as Associate Editor — the girls take over!

An article on the Sanatorium Rehabilitation Department describes the revitalization of that important phase of the Sanatorium program. For the first time in some years a qualified director was found to take over. She was Miss Margaret Markham, who guided the destinies of the growing Rehab. Department for several years, with the purpose outlined in the following paragraph from the article: "The work that Miss Markham is undertaking here has been designated as the Rehabilitation Department because we believe that the patient should begin to rehabilitate shortly after entering the Sanatorium. Anything that will hasten recovery or prepare him to meet the demands of ordinary citizenship when he leaves the Sanatorium in a manner better than was possible when he entered the Institution will come under this category." Especially important in the work of the Department was the education program, organized study sponsored by the Nova Scotia Department of Education, Adult Division. It included ordinary public and high school work from Grades 1 to 12, and specialized study such as bookkeeping, electricity, farming, business English, blue prints and many other practical courses. There were also instruction courses in music appreciation and better reading. Last, but by no means least, a large amount of occupational therapy work was planned.

The Wear And Tear Of Osteoarthritis

Osteoarthritis is the most common form of arthritis. It seldom cripples, but in some cases where proper treatment hasn't been followed, it can have severe consequences. Pain is generally moderate, but can be severe.

Unlike rheumatoid arthritis — which is inflammatory, spreads from joint to joint, and affects the whole body — osteoarthritis confines its attack locally to individual joints.

Inflammation is rarely a problem. Osteoarthritis is a matter of "wear and tear", with the mechanical parts of a joint wearing out as the person grows older. The knees, hips and spine are affected more often.

There is a variety of the disease which does not seem to have anything to do with strains on the joints. It may come on relatively early in life (in the early 40's), and affects women more frequently.

The joints of the fingers and sometimes the toes are the chief points of attack. Bony enlargements of the end joints of the fingers, called Heberden's nodes, often develop and can be quite painful. Heredity is believed to be a major factor in this form of the disease.

Degeneration of our body tissues is a normal process of aging. Tissue which makes up moving parts is a prime target for early degeneration. However, there is no clear explanation of why some people get the disease earlier and more severe than others, and why others go through life with almost no trouble at all. A joint which is not functioning perfectly is more susceptible. Osteoarthritis is likely to develop in any joint which has been required to take a lot of punishment or

abuse such as the knee or hip joints of someone who is overweight; joints injured in an accident, injured or overused in sports; joints subjected to unusual stresses and strains in work or play, or those with hidden defects that were present at birth.

Many people who have osteoarthritis are not bothered by it. Pain in and around joints is the major symptom. It may be mild aching and soreness, particularly when joints are moved, or it may be a constant nagging pain. The pain is caused by pressure on nerve endings and by tense muscles and muscle fatigue. You may not be able to move a joint easily or comfortably.

Muscle weakness in the area of the joint is part of the problem. In advanced cases, the joints have an outward knobby look. X-rays, physical examination and history of symptoms and perhaps some laboratory tests help to make a correct diagnosis. Osteoarthritis usually does not cause fever, weight loss or a feeling of sickness.

There is no cure, as damage done cannot be undone. This is a chronic disease you will have all of your life. However, the disease process can be slowed down and controlled. Drugs, rest, special exercises, heat, orthopedic surgery, and rehabilitation procedures are helpful. Cortisone drugs can be injected into the joint in special situations to bring temporary relief.

Osteoarthritic joints must be protected from stresses and strains. Overweight patients should reduce their weight. If you are to avoid becoming disabled, you must see your physician and secure proper medical care. — Health

Hay fever, or allergic rhinitis, is an unfavorable reaction to pollen from three principal sources: trees pollinating in spring, grasses pollinating in mid-summer, and most frequently, ragweed in early fall.

If you suffer with hay fever, no one need tell you what discomfort it is; combination terrible head cold, runny nose, itchy eyes, sometimes tearing, and body ache all over. Not exactly the ideal condition for travel or enjoyment on a vacation.

Be pleasant until ten in the morning, and the rest of the day will take care of itself.

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Can We Live To Be 100?

By Rex. H. Wilson, M.D., F.A.C.P.

Everyone would like to live to a ripe old age, provided they could enjoy it by remaining fit and alert. Medical men are predicting that the human life span will soon exceed the century mark.

There is no set formula on how to live for 100 years or more. The secret probably lies in hard work, an intense desire to live, and a sheltered existence avoiding life's hard knocks.

To live a long time certainly requires that we keep in good physical condition. Modern living, with its labor saving devices, makes it necessary for us to deliberately exercise. Everyone should try to maintain good health. If you have ailments, consult your physician for help in getting rid of them.

Have yearly physical checkups, and try to correct all abnormalities as quickly as they appear.

An important necessity in maintaining good health is to eat properly. A well balanced diet is enjoyable to eat and easy to obtain. Food fads are of no nutritional value. A person needs only a proper combination of protein, fat, carbohydrates, minerals, vitamins and water. However, there are certain diseases that require dietary limitations. These special diets should be prescribed by your physician.

Sound teeth enhance your appearance and promote good health. Dental infections not only cause pain, but can cause body damage. See your dentist twice a year and encourage him to x-ray your teeth when necessary, replace those that need to be removed, and maintain your gums in a healthy condition. Be sure to clean your teeth after each meal.

Maintain your body by daily exercise. Muscles and joints are meant to be used. Walking is excellent therapy, and daily bending and stretching are stimulating. You can loaf yourself into your grave. Playing a little every day is a good way to keep your life flowing smoothly.

Work is good for you. You should seek to find work that is pleasing to you. Individual recognition and achievement are the mainstays of a good job. Most important in staying alive is to look forward to each day with eager anticipation. Make the best of each moment by doing something worthwhile.

