

HEALTH RAYS

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Sanatorium Visiting Hours

NOVA SCOTIA SANATORIUM

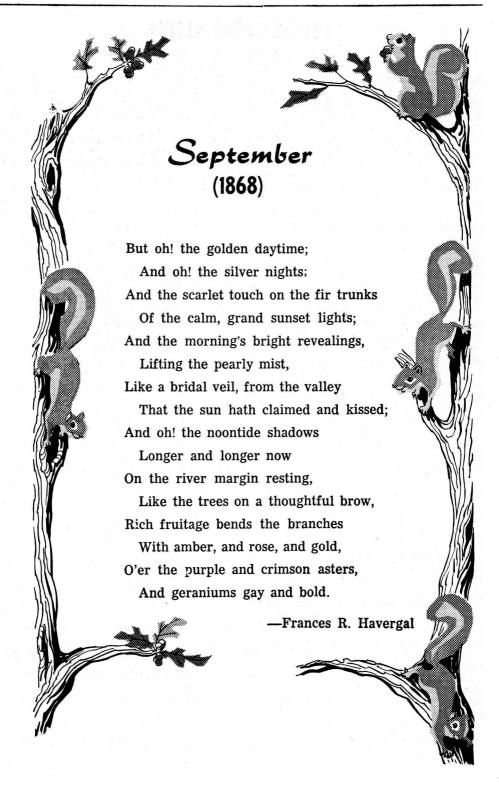
POINT EDWARD HOSPITAL

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

Absolutely NO VISITORS permitted during

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

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



LETTER FROM KENYA

Kisumu, Kenya June 11, 1969

Dear Dr. Quinlan,

It was a great shock to hear of Earle Hiltz's sudden death, and I am sure you must all feel it very much. I was in the D.P.H. class with him in Toronto and counted him as one of my favorite friends even though we did not meet very often.

Thank you for the information about your experience with drug resistance, which certainly is much less than here. I think they were over optimistic about the early results with Thiazina and did not wait for the long term results. Somewhere I read that in the early trials at the end of three years the relapse rate was 30%. With some of them we are now trying to switch to INH and PAS, and clinically there seems to be improvement though it is still too soon to be sure.

Drug supplies are a bit of a problem but the Provincial Physician found that the Russians had brought quite a lot of INH and PAS which he has turned over to the Tb ward and to me for use in rural clinics. The Russians built the new Nyanza General Hospital in Kisumu which was opened last July, and nine Russian doctors are working there for one or two years. The Provincial Physician is a Czech so relations are a bit strained. He particularly growls about the radiologist, and I have to agree that both the quality of the films and the reports leave much to be desired.

Another difficulty is that there isn't a thoracic surgeon in Kenya! There are more people walking around with collapsed lungs than I ever thought possible. Unfortunately some of them are quite young. I know of two girls just in their early teens who had extensive disease some years ago, and have pneumothorax. Because of bed shortage most patients only stay in hospital two months while they get streptomycin, and some even less if it is possible to get streptomycin as an outpatient from a Health Centre. I feel sure that some who are doing badly were sent out too soon without consideration of how far they lived from any Centre.

Of course, sometimes the patient is to blame, and it is really maddening when they disappear for 5 or 6 months and then come back when they are coughing badly again and usually drug resistant. I am trying to get notifications sent to the Health Assistants when the patient is discharged but it doesn't help when the patient takes

off for Tanzania or Uganda.

Possibly their BCG programme will pay off in time. For about 5 years they have had teams of Health Assistants going around vaccinating all children up to 16 years. And newborns are being done in hospitals and maternity wards now, though that only reaches a minority of births. Child Welfare Clinics also do some BCG and eventually they may reach most children. It may also have a preventive effect for leprosy which is another big problem in this area. I, of course, had never seen a case before coming here, but have now seen hundreds. There are at least 3,000 in this province, and it is estimated that there are about 10,000 lepers in Kenya.

At times it seems an impossible situation, but everything has to be planned for the future in a "developing country". One can only hope that the plans will come to fruition.

Yours sincerely, Ruth McDougell P. O. Box 1498 Kisumu, Kenya

FALL

Deep red and rust and yellow gold is autumn's badge today.

The green of spring has turned to brown and fall is on the way.

The air is filled with autumn tang, the smoke is curling high.

The clouds which gather in the west, with sunset paint the sky.

The wealth of life is color, bound in volumes rich and rare.

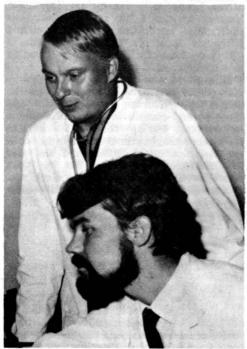
It is a privilege to live where fall flowers scent the air.

---Contact

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FINNISH STUDENTS AT SANATORIUM

DONALD M. BROWN



The above picture shows Pekka Seppa and Jyrki Vainio, two medical students from the University of Helsinki, Finland, who spent part of this summer at the Nova Soctia Sanatorium. Arrangements for this student exchange program are made through the International Federation of Medical Students Association and the Canadian Association of Medical Students and Internes. Both have completed four years of study at the medical school and have three years of university study ahead of them. The seven year course includes internship in a university operated hospital.

Both possess quite a good knowledge of the English language. Mr. Vainio explained that he had studied English for six years and German for three years. Mr Seppa had studied English for three years and German for six years. Mr. Vainio had the added advantage of having spent six or seven months in Britain a few years ago.

As usual, we asked them of their impressions of Canada and encouraged them to compare or contrast the tuberculosis picture in the two countries. They had seen very little of Canada but certainly liked what they saw in Nova Scotia — at

the same time saying that Finland has the most beautiful scenery in the world. They had many words of praise for the friendliness and helpfulness of those with whom they had been in contact at the Sanatorium and in their visits to private homes and to hospitals. Asked how the Sanatorium came to be chosen they replied that they had put as their first and second choices Toronto or Montreal, but it was the Canadian Association that makes the arrangements as to where students will go. They felt, however, that when they teil people the good things about the Sanatorium we will find students from Finland and other countries asking to come here.

Regarding the treatment of tuberculosis, we were told that the situation in Finland is very good. Since 1943 or 1944 BCG vaccination has been given to all. Treatment for tuberculosis and for mental illness is free in Finland as it is here in Canada. We got the impression that there are relatively few receiving Sanatorium treatment for tuberculosis in Finland.

Regarding general medical care, we were told that medical insurance covers 65% of the cost and includes all medicines. The patient pays the doctor and collects upon presenting a claim. There are possibly ten 700-800 bed hospitals in Finland and we were told that a patient pays \$1.50 per day which includes everything.

Regarding salaries, doctors are the highest paid professional group. During their period of internship they are paid \$200 per month. If they work in a hospital during the summer holidays they would receive the salary of a regular physician. While they are attending university they are under state sponsorship and the direct cost to the student is very little.

Regarding future plans, both hope to open offices for general practice upon graduation but likely will return to university for specialist training. Mr. Seppa said that he might specialize in chest diseases, as a result of his work at the Sanatorium this summer. Mr. Vainio has had some personal experience with tuberculosis and was treated with INH and PAS several years ago, while permitted to continue his studies.

Among the experiences they mentioned outside of the Sanatorium this summer were visits to the Victoria General Hos-

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A corner of the Nurse's Library; Miss Betty MacPhail, Instructor, and Mrs. Eleanor Aalders, Secretary.

HEALTH RAYS GOLDEN JUBILEE FUND

Contributions to this fund may be adressed to:

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

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

The standing of this fund as of August 19, 1969:

Previously acknowledged Recent Contributors:

Century Patrons:

Nil

Patrons:

Malcolm MacCallum (2 donations)

Doug Rossong Total

21.85

Grand Total

\$1,629.90

\$1,608.05

Miss Sadie Barkhouse Resigns

Miss Sadie Barkhouse, C.N.A., a graduate of the Nova Scotia Sanatorium School for Nursing Assistants, has resigned from our staff. Miss Barkhouse will be attending Dalhousie University this fall, where she is taking the four year Nursing course leading to a Bachelor of Nursing Degree.

Miss Barkhouse took the O.R. Technicians course after she graduated from the School as a Nursing Assistant. She has spent several months in Physical Medicine Department. During the winter months she attended night school to obtain her college entrance qualifications and she also took shorthand and typing. She has been active in St. John Ambulance work and successfully passed her Instructor's Course.

On August 15th, 1969, at Coffee Break, Miss Barkhouse was honored by a presentation of money from the Medical - Nursing - Pharmacy - Physiotherapy - Clerical staffs and wards and Nursing Office. Mrs. Boyle on behalf of the group made the presentation.

Everyone wishes the genial Sadie well and all are justly proud of her ambitious endeavors.

SHOWER

Mrs. Eleanor Aalders of the Nursing Office Staff was guest of honour at a baby shower given by office and nursing personnel at the Nurses' Residence on Wednesday evening, August 27th. Mrs. Aalders was assisted in opening the many lovely and useful gifts by Mrs. Marilyn Hovell, who also read the accompanying cards.

The delicious refreshments provided by the dietary department, were served by Miss Grace Adams, hostess, Miss Anne Marie Belliveau, and Mrs. Violetta Hunter.

The pleasant event ended with a delightful visit from Missie, Mrs. Mack's charming poodle puppy.

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NURSING NEWS

Mrs. Florence Zusman, Advisor for Schools of Certified Nursing Assistants, made her official visit to the School recently.

Miss Sadie Barkhouse, C.N.A., has resigned from the Sanatorium Nursing Staff to enter Dalhousie University to work towards a Bachelor of Nursing Degree.

Others resigning from the staff are: Mrs. Althea Elliott, R.N., who has accepted the position of Charge Nurse at Palmeter's Country Home Nursing Home, and Mrs. Anna Sheffield, R.N.

Miss Mary Cleyle, R.N., has relieved on the Nursing Staff during her summer

break from University.

Mrs. Garth (Mary Anne) Spencer, C.N.A., and Mrs. Sandra Forsythe, R.N., have returned to nursing duties after a respective six-week and two-month leave of absence.

Former staff members who recently visited the Sanatorium are: Mrs. Helen Joudrey (nee Wilsack), who wished to be remembered to any friends who might still be here. Miss Mary Chard, R.N., from the Sanatorium in St. John's, Newfoundland, who visited briefly with Mrs. Mack and Mrs. Boyle. Mrs. J. M. MacKenzie, the former Myrna Gertridge, who came to see Mrs. Mack and recall the San of the "Thirties".

Joan Walker reports meeting Mr. Robert E. MacKenzie, R.N., in Banff while she was on vacation. Mr. MacKenzie, formerly Director of Nursing Education at the Sanatorium, is at present Chief Surgical Instructor in the Nursing School at Medicine Hat.

Patient Entertainment

Billy Whalen presented a variety show in the Sanatorium Recreation Hall on Saturday afternoon, August 23rd. This was a very enjoyable program and we were pleased to see that there was a good turnout of patients. The program was also carried over station SAN for those who were not able to attend.

Appearing with Billy Whalen for this show were instrumentalists Fiddling Jim Hamm, from Martin's Point; George Helpard, guitar, and Bill Oxner, bass guitar—both from Dartmouth; Earl J. B. Wentzell, from Barss Corner; the George, Rick



YOUNG ARTISTS Children's Art Exhibition, 1969

and Kay Coffin combo from Hantsport and, appearing for the first time, was Bev Pettigrew, a very young lady from Hantsport.

A good deal of talent was displayed in this program — Mr. Whalen makes a genial emcee and sings western, folk, and gospel songs equally well. Mr. Hamm is a skillful fiddler either as a soloist or as an accompanist. Mr. Wentzell, who previously has performed on our stage as a vocalist, as well as with guitar and harmonica, added tap dancing to the list in this show. The Coffin family put a great deal into their songs and they continue to make a big hit with our audiences.

To Billy Whalen and his group we say many thanks for taking the time off from your busy schedules to provide entertainment for our patients.

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Question Box

J. J. Quinlan, M.D.



Q. How is it possible for a patient to be negative on culture when he is positive on concentration?

A. It is not at all unusual for an individual who is receiving antituberculosis drugs to have in his sputum tubercle bacilli which had been so affected by the chemotherapy

that they are no longer capable of reproducing themselves in the usual culture media. Whether or not these germs are actually dead has been debated for many years. It is my feeling that they are alive and given the opportunity such as a more refined culture medium, would again be capable of forming colonies.

At any rate and in reference to the question, such a patient would have sputum positive for tubercle bacilli on concentration but negative on culture.

Q. Why are people put on drugs for such a long time, sometimes for a two-year period after being discharged. Why does everyone seem to be treated the same regardless of their original condition?

A. Over the years much time and effort has been expended by experts in the treatment of tuberculosis on the optimum duration of chemotherapy. Generally, it is accepted that the minimum period of treatment for the individual with early tuberculosis is 18 months. The presence of more extensive disease would entail additional months and probably years of treatment. Other factors which would have a bearing on the total length of the treatment period would be the response to the drugs and whether it had been necessary to carry out lung resection.

Certainly it is not true that everyone is treated the same regardless of the original condition. Some of our patients are required to spend only three months in hospital following which they may safely continue their drugs at home. On the other hand there are many with extensive disease who may have to remain two years or longer and who may have to continue taking drugs for the rest of their lives. The important thing is that sufficient drug therapy and other necessary treatment be given the first time around

to bring the tuberculosis under control. Drug therapy is never as effective in the patient who relapses as it was in the treatment of his original disease.

Q. What is a "spot"? Is it the same

thing as a cavity?

A. the word "spot" has been used by the general public for many years in referring to an abnormal shadow on the xray film of the chest. Actually it is a very inappropriate term but it is used to indicate all types of tuberculous disease of the lung including cavity. Unfortunately, when the physician uses the term and tells his patient that "he has a spot in his lung," the patient is apt to feel that he has only a very small amount of disease, "a touch of tuberculosis" which will go away on its own without any special treatment. If the patient has no symptoms and very often he has not, he is very apt to under-rate the seriousness of his disease with dire consequences both to himself and to his susceptible contacts.