Rest and relaxation are among life's

necessities. After a full day's activities a person needs to restore his energies by resting. Sleep is the body's time for recharging its energy producing organs. You need eight hours sleep to revitalize yourself. A balance of work, play, and rest should be your daily goal.

A wise man is one who takes care of himself. The sluggard, the complainer, the seeker of the easy way out, and the person who wants something for nothing are harming themselves and have an evil effect on everyone else.

At the end of each day ask yourself how well you performed. Did anyone say that you did a good job? If you received no applause for this day of your life, then perhaps you wasted it. How many days can you afford to throw away?

—HEALTH

Psychology

A famous psychologist had bought a farm 'just for fun.' Every time he threw grain into his plowed furrows, an army of black crows would swoop down and gobble up his grain. Finally, swallowing his pride, the psychologist appealed to a neighboring farmer.

The farmer stepped into the field and went through all the motions of planting — without using any seed. The crows swooped down, protested briefly, and flew away. The farmer repeated the process the next day, and then the next — each time sending the birds off befuddled and hungry. Finally, on the fourth day he planted the field with grain. Not a crow bothered to come.

When the psychologist tried to thank his neighbor for the help, the farmer just grunted. "Just plain ordinary psychology," said he. "Ever hear of it?"

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Swimmers Face Danger Other Than Drowning

This year more than 7,000 people will die from drowning. Some before they can be pulled from the water — others because no one administers artificial respiration correctly or because they are not hospitalized once they are breathing again.

The risk of death from drowning does not end once the victim has been revived; all near-drowning victims who require artificial respiration should be hospitalized for 24 hours immediately following the accident, warned Martin J. Nemiroff, M.D., department of internal medicine pulmonary division, University hospital, Ann Arbor, Michigan.

Lung damage can occur even if water is not breathed into the lungs. The brief period of suffocation and lack of oxygen during submersion can cause pulmonary edema, an accumulation of fluid in the

lungs, and damage to the lungs themselves. Untreated, pulmonary edema can cause death.

Dr. Nemiroff believes the incidence of near-drowning and near-drowning deaths may be more common than realized. He studied eight cases with one death in one geographic area. Near-drownings are not recorded by law-enforcement agencies, and related deaths are rarely attributed to near-drownings, Dr. Nemiroff said.

Six of the eight persons walked away from the scene of the accident, only to be hospitalized following rapidly progressive shortness of breath 2½ to 12 hours later.

Another was hospitalized immediately and one died ½ hour after the near-drowning experience en route to the hospital.

The Era To 2,000 A.D.

(News of Earth, Environment, Energy)

SKIN ON AN APPLE

In proportion to the earth's size, the layer of air which surrounds our globe is no thicker than the skin on an apple. A shallow crust on the earth's surface provides a very limited supply of water and other resources. This tiny envelope of air and this shallow crust of earth and water are the biosphere — that part of our world that supports life. It is a closed system in which all things are recycled and reused in support of the life process.

Man is, of course, a part of this closed life-system and dependent on it for his survival. Of all things, however, he, alone, is capable of consciously cooperating with nature to insure his survival and progress.

Since the Industrial Revolution, the accelerating growth of science and applied technology has given us increased power and new tools to use this planet as we choose.

Our skill and ingenuity in manipulating the environment have produced tremendous benefits to human life. We have learned to control most of the communicable diseases which once controlled us, to produce bumper crops where

nothing grew before, to produce energy, light, heat, and consumer conveniences which were once beyond the reach of kings. We used our scientific discoveries and our technological wonders for the purpose of enhancing life, but in the process we gave too little thought to the second- or third-order consequences of our actions. We failed to anticipate the fact that environmental modifications which have accompanied our good intentions have a global impact on human health and welfare in direct and indirect ways, and on the generations to follow. Today, though, we are working at it.

———:O:———

It was the usher's first big wedding, and he had to eject an old lady from the reserved seats. Nervously he tapped her on the shoulder, and then said in a rush: "Mardon me, Padam," You're occupewing the wrong pie. May I sew you to another sheet?"

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MEDICAL COLUMN

By **WALTER C. ALVAREZ, M.D.**
**Emeritus Consultant of Medicine, Mayo
 Clinic and Emeritus Professor of Medicine,
 Mayo Foundation**

The many people who must spend their lives lying in bed or sitting in wheelchairs will be happy to hear about a new type of specially molded seat that should be much more comfortable to sit in for long hours, because it can be custom-made to fit the contours of the body of the person using it.

This can take many grateful people out of bed, and enable them to sit, perhaps most of the day—something that for long they hadn't been able to do. After sitting awhile on the usual type of seat, they developed pain, pressure sores or bed sores, due to the inability of blood to circulate properly through the tissue where the weight was resting.

The special way that the new seat is made gives support to the person's body from the thighs through the upper back, avoiding pressure in any one spot. A fitting for the seat can be done in a doctor's office, a home or hospital, and takes only a few minutes.

Ms. Vivian Powers, of Robert S. Taplinger Associates, tells me that she visited some paralyzed patients at a Veterans Administration hospital, and saw how helpful the seat could be. As she says, one young man had pressure sores that forced him to spend his life lying on his stomach; but with the help of the contour seat, he was able to get up and move around for the first time in months.

The Contourpedic Seat, as it is called, was developed by a physicist, Frank Low, in order to help his wife who had been left partially paralyzed by an attack of polio. It is now enabling Mrs. Low to live an active, useful life as a mother, a community leader and a sculptress.

Today, more than 100 persons, including Governor George C. Wallace, are using the new specially-contoured seats. They are portable and can be used not only in wheelchairs, but in armchairs, theatre seats, autos, and airplanes.