Q. What is meant by the clinical symp-

toms of tuberculosis?

A. It must be emphasized again that the individual with early tuberculosis feels perfectly well and to produce the classical symptoms the disease is fairly well advanced. These symptoms are loss of weight, loss of strength, loss of appetite, hoarseness, cough, sputum, fever, expectoration of blood, pain in the chest and in very advanced cases, shortness of breath and night sweats.

Q. When tuberculosis is suspected in a

joint, how is the diagnosis made?

A. The diagnosis of tuberculosis of the joint is made first by assessing the symptoms when present. The most characteristic of these are pain and limitation of movement. If the joint is accessible to physical examination, as in the case of the knee, ankle, wrist, elbow, or shoulder joints, swelling may be noted. X-ray examination of the joint is indispensable and will reveal the characteristic appearances of tuberculosis. If fluid or pus is available for examination, the finding of tubercle bacilli confirms the fact that tuberculosis is present.

A scientist rushed madly into the control room of the missile centre and shouted: "Men, there are women on the moon! we just shot up a communications rocket and got a busy signal!"

Editorial Comment

As this combined issue covers two months there appear to be a number of happenings worthy of comment. Since our last issue there has been the moon landing - an accomplishment considered to be beyond the realm of possibility a few years ago. It is truly amazing to think how, in such a relatively short span of time, so many seemingly impossible goals have been achieved. What was once suitable subject matter for science fiction writers now becomes reality, and the average man can only go about his daily routine and occasionally pause to wonder what will be next. To the space scientists there must be very little that is now considered beyond the realm of possibility. and distances that must still be measured in terms of light years will eventually be overcome. Because of the ever increasing pace of achievement one fee's that man's greatest discoveries still lie ahead of him.

Getting closer to home, the following are some notes taken on the sixty-ninth annual meeting of the Canadian Tuberculosis Association which we were privileged to attend from June 22 to 25. The Newfoundland Branch was celebrating its twenty-fifth anniversary and the meetings were held at the Holiday Inn in St. John's. Accompanying me were my wife and daughter and we had a very enjoyable trip across Newfoundland by car. Others attending from the Sanatorium were Dr. Crosson, Hector and Gladys McKean and Mrs. Catherine Boyle. Among the excellent papers presented was "Tuberculosis in General Hospitals," prepared by Dr. J. E. Hiltz and Hector McKean, and presented by Dr. Crosson.

I had promised myself that I would write the comments on the meeting shortly after our return while so much of the information was still fresh in the mind. Now, however, I find that two months have passed and my hastily jotted notes are not as meaningful as they would have been earlier!

If you noticed notes in the press concerning the meetings you may have observed the letters C.T.R.D.A., the official title now being the Canadian Tuberculosis and Respiratory Disease Association. The Association has begun to take an expanding interest in other respiratory diseases such as chronic bronchitis and emphysema, which together were said to have caused fifteen hundred deaths in Canada last year. We were told that two

thousand Canadians died from other respiratory diseases, excluding lung cancer which killed an additional five thousand persons. "It's a man-made epidemic caused by cigarette smoking," said Dr. C. W. L. Jeanes, the permanent executive secretary of the Association. Another authority on respiratory diseases added this grim statement, "Cigarette smoking is as causative in death from emphysema, bronchiectasis, lung cancer, and coronary heart disease as tubercule bacilli is to pulmonary tuberculosis." In a comment upon a survey showing an apparent high incidence of lung cancer among asbestos workers we were told, "There has not been the death of an asbestos worker who was a non-smoker."

Of great interest were reports read on the tuberculosis situation in different parts of Canada as well as elsewhere:

Dr. E. S. Peters, Director of Tuberculosis Control in Newfoundland, reported that the BCG vaccination program, launched in 1951, is proving helpful. Although fifteen people died from tuberculosis in Newfoundland last year, fourteen were over sixty and not one was under thirty. He pointed out, however, that almost all new cases reported last year were well advanced and that people were not getting their x-rays. The Association there is making efforts to make more selective surveys and reach people who do not come for x-ray. In all, there are about one hundred and sixty patients in Sanatorium beds in Newfoundland.

The Grenfell Program: We were given a most interesting account of the past and present program of the Grenfell Mission by Dr. G. W. Thomas, St. Anthony. The program began in 1892 when Dr. Grenfell became concerned that the fishing fleet who went north in the summer and returned in the fall had no doctor on the entire western Newfoundland - Labrador Coast. From this small beginning there is now a surprisingly modern and wellequipped hospital at St. Anthony and other hospitals as well. The newest is a branch hospital at Churchill Falls, their first venture in "industrial medicine." It was also mentioned that the Grenfell Program is active in encouraging improved methods of fishing through the rental and construction of longliners. We were shown a most interesting film, made en-

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EDITORIAL COMMENT —

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tirely by the staff of the mission, showing their work along the Labrador Coast.

In giving us an idea of the success of their program, in the 1950's a survey showed ten per cent of the Labrador population had active tuberculosis. Their last survey showed only two new cases, so the Sanatorium was closed and new cases will be treated in the general hospital.

Southeast Asia: An interesting address was given by Dr. A. Selvaratnam, representative of the International Union Against Tuberculosis, Kuala Lumpur, Malaysia. He reported that one-half to one per cent of the population in the highly populous areas of east Asia are infected with tuberculosis. There immunization is the plan of choice. It is believed that one million dollars a year for five years would give this control. Some of the problems he and his workers are trying to combat in Asia include ignorance and poverty, a high default rate among patients and the social stigma attached to tuberculosis. Using funds from the I.U.T .-B. and making careful use of volunteers, a program has been launched which has reduced the delinquency rate among patients from 63% to 5%. Social workers and volunteers follow up the cases once they have left the treatment centers and they are brought in for their medications weekly or bi-weekly.

It was mentioned that because of the five Christmases which are observed among the different religions of Ceylon and Malaysia, the seals which are sold to raise money are called greetings seals and are sold at all seasons of the year.

Vietnam: As in Malaysia, the aim of the World Health Organization and the International Union against Tuberculosis is prevention, as being more effective as a control measure. We were told that Canada provides a program some five hundred miles north of Saigon, the area where Dr. Tom Dooley had been active. Treatment was undertaken in an eighty bed hospital but the outpatient program became the important part. Since June, 1963, three hundred per day are seen-one in seven positive on direct smear. Canada pays thirty-seven thousand dollars per year for this program which is the same amount as Vietnam pays for all other medical services, so it is on a higher level than they will be able to maintain when left on their own. Although the hospital is called Canada House it is now operated

by thirty-five trained natives who proudly wear the Canada maple leaf badge on their uniforms.

Dr. Jeannes reported that in the developing countries ten cents per year per capita is more than they would be able to afford for tuberculosis prevention. Beyond Saigon there are forty provinces, with a population of perhaps four million, where there are no programs for prevention or treatment.