They are available through the Contourpedic Corp., Saddle Brook, New Jersey. The seats have been successfully tested at Dr. Howard Rusk's Institute for Rehabilitation Medicine of the New York University Medical School, and at Goldwater Memorial Hospital in New York

City. I am sure that this device will soon be enabling hundreds of formerly bedridden persons to get up and sit at a desk, go to the theater or to many places where they could not go before.

I sympathize greatly with bedridden and paralyzed persons who must spend their time sitting in one position. In my later years, perhaps because I am thin and more sensitive to pressure, I have considerable discomfort when I must sit quietly on a hard seat for any great length of time. I am grateful when I can get up and get relief. I am glad now that people who cannot get up will have the kind of seat in which they can sit comfortably.

—:o:—

Notes And News

Barbecues have been held in the area east of the greenhouse, probably still known to some as the croquet court, every second Wednesday, beginning on June 19. The cafeteria is closed for the supper hour on those days, which encourages a good attendance. Entertainment was provided for the most recent one, and this was well received. This makes a very pleasant outing and many have expressed how much they enjoyed eating out.

* * *

The Sanatorium Recreation Club was revived in the early spring, with some of the more energetic staff members turning out for softball practice at the ball park. Then, in June a Spring Dance was held at the New Minas Fire Hall, with music provided by Ken Wheatley and "The Fugitives."

The next item on the agenda is a staff and family picnic, planned for the Research Station on Wednesday, July 24. The weather is going to be good on that day, we understand, (but if it isn't, the event will be held in the cafeteria).

* * *

Also planned, is a picnic for patients to be held at Blomidon Park on July 23. This is sponsored by the Chaplain and Social Services, as it reads on the notice.

Editorial Comment

I was privileged to attend the annual meeting of the Canadian Public Health Association, June 18-21, in St. John's, Newfoundland, and would like to tell you something of the setting, and of the subject matter. It would be quite a challenge to write a comprehensive report on a meeting of this nature, for there were generally five sessions meeting simultaneously in different rooms. In fact, it is unlikely that five reporters could cover the meeting, so I will content myself with some random notes on the sessions attended.

Focal point for the meeting was the St. John's Arts and Culture Centre, a magnificent and relatively new addition to the already most impressive Memorial University area. The Centre contains a splendid theatre which seats 1,000 people, a public library, including a children's library; a marine museum, an art gallery, a lounge, and a centre for teaching handicrafts instructors, and facilities for teaching dramatics and music. There is a good lending library for records and tapes, offering a wide range from music through the spoken word. I think that this should be of great value to students especially, and is probably a service that is being offered now in city libraries. I understand that the Dartmouth Library lends records and tapes now.

In speaking of the theatre I should mention that the acoustics, sound system, and lighting are excellent and — not at all unimportant — the seats are comfortable! The building has a convenient wheelchair entrance and elevator service. It is truly a fine community centre.

Meanwhile, back to the meetings, which were held in the Centre, the Science Building, and the Chemistry Building — far enough apart so that by the end of one session one would hesitate before jogging to a session in another building, but would tend to "stay put." The weather remained fine enough to make outdoor travel pleasant. This was fortunate, for the maze of underground tunnels connecting the buildings can be most confusing. With 417 persons registered for the meetings there was a considerable flow of traffic between the three buildings mentioned, as well as the residence and dining rooms. I was as-

signed to the Queens College residence, which is conveniently located across the street from the Arts and Culture Centre.

The afternoon of Wednesday featured five sectional workshop seminars on the topics of (a) Nutrition; (b) Accidents and Recreational Activities; (c) Accidents in the Home; (d) Accidents in Industry; (e) Highway Accidents.

On Thursday there was the widest possible selection of topics from which to make a choice: 1) Health Statistics and Health Planning; 2) The Law and Public Health Practice; 3) Special Health Services: a) Hearing Aids, b) Visual Aids, c) Local Public Health Services; 4) Health Needs and Services in Rural Areas; 5) Health Service Delivery — An Interim Report on a Demonstration Project; 6) Future of Health Statistics; 7) The Law and Addiction; 8) Environmental Impact on Health; 9) Rural Health Care Systems — A Comparative View; 10) Health Service Delivery, In Primary Care Settings.

Thursday morning closed with a General Session, the keynote speaker being the Hon. Marc Lalonde, Minister of National Health and Welfare. In speaking of some of the long-term aims of his department, he spoke of the increasing concern over the effects of life styles on the level of health, which is not increasing in accordance with the amounts of money spent on health services. There is to be more emphasis on prevention, more focus on environmental health. He commented that with about 30% of the Federal budget going to Health and Welfare it still takes an epidemic to arouse concern — just as it takes a great deal to awaken the public to the need for drastic measures to decrease highway fatalities. He spoke of Rehabilitation having been transferred from Manpower to the Welfare side of Health and Welfare, but that it also touches on Health, with emphasis on recreation, physical fitness, and prevention. He spoke, too, of the need for involving the private organizations and the volunteer agencies. During the question period the Minister was asked what his department intends to do toward implementing the recommendations on banning advertising of cigarettes. It was suggested that the department

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EDITORIAL COMMENT—

(Continued from Page 7)

had not accepted the recommendations of the Monroe Report and the Nutrition Canada Report. The reply was that his department does not intend to bring in a ban on advertising, and that an organization such as the Canadian Public Health Association should continue to concentrate on education. He remarked that alcoholism is just as serious a problem as smoking. He said that his department is continuing to encourage the production of safer tobacco.

In the afternoon there was a session presented by Dr. Marcia C. Smith, on the Changing Health Hazards in Infancy and Childhood in Northern Canada, using film strips to good advantage. This was followed by Nutrition and the Outcome of Pregnancy, presented by a most dedicated health crusader, Mrs. Agnes Higgins, Executive Director of the Montreal Diet Dispensary. Her conviction was that proper nutrition during the prenatal period has been proven to dramatically decrease pre—and neo-natal deaths, mental retardation by 90%, cerebral palsy and other crippling conditions. She said that smoking is the other factor. The mothers in the project presented did not smoke. The mothers below the poverty line were undernourished, underweight, and under stress, before assisted through the services of the Diet Dispensary. The third presentation in this early afternoon session was by Dr. S. P. Horwood, speaking on the International Grenfell Association, and its Changing Patterns of Health Care, 1872-1974. Prior to Sir Frederick Grenfell, a Moravian Monastery was the only established centre where medical assistance could be obtained. The Church of the Moravian Brethren, which had its beginning in Kunwald, Bohemia, in 1457, first came to Labrador in 1752. Their first attempt was a failure, but in 1771 the Moravians established their work in Nain, and within a few years spread along the coast. The Grenfell Mission has a 150 bed hospital at St. Anthony, a hospital at Churchill Falls, a hospital ship, "Strathcona III" and a number of nursing stations.

The next session that I attended was somewhat in contrast to the above. The theme was how to sell the public on the idea of fitness and health — creativity is required to bring the skills of marketing and advertising into federal health programs. The created word, "participac-

tion" is apparently being used to promote the theme of physical fitness. The presentation was less effective than most — mainly because they were stressing the exemplar role of doctors, nurses and other health personnel; how promotional advertising could come up with something more effective than "cigarettes may be injurious to health" — and all the while two of them were smoking. And this was in a science classroom displaying the notice, "Smoking Absolutely Forbidden In This Room — by Order of the Fire Marshall." When someone in the audience drew their attention to this, the reply was, "If this makes you uncomfortable, think how it makes us feel." I think that the feeling I had was that if they couldn't convince themselves, then their program was not too effective.

There were also several jokes heard at the meetings, some of which may bear repeating:

The Newfoundland had been trying for an hour to get his old car going, but the engine would die before he could get under way. Arriving on foot at the service station he became engaged in conversation with a visitor who was undoubtedly from Texas and was expounding on the topic of the land holdings being divided into such small lots. "Why, back home, he was saying, "I can get in my car in the morning, turn the key, and by dinner time I haven't reached the end of my property." "I know how you feel," was the comment, "You must have a car just like mine!"

Then there was the one about the man of the house who was trying to impress upon the hired girl that she should say "our shopping," "our meals," and so on. Then, just as the minister arrived she burst into the room excitedly saying, "Come quick, there's a mouse under our bed!"

Then, there was the Anglican minister who was much impressed by the comparative luxury of the priest's glebe house. The priest wisely remarked, "You have your better halves — surely we can have better quarters!"

I'm not finished yet: A visitor to Florida was exceeding the speed limit and was pursued for some miles by the state police. When finally stopped, he was asked if he hadn't been aware of the cruiser's flashing light. "Oh yes," replied the northerner, "I saw that alright, but back home it's the snowplow that has the blue light."

I can now say that this concludes my report on the CPHA annual meeting.

Tips To Prevent Food Poisoning

"Vacuum-packed meat and fish are perishable and must be kept refrigerated."

* Chill foods such as custards in the refrigerator. After preparing dishes containing meat, poultry, egg, fish, soup, milk, or salads with dressing, serve them within two hours or refrigerate.

* Lunches prepared the night before must be refrigerated overnight.

* Plan your summer outings so that the food is in an insulated container with ice, and kept in the shade.

* If you are taking both lunch and dinner foods on an outing, avoid dinner preparations that contain meat, egg or mayonnaise. Eat any egg or meat preparations at lunch. Peanut butter sandwiches, unopened cans of meat or fish plus fresh fruits and vegetables will keep and be safe to eat at dinner time.

* Refrigerate leftovers from prepared dishes within one hour. When serving leftovers, always eat them cold or reheat them thoroughly. Boil broth and gravies several minutes when reheating.

* Separate stuffing from leftover cooked poultry before putting them in the refrigerator.

* Ready-to-eat barbecue chicken should be bought piping hot and kept hot or refrigerated until needed.

* Never taste foods from bulging, leaking or rusting cans, or cans whose contents spurt out, are bubbly, off colour, or off-odour.

* Do not buy foods supposed to be frozen but which are thawed. Frozen foods that you have completely thawed, or held at refrigerator temperature more than two days, should not be refrozen.

* Vacuum-packed meat and fish are perishable and must be kept refrigerated.

* Avoid, as much as possible, preparing food if you have infected cuts or a bad cough.

—Department of National Health and Welfare

—:O:—

RON ILLSLEY
ESSO SERVICE STATION

What A Can Can Tell

Commercial canning is one of the safest methods of food processing. In fact, canned foods have a much safer record than home-cooked foods. However, an occasional can becomes spoiled, and a few of these may be dangerous. How do you tell when there is danger? Look, listen, and smell (in case the can is trying to tell you something).

1) If a can is corroded or rusty, but not rusted through, use it immediately.

2) A bulging can should never be used. If you find one on a grocery shelf it is well to bring it to the attention of the merchant.

3) If on opening a can the contents appear bubbly or moldy, do not use. This is probably the result of bacterial or mold growth.

4) If a can has a broken seam there will often be a small amount of dried food at that spot. Throw it out!

Listen — If a can's contents spurt out, this could be the result of a pressure build-up in the can by gas produced by bacteria. Beware — it's risky to taste it!