The Canadian Scene: Ralph E. J. Ricketts, Executive Secretary of the N.S.T.A. since 1954, remarked that we now have the necessary tools for eradication of tuberculosis and it is a matter of proper these tools application of in order to reach that goal. In this respect we, in Canada, are so much better off than those in some parts of the world where control is the highest goal. He said that as a voluntary organization the T.B. Association has to sell its worth to the public in order to gain financial support. He discussed the term "voluntary" as it applied to the Association but pointed out that they were voluntary only by virtue of being supported by voluntary contributions not because they necessarily volunteered their services. (Here I would interject that more is often expected of those in the government services and that those in the "voluntary" services often receive more praise because it is felt that their work is "beyond the call of duty.")

Mr. Ricketts pointed out that in Nova Scotia the role of the N.S.T.A. had been that of working hand in hand with the Department of Public Health. With the expansion into the non tuberculous fields there would be a need for working with new partners — the private physicians and the schools of medicine. He stressed the need for an evaluation of their own organizational setup to keep in tune with the changing program.

Newfoundland: It was reported that, as far as services to non tuberculous persons were concerned, diabetic testing had been

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EDITORIAL COMMENT —

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carried out on the M.V. Christmas Seal for the past eleven years, in cooperation with the Canadian Diabetic Association and the Newfoundland Branch of the T.B. Association. The Association had also helped to establish what was said to be one of the finest children's hospitals in Canada — at the former Fort Pepperrell U.S.A.F. Base.

P.E.I.: Dr. Stewart reported tuberculin testing of Grade I students; also a program of BCG for grade VIII students. It was reported that there were three active cases found this year.

New Brunswick: Twelve active cases were picked up from their survey through x-rays paid for by the N.B.T.A. Rehabilitation is still an important phase of their program, with the candidates being interviewed and then referred to Canada Manpower.

Ontario: Their Association had for years recommended that case finding should be a government responsibility. The changeover to a government program was to be made in April, 1962, but the government decided upon changing this year, making it a very sudden transition to respiratory diseases. The Association now identifies itself with the five medical schools in the province.

Quebec: The changeover has been made to respiratory diseases. The fund raising campaign was watched with interest to see if there would be a reduction. There was a 13% increase, however, following the changeover from the previous emphasis upon tuberculosis.

Saskatchewan: The program still consists of x-ray surveys, tuberculin testing and sputum testing of all whose tuberculin test was positive. Sputum tests showed three as being positive for cancer. Future surveys will concentrate on selected groups as the survey cost was \$60,000. Diabetic screening is also carried out by the blood sugar method. There is also a BCG vaccination program.

Alberta: The anti-smoking campaign has played a large part in their program. There was a great response to their advertisement saying that help would be offered to smokers who wished to quit. It is noted that smokers cannot work in grain elevators because their health will not stand up to the work. Air pollution control is a big aspect and the government will accept collect calls if a person thinks there is pollution in his area, Mon-

itors are placed in areas of heavy popula-

British Columbia: The anti-smoking project "Smoke Out" was undertaken with support from the Canadian Cancer Society. There has also been a successful volunteer program in working with tuberculosis patients and ex-patients in need of assistance.

Manitoba: The Association provides x-rays for all because of the value in picking up other respiratory illnesses. Pulmonary function tests are also provided. The D. A. Stewart Institute for Research and Treatment of Respiratory Disease was mentioned, having been named in honor of Dr. Stewart who died some twenty years ago.

Comments: In all, the meetings were most interesting — I would say the best that I have attended — and I felt indeed privileged in being able to attend.

*

We wonder how many noticed reports in the papers regarding the use of GENERAL EDUCATIONAL DEVELOPMENT TESTS to gain the equivalent of high school standing. The announcement opened with:

"Nova Scotia has scored another first in Canadian education, and the latest program is one which will be of inestimable value to the adult population in our province.

"Education Minister Hon. Gerald Doucet announced that a new testing program will be granted to adults who have been educationally handicapped because they were unable to continue their education, but who have acquired, through formal and informal education experience, an educational maturity at or above the level of high school graduation....

"The province has been granted the right to use tests compiled by the American Council of Education, and test centers will be established at various provincial centers, run by local education officials in consultation with the department's Pupil Personnel Services Division. Dr. A. S. MacDonald, Director of Pupil Personnel, said that the majority of U. S. universities and employers accept the high school equivalency diploma."

"It is to be hoped our Canadian universities and employers feel the same way because, as the minister pointed out, it isn't lowering educational standards, it is recognizing a fact of life, that a person can be educated by experience and that many of our adults of today have learned

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Chaplain's Corner

REV. D. R. MacTAVISH

Co-ordinating Protestant Chaplain — Nova Scotia Sanatorium

"Why should a writer whose books have sold millions of copies, and who is extremely popular and well-off in his own country, suddenly decide not to return to that country, which, moreover he loves?"

"You will say it's hard to understand."

Author, Anatoly Kuznetson, who recently defected from the Soviet Union, makes his drastic action comprehensive when he answers his own question and

bluntly states:

"The loss of hope: I simply cannot live there any longer. This feeling is stronger than me. If I were now to find myself again in the Soviet Union I should go out of my mind. If I were not a writer, I might have been able to bear it. But, since I am a writer, I can't. When I write, I have the illusion that there is some sort of sense to my life. Not to write is for me roughly the same as for a fish not to swim."

"So long as I was young, I went on hoping for something," says Kuznetson. After twenty-five years he stopped hoping when he was overwhelmed by the painful conclusion that one could not be a writer and maintain creative integrity and identity in the Soviet Union. For political reasons the censors and editors shortened, distorted and violated every single one of his works until they were ugly, false, mishapen and completely unrecognizable, or they did not permit them to be published at all.

His writings were used to contradict the very things he stood for as a person. He felt so compromised that he was ashamed to look people in the face. "Finally," he concludes, "I have simply given up. I came to the point where I could no longer write, no longer sleep, no longer breathe." It was at this point that he made good his escape from the repressive regime.

Kuznetson's distressing experience vividly underlines some basic Christian truths. First, there is the matter of hope. The loss of hope does, indeed, signify the loss of life for quite literally, "we are saved by hope." (Rom. 8:24)

Then there is the matter of meaning for our life. Without a doubt, our life must make "some sort of sense" to us. When they do not make sense to us then the wilderness of confusion, chaos and despair will encroach on us until we are truly lost.

To make sense of our life we must deal with the ultimate issues that confront every man. Where do we stand in relation to the universe and the creator who brought all things into being? Saint Augustine gives one of the most quoted and best answers to this question when he says: "Thou has made us for Thyself and our hearts are restless until we rest in thee." Things begin to make sense when we rest in Him and discover our true relationship with God in Christ our Saviour.

It is here that hope plays its part for "He that cometh to God must believe that He is and that He is a rewarder of them that deligently seek Him." (Heb. 11:6) To experience a personal relationship with God our Father we must then live in an attitude of expectancy. Like the little girl said to her minister as he greeted her at the door after church, "get ready to be To know God we must be surprised!" ready to be surprised by Him. C. S. Lewis, the noted English author, had such an encounter with God and he spoke of it in his autobiography. Significantly, he entitled this autobiography "Surprised by Joy."