Smell — If a can's contents smell putrid, musty or sulphurous, in all likelihood the food has gone bad. It is safer to throw it out than to taste it. If a can shows no other sign of spoilage, but the food tastes off flavour, rancid, or bitter, play it safe — do not use it.

—Educational services

Health Protection Branch
Health and Welfare Canada

—:O:—

JUST BEING POLITE

Shocked at the language of some ditch-diggers working near her home, a woman complained to their foreman. The foreman promised to inquire into the matter, and called one of the men over.

"What's all this about profane talk?" he asked.

"Why, boss," said Joe, "It's nothing at all. Me and Butch was working there and my pick accidentally hit him on the head. Butch looked up to me and said, 'Now, really, Joseph, in the future you must handle that implement with more caution.'"

* * *

No wonder the duckling

Wears on his face a frown,
For it has just discovered

Its first pair of pants are down.



Chaplain's Corner

JIM CRAIG
STUDENT CHAPLAIN
N. S. SANATORIUM

Quite recently, the Chaplain's Department and Social Services Department, together with the cooperation of the Nursing Staff and Dietary Department, held a picnic for the benefit of the patients at the Sanatorium, patients who were able and willing to go.

We toured a few of the local churches, drove to the Blomidon Look-off, and from there proceeded to the Cape Blomidon Park for a picnic supper. It is with respect to this trip that I would like to make the following remarks.

While at the supper, the patients and staff emerged from the cars of which we were passengers. I would say to myself as my eye caught each one "oh, good, I'm glad he (or she) made it". My mind went back to former school years, when upon entering each new grade, I would glance around the room, observe the classmates who were successful on examinations of the prior year, and make the same remark.

From a reflection of the past, my mind wandered into a question of theological perspective: Will it be like this in the Great Picnic Grounds Above? Will we be able to look around and recognize our earthly companions? The Bible says we will be able to know one another, although we shall move in new bodies, and have new names, for "Behold, I make all things new", God promises (Rev. 21:5).

How does one make application for such a trip? It's really quite simple. In fact, it is analogous to any earthly journey:

First, we are to believe. "Unless you turn and become like little children, you will never enter the Kingdom of Heaven" (Matt. 13:2). We are to have a simple faith. If someone had doubted that our picnic would not have taken place, there would have been little chance for them to become interested or to make any preparations. Jesus promised us a new home and a journey to that home, and it is essential that we maintain faith in that promise. "That now promised to faith in Jesus Christ might be given to those who believe" (Gal. 3:22).

Secondly, we are to make a commitment. For anyone going on a trip, it is not enough to believe that the excursion will take place. One must schedule one's

time accordingly, make reservations, and pay the fare. In other words, one must commit oneself, by making the decision, and by acting in accordance with the necessary procedures. Similarly, one cannot progress on the heavenward journey without making the commitment to let Christ be the pilot in the individual's life. Jesus said to Nicodemus, "Unless one is born anew, he cannot see the kingdom of God" (John 3:3). "Ye must be born anew" (Jn. 3:7).

Third, we are taught to serve, in whatever way we can. Far greater ministry has been effected other than by eloquent preaching. Anything we do to help someone feel he or she has been brought closer to God, is God working through us. In the duration of the picnic, it was the duty of each one of us to offer help in whatever small way possible. The same is true of the journey of life; we are not just going along for the ride. The Book of James teaches that while works alone will not see us into heaven, works are essential, for "faith without works is dead" (Jas. 2:17).

We all enjoy a good time; God wills that we do. Our future in heaven will be far greater than anything ever experienced on earth. That is why a final invitation is offered in God's Book: "The Spirit and the Bride say, 'Come'. And let him who hears say, 'Come'. And let him who is thirsty come, let him who desires take the water of life without price" (Rev. 22:17).

In closing, I sincerely trust those who attended the Patients' Picnic thoroughly enjoyed the trip, and that the trip itself brought us closer to God through the adoration of the creation which in finality is His.

—:o:—

The old doctor never had refused a call from anyone, whether rich or poor, but now he was tired.

"Have you any money?" he asked the midnight caller.

"Certainly!" was the reply.

"Then go to the new doctor, I'm too old to get out of bed for anyone who can pay for it."

DO YOU BELIEVE?

Our Blessed Lord never performed a miracle simply for the wonder of it. He did so always and primarily to prove that He is the Son of God, that men and women of all time would accept Him as the Son of God and live the life which He commanded. When the royal official asked Jesus to heal his son, (John, 4: 46-50), Our Lord gave an answer which was also intended for us today: — "Unless you see signs and wonders you do not believe."

"You do not believe." These are Christ's own words and they deserve considerable reflection. Why does He speak them to us, and so forcefully? Of course, there is no question of the fact that we do believe in Jesus, and that we completely accept Him as the Son of God. So, what might Jesus mean when He tells us that we do not believe?

St. James, the first bishop of Jerusalem, writes these words: — "What will it profit, my brethren, if a man says he has faith but does not have works? The devils also believe, and tremble. Dost thou not want to know, oh senseless man, that faith without works is useless? Just as the body without the spirit is dead, so faith also without works is dead." (James 2: 14, 19, 20, 26). These words of St. James speak for themselves, and point out clearly the meaning of Christ's words: "Unless you see signs and wonders, you do not believe."

When things come our way after prayer and our intentions have been answered, we rejoice, speak a word of thanks to God and then go our customary way thereby proving Christ's words "You do not believe." He tells us that we do not effectively believe, but that we are only saying we do. We should remember that on another occasion Christ said: — "Not everyone who says to me, 'Lord, Lord,' shall enter the kingdom of heaven, but he who does the will of my Father in heaven shall enter the kingdom of heaven." In other words, Jesus demands our allegiance in act as well as in word. Otherwise, He brands our belief in Him as meaningless.