This joyful experience comes to those who open themselves to God. If we are really ready to be surprised, that is, if we are seeking him with all our heart, he will make Himself known. In doing this he will call us to fulfill our unique individual destiny and so give meaning to our existence.

Viktor Frankl, the famous psychiatrist who was interned in the notorious Nazi death camps, helps us to see how we can do this. Frankl states that if we have the health and strength we can invest ourselves in worthwhile activities and so find the meaning of our life.

However, if, because of unavoidable suffering or mishap we are unable to be active, then we can take an alternate route and fulfill ourselves experientially. That is, we can experience the good and the beautiful in the spiritual dimension of life. In keeping with this, the scriptures exhort, "Whatsoever things are true, whatsoever things are honest, whatsoever things are just, whatsoever things are pure, whatsoever things are lovely...,

(Continued on Page 11)

CHAPLAIN'S CORNER —

(Continued from Page 10)

think on these things."

Finally, there is our attitude. When all else is taken from us we can still fulfill ourselves by making our own private mark on life by deciding what our attitude will be towards our pain, towards our neighbor, and towards our God.

No "Iron Curtain" of pain can take this away because we are still free to get ready to be surprised by God. Those who have gotten ready have not been disappointed. Indeed, they have found that their personal relationship with Christ prepared a highway of meaning in the wilderness of suffering and despair. It is a highway reserved for the "fellowship of those who bear the mark of pain."

Young People Visit Sanatorium

On the afternoon of Tuesday, July 29th, the Sanatorium grounds literally became alive with about ninety teenagers ranging in age from thirteen to nineteen years. They were spending a ten-day period at the United Church Camp at Berwick, and as part of their organized activity, spent the afternoon here with us.

The young people congregated at the Rec. Hall. After some words of welcome and introduction by Dr. Crosson, they were shown the film "The Quiet Betrayal," followed by a short question period

conducted by Dr. Crosson.

Those of the young people who were over sixteen years of age were conducted throughout the various buildings by Dr Crosson. The others were divided into groups of about eight each and were given a tour of the grounds by various members of the staff.

Later, all the young people gathered behind the East Infirmary and sang several songs to the accompaniment of guitars played by two very talented members of their group. They repeated this performance behind the Children's Annex and at the West Infirmary. I am sure that all who heard, and had the opportunity to talk to members of this group, could not help but be impressed by the friendly bright, and genuine atmosphere which radiated from them.

They adjourned to the canteen for some light refreshment and then off to Camp to resume the duties awaiting them there.

The visit made an enjoyable afternoon for us here at the Sanatorium, and I cannot help but think that, by our doors hav-



RELIGIOUS SERVICES AT THE NOVA SCOTIA SANATORIUM

PROTESTANT

Worship Service (Chapel)
Sunday: 10.00 a.m.
Vesper Service (Station San)
Monday through Saturday: 6.25 p.m.
Sunday: 5:45 p.m.
This Is My Story (Station San)

Tuesday: 7:00 p.m.
Communion is served quarterly in the East and West Infirmaries.

ROMAN CATHOLIC

The Sacrifice of The Mass (Chapel)
Sunday, 7:00 a.m.
The Rosary (Station San)
Monday through Saturday: 6:45 p.m.
Sunday: 6:15 p.m.
The Hour of The Crustied (Station Sa

The Hour of The Crucified (Station San) Sunday: 6:30 p.m.

ing been opened to these young people, they also must have derived insight and pleasure from their outing.

The Fountain

Into the sunshine,
Full of the light,
Leaping and flashing
From morn till night!

Into the moonlight,
Whiter than snow,
Waving so flower-like,
When the winds blow!

Into the starlight, Rushing in spray, Happy at midnight, Happy by day!

Glorious fountain!
Let my heart be
Fresh, cheerful, constant,
Upward like thee!

-James Russell Lowell

OLD TIMERS

Incredible as it seems at this time of writing, summer will be but a memory when HEALTH RAYS reaches you. Vacation time is still in full swing and vacationing old timers are dropping in at the Sanatorium for a quick, affectionate look at their "Alma Mater", and a hearty "Hello" to friends. This is about all that Harold and Phoebe (Wellwood) MacKinnon had time for when they took a day off from visiting Phoebe's sister in Rawdon to spend it with her aunt, Mrs. Harriett Campbell, our sewing teacher. As both are ex-patients and ex-staff members, there was much "catching up" to do in the few minutes they could spare. As a member of the staff Phoebe was mainly involved with secretarial work and the teaching of commercial subjects; Harold, with nursing. It is interesting to note that Harold was the first Nova Scotia Hospital student nurse to affiliate at the Sanatorium. After graduating, he returned to be in charge of East III. At present he is Director of Nursing in a Hospital in Miami, and is also Assistant Hospital Director.

Lillian Isabel Wile of Truro, who was on a tour of the Province dropped in to see old friends. Lillian cured here in 1956. Mrs. Joe MacKenzie (nee Annie Veinot), was down from Cape Breton. Annie and Joe are both ex-Saners who are maintaining good health and working at Point Edward Hospital.

Mildred ("Millie") Schofield, ex-patient and ex-canteen manager, told us that she put some of her surplus energy into strawberry picking. Don Getson of Bridgewater, a brief caller at the Rehab., was looking and feeling well. Kermit and Ada Young from down Bridgewater way spent an evening with the Carl Wagner's at their home in Kentville. Both are well, and Kermit is still engaged in the production of broilers.

Beulah Trask of the switchboard reports a brief chat with Sandy Flynn from Pictou County when he visited the San one day and renewed his subscription to *HEALTH RAYS*. Sandy is well and working every day.

Ross (Cameron) McAdam of Detroit, Michigan, and Vivian Talamini of Long Island, New York, were other visiting old timers who have a continuing interest in the Sanatorium and HEALTH RAYS. Their San days go back to 1954 and 1948, respectively. Accompanying Vivian to the San was her sister, Mrs. Madeline Longmire of

Hillsburn, Annapolis County, who cured here in 1948.

Chloris Mahar of Hamilton, Ontario, a one-time popular secretary in our own Medical Section, was a most welcome visitor, as was also our good friend Rabbi Greenspan of Halifax. The Rabbi was returning to Halifax from Yarmouth, and was looking well despite the extreme heat and humidity. We are glad to hear that he is back on a full-time working schedule.

Pat McEvoy was delighted to have a visit from Dr. Howard Ripley of Moncton. Pat and "Rip" cured on "The Hill" together back in the 'Thirties and had a great time recalling the past. Dr. Ripley has the distinction of being the first to have a thoracoplasty operation performed at the Sanatorium. After finishing his cure, he went on to complete his medical studies at Dalhousie University, and is now radiologist at the Moncton General Hospital. Dr. Ripley has three children, the oldest of whom is a nurse, the second in electronics and the third a Mount Allison University student.

When Stan Robichaud of the Rehab. Department returned from vacation he reported having seen several old timers: Bobby Melanson of Belleville, Yarmouth County; Delbert Muise of Abram's River, Yarmouth County; and Vincent LeBlanc, formerly of Meteghan Centre, now of Lynn, Massachusetts. And when Vi Silver and Marian Lacey of the Rehab. Department were on a weekend motor trip to parts of northern and eastern Nova Scotia, they saw a more recent old timer, Wilfred Fraser of Waternish, Guysborough County.

While vacationing in the Canadian West, Joan Walker, Secretary to the San Medical Superintendent, ran into Bob MacKenzie at Lake Louise. Bob, who is also an ex-San patient and a former Director of Nursing Education here, holds the position of Chief Surgical Instructor in the Nursing School in Medicine Hat. He sent regards to everyone at the Sanatorium.

A letter from Eileen (Kent) Phillips of Saint John, N. B., brought good news of herself, her mother (Mrs. Mary Kent of Yarmouth), her sister Marie, and brother, Rev. Oland Kent. All are in excellent

(Continued on Page 13)

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MANSON'S DRUGS LTD.

OLD TIMERS —

(Continued from Page 12)

health and have been visiting one another during the summer. All four cured at Roseway Hospital in the 'Fifties, and Eileen herself spent some time at the Sanatorium, also.

Mrs. D. Cranidge, Occupational Therapist's Aide at the Halifax Mental Hospital, contacted us in a quest for patterns of articles made by our patients. Mrs. Cranidge, who is the mother of an eleven-year-old daughter and an eight-year-old son, was a San patient in 1952-53. At that time she was Miss Dorothy Jackson of Porter's Lake, and was an ardent HEALTH RAYS fan.

Anne Marie received an interesting letter from a one-time porch-mate of hers, Marguerite (MacNamara) Parker, now living in Ottawa. For many years Marguerite was Secretary to the Sanatorium Director of Rehabilitation and is now similarly employed in Ottawa. This is what she writes: "By now you'll have heard that I'm working. Started the last day of April as office manager and secretary to the Executive Director at the Rehabilitation Institute. The Rehab, building is what used to be the Royal Ottawa Sanatorium and there are many things about the whole setup that remind me of the San home. It's in a nice setting with oodles of green lawns and trees. It's really a pleasure to get away from concrete buildings and paved streets." And as I finish typing this I learn that Marguerite is vacationing in Nova Scotia and paid a short visit to the Sanatorium.

Our old timers have really been making the news lately. A picture of Harvey Kent of New Glasgow appeared in a July issue of the Chronicle-Herald along with those of other employees of W. H. Schwartz and Sons who were attending the Fifth Allied Food Golf Tournament at Abercrombie Golf and Country Club. Harvey cured at the San in the mid 'Forties.

In a later edition of the same paper we noted that John Vickery, who was a Sanatorium patient in 1959, is now town clerk of Pictou, and led the fourth year class in Municipal Administration at Dalhousie University. Congratulations!

Congratulations also go to Glenda Doucet of St. Bernard's, Digby County, for winning a trip to Washington for the 4-H Club conference in that city next spring. Glenda will be remembered as one of the Clare District High School students who cured here in 1967.

In the Yarmouth Light-Herald was a picture of Louis Comeau, President-Elect

of the Kinsmen Club of that town, presenting a plaque to another member for an outstanding achievement. Louis cured here in 1953.

And again, in the Chronicle-Herald we note the name of old timer Dr. John E. MacDonnell among the members of the National Advisory Council on Fitness and Amateur Sports, guests on the campus of Saint Mary's University, Halifax, during the Canada Games week.

From the same source we learn that back in 1947 a Roseway Hospital patient decided to test his literary ability and submitted an essay in a competition. The patient was Ernest Nickerson of Clam Point, Shelburne County, and the title of his essay, which took a prize, was "On Going to the Moon". Now, a mere twenty-two years later, going to the moon is history, and the budding "essayist" is a Baptist minister in New Brunswick and editor of a paper called The Path of Life. Incidentally, your columnist had the pleasure of tutoring Ernest in English during a later hospitalization at Roseway Hospital.

Word comes from Shelburne that Roy O'Donnell, who was here in the early 'Sixties, has purchased Robertson's Hardware of that town. Roy studied bookkeeping at the Sanatorium, completed a full commercial course at the Institute of Technology in Halifax, and subsequently became bookkeeper for Shelburne Furniture and Appliances. In addition he has had considerable experience as a salesman.

We close these notes with the memory of a pleasant, though brief, visit from Jane (Brown) Cummings of Clayton Park, Halifax, who, with her husband and two children, was enroute to Bar Harbour and other points on vacation. Jane, an erstwhile handcraft worker in our Rehab. Department, was sparkling with health and happiness.

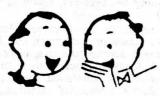
Autumn

The morns are meeker than they were, The nuts are getting brown; The berry's cheek is plumper, The rose is out of town.

The maple wears a gayer scarf,
The field a scarlet gown,
Lest I should be old-fashioned
I'll put a trinket on.

- Emily Dickinson

Just Jesting



The two American ministers traveling in Germany, decided to go to church. Knowing no German, they figured to play safe by picking out a dignified-looking gentleman sitting in front of them and doing whatever he did.

During the service the pastor made a special announcement, and the man in front of them rose. The two Americans rose quickly only to be met by roars of laughter.

When the service was over, they discovered the pastor spoke English and asked what the cause of the merriment had been.

"Oh," said the pastor, "I was announcing a baptism and asked the father of the child to stand."

STRATEGY

The meek little man came up to the policeman on the street corner.

"Excuse me, constable," he said, "but I've been waiting here for my wife for over half an hour. Would you be kind enough to order me to move on?"

Grocer: "Did that piece of boiled ham I sent along the other day do for the whole family?"

Customer: "Almost, but they're getting better now."

WHY NOT RIDE

"I've heard that Mr. Jones walks in his sleep."

"Fancy that, and they with two automobiles."

Anne Marie: "What kind of a husband would you advise me to get?"

Sandra: "You get a single man and let the husbands alone!"

Doctor: "You're anaemic. You must take iron."

Jackie S.: "Iron! Doctor, my husband can afford gold or Platinum."

Sharon: "There's no difficulty in the world that cannot be overcome."

Norma: "Have you ever tried to squeeze tooth paste back into the tube?"

Lady (reading paper): "Well, well, I never knew that our firemen were so childish. It says here that, after the flames were extinguished the firemen played on the ruins for some hours."

For 15 years a Wisconsin deer hunting party had the same guide, and they loved him. Not only did Old John organize drives and dress out deer, he helped with the cooking and the poker playing.

But recently a member of the party wrote to Old John to make arrangements for this year and was dismayed to receive this reply: "Guide nothing but fisherman."

The hunter telephoned Old John

"Why?" he asked.

"Well," said Old John. "I got plumb tired of gettin' shot at for a deer. But there ain't nobody ever mistook me for a fish."