We need, of course, to make our heart subject to our mind, and ultimately to God's will. Mentally we assent to truth and to the fact that Jesus is God, but our heart uncontrolled destroys the value of our belief. Be men of faith. Let goodness flow from your belief.

HEAVEN

Unfortunately, there is a great deal of misunderstanding about Heaven. Its happiness is interpreted in terms which often enough have little meaning for us. Pearly gates and pavements of gold may appeal to the imagination of some, but they leave most of us unmoved. And the idea of an eternal festival of music also finds a limited reception. The fact is that Heaven has become rather ridiculous through a mass of caricatures. The mention of it, instead of evoking some lofty, spiritual thought, is likely to call up the image of a newspaper or magazine cartoon.

Yet, how can Heaven be described? Certainly it cannot be described adequately, not even by someone who might come down to us from Heaven. It would be like trying to tell a blind man about a vivid sunset. We could tell him that we saw the blending of many colors, but what would yellow and orange and purple mean to him? He could not picture to himself the beauty we were describing. So it is with Heaven. Its glory is so transcendent that not even our Divine Lord attempted to explain it to us. St. Paul, who caught a glimpse of it in a vision, tells us: "Eye has not seen nor ear heard, nor has it entered into the heart of man, what things God has prepared for those who love him." (I Cor., 2: 9).

We can never have a perfect understanding until we behold Heaven ourselves; but we can have some halting ideas that are more refined and more meaningful than pneumatic clouds and golden harps. The Scriptures may be short on description, but they make it clear that Heaven is an abode of perfect and everlasting happiness where we shall see God as He is. This is the essence of heavenly happiness to which all other joys are subordinate.

After this life, however, the just will need no images. If we are happily among their number, we shall know even as we are known. We shall pass into a state utterly unlike the present.

If we try to think of Heaven along these lines, it is apt to become more real to us. As it becomes more real, it will become more inspiring. It will be like a beacon in the midst of turbulence and trouble and temptation. It will be an encouragement to persevere in goodness when it seems so hard to be good.

Msgr. J. H. DURNEY
in THE VETERAN

OLD TIMERS

Mrs. Leona (Patterson) Thompson visited the Library on July 10, accompanied by her husband, Maurice. She was a patient here 27 years ago and was interested in the many changes that can be seen. The visit, by the way, was to bring her father in for x-rays. Their address is Box 207, Parrsboro. She wishes to be remembered by any 'Old Timers' who may remember her.

We have been sent a photo from an unidentified newspaper (R. H. Sherwood Photo) showing Sister Mary Elizabeth MacDonald, C.N.D., receiving an engraved scroll from Darrell O'Pray, and a portable typewriter from Rev. Joseph Muise on behalf of the Stella Maris Parish. Darrell and his infant daughter Andrea were patients in late 1972 and early 1973. At that time he was employed as Advertisement Designer for Sobey's Stores, and was living in Pictou.

We are told that there was a letter recently from Esther Pearson, giving her present address as 91 North Town Line, Ingersoll, Ontario. She made mention of some of the ones whom she had known at the San.

Ralph Surette was in recently for a check-up, looking sun tanned and in good health. He is not able to work now as a fisherman, but has a boat and spends considerable time on the water.

Looking for news of 'Old Timers' among the notes with renewals we find the following: Mrs. Marjorie Smiley, Port Dufferin, says that she was at the San on June 11 for the annual x-ray and enjoyed the drive through the Valley.

Marion Lacey, former teacher with the Rehab Department, had kind words to say about **Health Rays**. She didn't mention that she had recently returned from a trip which included a visit to Spain.

A note from Miss Ada M. Martell pays tribute to Dr. Laretti, Mr. Jagosh, and Pat McEvoy, acknowledging the contribution each of them had made to the Sanatorium. She closes with these words, "May the Good Lord bless them, and all the patients at the San. My best wishes to all the doctors and nurses. They are all wonderful." (We thank you for those kind words, Miss Martell, and wish you all the best.)

Miss Marguerite M. MacLeod, Milton, Box 381 Liverpool, writes that she often thinks back to the Rehab days, and comments upon the many changes in such a

short time. We are sorry to hear that she is only now recovering from the effects of a bout with pneumonia in January.

We have renewals from former staff members Allan and Helen MacKinnon, 22 Lynwood Ave., Kentville; Miss Clara E. Gray, 15 Oakdene Ave., Kentville; Mrs. Lilah Bird, R. R. 1 Wolfville; and Dr. D. M. Muir, 413 Hilton Ave., Ottawa, formerly of Roseway Hospital and then Point Edward Hospital.

We have renewals from Mrs. Ralph Logan, Kentville; Mrs. Pat Brown, of the Dietary Dept.; Walter L. Veinot, R. 2 New Germany; Mrs. Stanley Porter, RR 1 Crossroads, Country Harbour; Harold Seymour, 38 Pierce St., North Sydney, who says he is feeling fine and expects to visit the San this summer; and Harold Kennedy, RR 1 Boutillier's Point, who writes, I look forward to receiving **Health Rays** each month. It keeps me in touch with the San and everyone there, without being a patient. I'm happy to say I am keeping well and feel great, as long as I rest properly. I have a garden to tend and enjoy being outside. Best wishes to everyone."

Mrs. Mary Doyle, in subscribing, says in her note that she was a patient in the San for 1 year in 1951. Her address is 2 Hickman St., Glace Bay.