Customer: "I want a pair of spec-rimmed hornicles — I mean sporn-himmed rectacles — pshaw! I mean heck-rimmed spornicles."

Clerk: "I know what you mean, sir. You mean a pair of rim-sporned hectacles."

The sharp tongue is the only edged tool that grows keener with constant use.

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Salesman in pet shop: "You want 100 mice, 500 spiders and 10,000 termites? If I could get them, what in the world will you do with them?"

Customer: "I'm moving and the landlord insists that I leave the house just as I found it."

A cranky old man invested in one of those new hearing aids that are almost invisible. A few days later he returned to the store to express his delight.

"I'll bet your family likes it, too," said the salesman.

"Oh, they don't know I've got it," said the old man; and am I having a ball! In the past two days I've changed my will twice.

The superior man blames himself; the inferior man blames others.

Ins And Outs



NOVA SCOTIA SANATORIUM

Admissions: June 16 to August 15

MRS. EDITH LOUISE BECK, 206 St. Philippe St., Bridgewater; JOHN HOWARD BLAAUWENDRATT, Beaverbrook, Col. Co.; EDWARD BONVIE, 848 Spring St., Parkdale, New Glasgow; RONALD OLIVER BOUTILIER, 245 Pictou Rd., Bible Hill, Col. Co.; MRS. GENEVIEVE JESSIE CAR-TER, 42 Lyle St., Dartmouth; MRS. IDA MAY CLAYTON, East Preston, Halifax Co.; ORGERINE CLAYTON, 2560 Barrington St., Halifax; JOHN BURTON DAHR, Windsor Junction, R.R. 3, Lr. Sackville; RALPH ARNOLD DOHERTY, 32 Major St., Dart-MARIE FITZGERALD, ANNE mouth; Dingwall, Victoria Co.; ROY WILLIAM GENGE, DeSable, Queens Co., P.E.I.; JOHN ANDREW GOOGOO, Whycocomagh; GEO-RGE HARVEY HARRIS, Timberlea, R.R. 1, Armdale; MRS. THERESA JOUDREY, New Germany; GEORGE CHARLES LAHEY, Main-a-Dieu; ARCHIBALD JOSEPH Mc-ARTHUR, 14 Idlewyde Rd., Armdale; MRS. SHIRLEY ALBERTA MacPHERSON, 132 Wilson Ave., New Waterford; HERBERT CAMERON McQUARRIE, Stellarton; MRS. ALICE GERTRUDE NOBLE, Canso; LAW-RENCE AUBREY OSMOND, 81 Belle Vista Drive, Dartmouth; EDWARD STANYON FAIRBANKS PIERS, 1964 Beech St., Halifax; MARGARET MARY SAXTON, 2490 Armcrescent West, Halifax; EDWARD BRUDEN STEWART, Upper Musquodoboit; KONSTANTINE TECTONIDES, 18 Melville Ave., Armdale; STAVROULA TECT-ONIDES, 18 Melville Ave., Armdale; BAS-IL CHESTERFIELD WHALEN, 336 Vale Rd., New Glasgow.

Discharges: June 16 to August 15

JOHN LAURIE BABIN, Sluice Pt., Yarmouth Co.; ALFRED JAMES BARNETT, 5506 Gerrish St., Halifax; MARY BRIDGET BERNARD, Eskasoni; EPHRAM BONANG, R.R. 1, Head Chezzetcook, Halifax Co.; RONALD OLIVER BOUTILIER, 421 Pictou Rd., Bible Hill, Col. Co.; GEORGE WHITMAN BROWN, 32 Fairbanks St., Dartmouth; SIDNEY PALMER BROWN,

Chignecto; STANLEY FREEMAN BROWN, R.R. 2, Up. Musquodoboit; DONALD PAT-RICK CAMERON, 6520 MacDougall Ave., Apt. 2, Halifax; MICHAEL ERNEST CAN-NON, Port Hood; OWEN ALEXANDER CARTER, Mulgrave; ROBERT JOHN ET-TINGER, Three Miles Plains, R.R. 1, Windsor; CECIL FRANCIS FLYNN, Newport Station, Hants Co.; DUNCAN EDWARD FORBES, 61 Shearwater Trailer Court, Dartmouth; ROY WILLIAM GENGE, De-Sable, Queens Co., P.E.I.; MRS. MARY JOSEPHINE GILLIS, Lanark, Antigonish Co.; BRIAN GILBERT HIRTLE, Waterville, Kings Co.; MRS. GLADYS CLARA HUDGINS, R.R. 1, Kingston; NANCY MAR-IE LANGILLE, R.R. 1, Blockhouse, Lunenburg Co.; JOSEPH ALAIN LeBLANC, R.R. 1, Weymouth; WAYNE HARRY LEITCH, 235 Waverly Rd., Dartmouth; RAYMOND VICTOR LUDDINGTON, Drum Head, Guysborough Co.; ROBERT CLYDE MILLER, 5 Maplewood Drive, Armdale; EARL FOST-ER MULLEN, Easton, R.R. 2, Weymouth; MRS. ANNA CONSTANCE McCARTHY, 56 Normandy St., Truro; ANNE MARIE Mac-DOUGALL, 5516 Victoria Rd., Halifax; LEWIS FANCY PALMER, Berwick; RICH-ARD GRANVILLE PATTERSON, 270 Farquarson St., Dartmouth; DAISY ELIZA-BETH ROBINSON, Hantsport; MRS. JAC-QUELINE JESSIE SALITTER, 32 Lorne Ave., Dartmouth; ERIC WALLACE SMITH, Lr. Clark's Harbour, Shelburne Co.; HAR-RIS ALBERT SMITH, Walton, Hants Co.; HAROLD ALLEN STRONG, Factorydale, Kings Co.; MRS. ADELINE MAE UPHAM, Masstown, R.R. 1, Debert, Colchester Co., ALFRED JOSEPH WEARE, Highbury, R.-R. 3, Kentville; RACHEL ANNE WINTERS, 6 Alma St., Amherst; ELIZABETH JANE WOLFE, Grand Desert, Halifax Co.; RO-BERT YOUNG, Cape Breton Hospital, Sydney River.

POINT EDWARD HOSPITAL

Admissions: June 16 to August 15

MARY BRIDGET BERNARD, Castle Bay; CHARLES BRUSHETT, 126 Highland St., Glace Bay; MRS. ROSE MARIE BURGESS, R.R. 1, Louisbourg; DUNCAN EDWARD (Continued on Page 16)

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PETERS' LUNCH

INS AND OUTS -

(Continued from Page 15)

CAMERON, R.R. 3, Inverness; PATRICK CAMPBELL, 4 Columbia St., River Ryan; MICHAEL ERNEST CANNON, Port Hood; ROY ALBERT CARMICHAEL, Box 248, Baddeck; GILBERT FRANCIS GILLIS, 245 7th St., Glace Bay; VICTOR JOHN GOOGOO, Nyanza; EDWARD WILLIAM HINCHEY, 83 Hinchey Ave., New Waterford; JOSEPH JAMES MacDONALD, R.R., 1, St. Peters; WILLIAM JOSEPH MacGEAN, 6 Vale St., North Sydney; MRS. MARY MAE MacINNIS, R.R. 1, Deep Cove, Gabarouse; MICHAEL NORMAN MacNEIL, Irish Cove; MRS. MARY ANN PAUL, 28 Gallagher St., Sydney; MASTER WAYNE MICHAEL POTTIE, West L'Ardoise; JAMES HUBERT SIMMS, New Victoria; MASTER CECIL RODNEY SNOW, Green Hill, Florence; BLAIR GERALD TRACEY, 368 Fourth St., Glace Bay.

Discharges: June 16 to August 15

MYLES AYLWARD, Port Hastings; JOS-EPH BONIN, Arichat; WILLIAM JOSEPH BROWN, 49 Dorchester St., Glace Bay; MRS. ROSE MARIE BURGESS, R.R. 1, Louisbourg; ARTHUR CLOAKE, 19 Warren St., New Waterford; THOMAS CRAWFORD, 177 Wilson Ave., New Waterford; JOHN ANDREW GOOGOO, Afton Station, Antigonish; JAMES McVEY HICKEY, 710 Winnifred Square, Glace Bay; MRS. MAE ET-HEL HISCOCK, 7 Regent St., North Sydney; MRS. DELLA JANE HOLLINGSWOR-TH, 138 Richmond St., Sydney; CHARLES RAYMOND HOLMES, 756 Westmouth Rd., Sydney; GEORGE CHARLES LAHEY. Main-a-Dieu; MRS. MARTHA EDITH Mac-DONALD, 16 Carroll St., Glace Bay; WIL-LIAM JOSEPH McGEAN, 6 Vale St., North Sydney; JAMES CHRISTOPHER MacKIN-NON, Blowers St., North Sydney; MICHAEL NORMAN MacNEIL, Irish Cove; PETER HECTOR MacNEIL, 212 King Edward St., Glace Bay; GEORGE JOSEPH NEARING, Port Caledonia; PATRICK O'FLAHERTY, River Ryan; MARY ANN PAUL, 28 Gallagher St., Sydney; IDA MARY PIERRO, Nyanza; BABY LAURA MARIE PIERRO, Nyanza; MASTER PATRICK JOSEPH PIER-RO, Nyanza; MARY THERESA PIERRO, Nyanza; CHARLES MARTIN ROBINSON, 20 Simpson St., Glace Bay; MOSES AUGUS-TINE SACCARY, 30 Hugh St., Glace Bay; EUGENE PAUL WHITE, Louisdale; FRAN-CIS YORKE, 171 Queen St., North Sydney.

EDITORIAL COMMENT —

(Continued from Page 9)

by informal learning situations."

We will be hearing more of this program and it is hoped that our patients at the Sanatorium will be able to take advantage of this opportunity as well. For best results one should brush up on English and Mathematics a bit before taking these tests. As the tests can be re written, however, failure to pass in the first attempt might also provide an incentive to study some material that has been forgotten.

We have received our final copy of the Oakdale, Iowa, Stethoscope. Their July issue is dedicated to Dr. and Mrs. William M. Spear, retiring superintendent and medical director, and his wife. An excerpt from their June, 1927, issue welcomed Dr. Spear who came from Hamilton. Ontario, and his wife, Mrs. Elsie Spear.

The decision to discontinue the Stethoscope magazine was caused by the declining patient population in Oakdale and "the fact the patients stay for such a short time." It was felt that Dr. Spear's retirement marked an appropriate time to terminate publication. We have enjoyed reading the **Stethoscope** and we are sure that it will be missed by their many readers.

FINNISH STUDENTS —

(Continued from Page 3)

FINNISH STUDENTS AT pital, the Nova Scotia Hospital, and the Kings County Hospital, as well as attending the patients' picnic at Margaretsville in June.

Mr. Seppa and Mr. Vainio wished to take this opportunity to express their thanks to their sponsors and to the patients and staff of the Sanatorium. We were assured that we would all be long remembered by them.

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Nova Scotia Sanatorium

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H. M. HOLDEN, M.D., C.R.C.P. (C) Acting Medical Superintendent
J. J. QUINLAN, M.D., C.R.C.S. (C) Surgeon
F. J. MISENER, M.D. Radiologist
A. LARETEI, M.D. Physician
MARIA ROSTOCKA, M.D. Physician
MARIA ROSTOCKA, M.D. Physician G. A. KLOSS, M.D. Physician
E. W. CROSSON, M.D. Physician
V. D. SCHAFFNER, M.D., C.R.C.S. (C), F.A.C.S Consultant Surgeon
D. M. MacRAE, M.D., C.R.C.P. (C) Consultant Bronchoscopist
B. F. MILLER, M.D., F.R.C.S. (Ed.), F.R.C.S. (C) Consult. Ortho. Surg.
E. J. CLEVELAND, M.D., C.R.C.P. (C) Consultant Psychiatrist
D. H. KIRKPATRICK, M.D Courtesy Consultant in Anaesthesia
C. E. JEBSON, M.D., C.R.C.S. (C) Consultant Urologist
MRS. HOPE MACK, R.N. Director of Nursing
MISS EILEEN QUINLAN, B.Sc., P.Dt. Senior Dietitian
DONALD M. BROWN, B.A., B.Ed., M.S.W. Director of Rehabilitation

Point Edward Hospital

D. S. ROBB, M.D., T. K. KRZYSKI, M.D.	Medical Superintendent
W. MacISAAC, M.D. D. B. ARCHIBALD, M.D.,	Consultant Bronchosconist
MISS KATHERINE MacKENZIE, R.N.	Director of Nursing
MISS JOYCE LEWIS	

Church Affiliation

NOVA SCOTIA SANATORIUM

ANGLICAN

Co-ordinating Protestant Chaplain

Rector-Archdeacon L. W. Mosher Sanatorium Chaplain-Rev. W. A. Trueman

Rev. Dale MacTavish

BAPTIST

ROMAN CATHOLIC

Minister-Rev. A. E. Griffin Lay Visitor-Mrs. H. J. Mosher Parish Priest-Rt. Rev. J. N. Theriault Curate-Rev. G. E. Saulnier

CHRISTIAN REFORMED

SALVATION ARMY

Minister-Rev. H. Vander Platt

Capt. H. L. Kennedy UNITED CHURCH

PENTECOSTAL

Minister-Rev. K. G. Sullivan Sanatorium Chaplain-Dr. (Rev.) Douglas Archibald

Minister-Rev. Robert Cross

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

UNITED CHURCH Rev. Robert Hutcheson

Rev. Weldon Smith ROMAN CATHOLIC

PRESBYTERIAN

Parish Priest-Msgr. W. J. Gallivan

Rev. E. H. Bean

SALVATION ARMY Mr. William Brewer

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



The Canteen . . .

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AND BENEFIT

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- Gift suggestions, Novelties, Cups and Saucers
- Clocks, Watches, and Costume Jewellery
- A wide variety of grocery items
- Ladies' and Men's wear Nylons