Miss Margaret Chisholm, 22 Burnyeat St., Truro, remarks that she finds **Health Rays** interesting and informative; we have renewals from George H. Harris, RR 1 Timberlea; Miss Helen M. Wolfe, 80 Windmill Road, Dartmouth; Colin O. Zinck, Riverport, Lunenburg Co., who sends his best wishes to all the staff; Mrs. Ralph Hughs, RR 1 New Ross, sends best wishes to all; and Mrs. Lloyd Pelton, RR 3 Middleton, sent a donation to our Fund, with her renewal.

And we have renewals from Basil C. Whalen, 336 Vale Road, New Glasgow; Delbert Slauenwhite, RR 1 Italy Cross; and we have two returns "address unknown": Harold Jackson, last address: 2 Levis St., Spryfield; and William A. Hines, P. O. Box 185, Armdale Post Office. So, "anyone knowing the whereabouts . . ."

We will close with the following notes from Anne-Marie:

When Dr. Holden attended the Canadian Tuberculosis Association meeting in Ottawa in June, she was pleased to see Mrs. Harriett Robertson (popularly known as the 'strep nurse') looking much improved. Mrs. Robertson lives in one of the senior citizens' apartments and paints

as a hobby. She wished to be remembered to her friends at the San.

Gladys and Hector McKean were visiting Nina (Everett) Hynes in Victoria Beach, Annapolis County, recently. Nina was here in 1948. She teaches school and enjoys good health.

Percy Walsh of Halifax was in for his check-up. He was a patient here last year. He stated that he has been promoted to Art Director of the Advertising Department at Simpson's-Sears in Halifax. Congratulations to Mr. Walsh.

—:0:—

At Wits End

BY ERMA BOMBECK

You mark my word. Mathematicians won't rest until they've ripped the American family structure to shreds.

First, it was modern math and no one has to be told the rivalry, the bitterness and the malice it left in its wake. Brothers turned against brothers. Wives drove husbands from their beds. And grandparents were put afloat on icebergs never to be seen again.

The ignorance gap that the new math created between parent and child has not even begun to mend when now they are going to convert the country to the metric system. Do you have any idea what that means?

A yard will become a meter; a quart, a liter; a mile, a kilometer; a grain, a gram; and heaven only knows what my waist measurement will be when this whole mess is over.

I remember how it used to be before my children suffered smart attacks. I knew the answers to so many things I used to get headaches, and then one afternoon my daughter was poring over a book and asked, "Mama, what's a variable?"

I snatched the book from her, "It's a weirdo who hangs around playgrounds. Where did you get this book?"

"It's my new math book," she said. "I was hoping you could help me." I turned to a page at random and saw:

$\log_{10} (5.39 \times 10^{-3})$

"They want me to locate the mantissa in the body of the table and determine the associated antilog 10, and write the characteristics as an exponent on the base of 10," she explained.

"How long has the mantissa been missing?" I asked.

She went to her room, locked her door and I never saw her again until she graduated.

The metric system will be no better. Once a child knows that a square millimeter is .00155 square inches, will he have respect for a Mother who once measured the bathroom for carpeting and had enough left over to slipcover New Jersey?

Already the trouble has started. "The metric system isn't hard to understand," said my son. "An inch is..."

"Three barley corns side by side." I interrupted. "And a yard is a length of material from the tip of my nose to my fingertips and from Columbus to Cleveland on the road map is a thumbnail and half a breath mint."

He went to his room and slammed the door.

Did I tell you? Math is tearing this family apart.

—Contributed by Doug Hallamore

—:0:—

Roadside Flowers

We are the roadside flowers,
Straying from garden grounds, —
Lovers of idle hours
Breakers of ordered bounds.

If only the earth will feed us,
If only the wind be kind,
We blossom for those who need us,
The stragglers left behind.

And lo! the Lord of the Garden,
He makes His sun to rise,
And His rain to fall with pardon
On our dusty paradise.

On us He has laid the duty, —
The task of the wandering breed, —
To better the world with beauty,
Wherever the way may lead.

Who shall inquire of the season,
Or question the wind where it blows?
We blossom and ask no reason.
The Lord of the Garden knows.

—Bliss Carmen

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INS AND OUTS



NOVA SCOTIA SANATORIUM

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JUNE 1 TO 30, 1974

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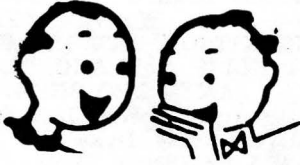
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(Continued on Page 16)

Just Jesting



Seven-year-old down the block came home with a disgusted look on her face. Naturally, she was asked the trouble. "I'm having trouble with the eagles," the child said. "The eagles?" her mother questioned. "You know," said the girl. "Two plus two eagles four. Three plus three eagles six."

Two cars had collided at a downtown intersection. Damage was considerable, but there were no injuries. The driver of the first car handed a flask to the driver of the other car and said "Maybe you'd like a nip to calm your nerves?"

"Thanks," said the astounded motorist as he took a swig. As he returned the whiskey he suggested: "Here, you have one too."

"I'd rather not," replied the owner of the flask. "At least not until after the police have been here."

A sweltering midsummer afternoon had the good-natured obstetrician out of sorts. Noticing his foul humor, a sympathetic patient asked. "These hot August mornings getting you down, Doc?"

"Not these hot August mornings, . . . It's those cold nights last November!"

Susie's mother was pleased that the nursery school was working on courtesy and good manners. Every day Susie would come home and tell her what she'd learned that day. One day Susie came home and announced, proudly, "When you're seduced, you always shake hands."

The personnel director of a large furniture factory received a government questionnaire which asked, among other items: "How many employees do you have, broken down by sex?"

The director wrote: "Liquor is more of a problem with us."

Last night I sat upon a chair,
A little chair that wasn't there;
It wasn't there again today —
But I can't sit down anyway.

Mr. and Mrs. Rabbit were watching new cars coming out of a mass production factory. They were amazed.

"You know," says Mrs. Rabbit, "I think they must have started with more than two."

Voter: "I wouldn't vote for you if you were St. Peter himself."

Candidate: "If I were St. Peter you couldn't vote for me. You wouldn't be in my district."

Once upon a time three bears were walking in a desert.

Pap Bear sat on a cactus and said: "Ouch!"

Mam Bear did likewise, and said: "Ouch!"

Baby Bear sat on a cactus and said nothing. Just sat.

Mama Bear turned to Papa Bear and said: "Gosh, I hope we're not raising one of those Dead End Kids!"

A Kentucky hillbilly watched his wife cooking vittles.

"Better move a mite, maw," he suggested. "You be standing on a live coal." "Do tell," said Maw, "Which foot?"

The city youngster was roaming around in the country when he came across a bunch of empty condensed milk cans. Greatly excited he yelled to his companions:

"Hey, guys, I've found a cow's nest!"

_____o:_____

INS AND OUTS—

(Continued from Page 15)

Co.; MRS. ROBERTA MARIE CAREY, Alder Point Road, RR 3, Bras d'Or, JOHN COLEMAN, 1 Pleasant St., Glace Bay; THEODORE JOSEPH PAUL, Eskasoni, Cape Breton Co.; MICHAEL JOSEPH ABOUD, Irish Vale, Cape Breton Co.; THERESA MAUREEN MacNEIL, 43 Cross Street, Sydney; ROBERT BLANCHARD OSBORNE, 71 Main St., Glace Bay; CHARLES EDWARD TREMBLAY, 7 Harold St., Port Hawkesbury; HUGH FRANCIS KENNEDY, 610 Upper 2nd St., Glace Bay; JOHN ANGUS CANN, French Vale, RR 2, North Sydney; JOHN JOSEPH DEMETER, 5 Johnson Terrace, New Waterford; HARRY HASIUK, 96 West St., Sydney; MRS. NANCY GOOGOO, Eskasoni, C. B.

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, and all contributions are tax deductible. Your contributions will help Health Rays to remain healthy.

The standing of this Fund as of June 30, 1974.

Previously acknowledged:	\$5,016.61
Recent contributors:	
Mrs. Lloyd Pelton	
Mrs. Lydia A. Sweeney	
Miscellaneous	
Total	28.00
Grand Total	\$5,044.61

The donation from Mrs. Sweeney was in memory of J. L. Cameron MacNeil, who died at the Sanatorium on June 24. Well known by many former patients and staff members, "Cam," age 70, had remained active on the staff of Cornwallis Motors Limited, where he had worked for the past 24 years. He retired from employment when he re-entered the Sanatorium about one year ago. We extend our sympathy to his wife, children, and other family members.

What Are You Worried About?

Living is so complicated these days, folks don't even worry straight. We:

WORRY about the Russians, then get run over by a neighbour . . .

WORRY about the kids running in front of cars, then drag them across the street on the green light.

WORRY about radioactive fallout, then get poisoned spraying flowers.

WORRY about crashing in an airplane, then fall off the ladder painting the house.

WORRY about getting the car greased every 1,000 miles, then never get a medical check-up.

WORRY about the kids getting proper nourishment, then leave household poison lying around for them to snack on.

WORRY about retirement, then do everything we can to keep from lasting that long.

WORRY about polio, or crippling diseases, then get crippled up by a power lawnmower or home shop power tool.

WORRY about winning a baseball game, then gamble on our lives with never a thought.

It is all right to think about the spectacular and the unusual, but it is the ordinary things and occurrences that will kill you!

—:o:—

GO ON

Let me but live my life from year to year

With forward face and unreluctant soul;
Not hastening to nor turning from the goal;

Not mourning for the things that disappear

In the dim past, nor holding back in fear
From what the future veils; but with a whole

And happy heart that pays its toll
To youth and age, and travels on to cheer.

So let the way wind up the hill or down,
Though rough or smooth, the journey will be joy;

Still seeking what I sought when but a boy:

New friendship, high adventure, and a crown;

I shall grow old, but never lose life's zest,

Because the road's last turn will be the best.

—Henry Van Dyke

—:o:—

Rejecting things because they are old-fashioned would rule out sunshine.

NOVA SCOTIA SANATORIUM

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H. M. HOLDEN, M.D., F.R.C.P. (C) F.C.C.P.	Medical Director
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T. DOK, M.D., D.O.M.S., D.L.O. (Eng.)	Ophthalmology & Otolaryngology
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*Certified by P.M.B.

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H. M. HOLDEN, M.D.	Courtesy Consultant, cardiology
MISS KATHERINE MacKENZIE, R.N.	Director of Nursing
MRS. JOAN CHIASSON,	Dietitian

Church Affiliation

NOVA SCOTIA SANATORIUM

ANGLICAN Rector — Archdeacon Dr. L. W. Mosher San. Chaplain—Rev. William Martell	PENTECOSTAL Minister—Rev. T. Kenna
BAPTIST Minister—Rev. A. E. Griffin Lay Visitor—Mrs. H. J. Mosher	ROMAN CATHOLIC Parish Priest — Rev. J. A. Comeau Asst. Priest — Rev. C. D'Eon
CHRISTIAN REFORMED Minister—	SALVATION ARMY Capt. Sidney Brace
UNITED CHURCH Minister—Dr. K. G. Sullivan San. Chaplain — Dr. J. 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. Allan MacIntosh
ROMAN CATHOLIC Parish Priest—Father Angus MacLeod	PREBYTERIAN Rev. E. H. Bean
SALVATION ARMY Capt. Alex Swan	