



NOVA SCOTIA DALHOUSIE  
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J. J. QUINLAN, M.D. ....	Surgeon
F. J. MISENER, M.D. ....	Radiologist
A. LARETEI, M.D. ....	Physician
MARIA ROSTOCKA, M.D. ....	Physician
G. A. KLOSS, M.D. ....	Physician
E. W. CROSSON, M.D. ....	Physician
V. D. SCHAFFNER, M.D. ....	Consultant Surgeon
D. M. MacRAE, M.D. ....	Consultant Bronchoscopist
E. J. CLEVELAND, M.D. ....	Consultant Psychiatrist
F. R. TOWNSEND, M.D. ....	Consultant Psychiatrist
B. F. MILLER, M.D. ....	Consultant Orthopedic Surgeon
D. H. KIRKPATRICK, M.D. ....	Courtesy Consultant in Anaesthesia
C. E. JEBSON, M.D. ....	Consultant Urology
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MISS EILEEN QUINLAN, P.Dt. ....	Senior Dietitian
F. G. BARRETT, M.Sc. ....	Director of Rehabilitation

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## *Sanatorium Visiting Hours*

DAILY: 10.15 - 11.45 A.M.

DAILY: 3.15 - 4.45 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*

## *Kentville Church Affiliation*

Anglican—Rector .....	<i>Archdeacon L. W. Mosher</i>
Sanatorium Chaplain .....	<i>Rev. J. A. Munroe</i>
Baptist—Minister .....	<i>Dr. G. N. Hamilton</i>
Student Chaplain .....	<i>Lic. Gerald Fisher</i>
Lay Visitor .....	<i>Miss B. Lockhart</i>
Christian Reformed—Minister .....	<i>Rev. J. G. Groen</i>
Pentecostal—Minister .....	<i>Rev. Glen Kauffeldt</i>
Roman Catholic—Parish Priest ...	<i>Rev. John F. DeLouchry</i>
Asst. Roman Catholic Priest ...	<i>Rev. Gerald E. Saulnier</i>
Salvation Army .....	<i>Capt. H. L. Kennedy</i>
United Church—Minister .....	<i>Rev. K. G. Sullivan</i>
Sanatorium Chaplain .....	<i>Rev. J. D. MacLeod</i>

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.

# HEALTH RAYS

A MAGAZINE OF HEALTH AND GOOD CHEER

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

Vol. 48

APRIL, 1967

No. 4

A decorative border in blue ink frames the page. It features a repeating pattern of stylized flowers with five petals and long, thin stems, arranged in a slightly wavy line.

## AN APRIL MORNING

Once more in misted April  
The world is growing green.  
Along the winding river  
The plume willows lean.

Beyond the sweeping meadows  
The looming mountains rise.  
Like battlements of dreamland  
Against the brooding skies.

In every wooded valley  
The buds are breaking through,  
As though the heart of all things  
No langour ever knew.

The golden-wings and bluebirds  
Call to their heavenly choirs.  
The pines are blued and drifted  
With smoke of brushwood fires.

And in my sister's garden,  
Where little breezes run,  
The golden daffodillies  
Are blowing in the sun.

—Bliss Carman

# As I Found It

Harold H. Nicolle  
Nova Scotia Sanatorium

When faced with a period of Sanatorium treatment, our first thoughts are of the sacrifices we are forced to make. These certainly differ with age and circumstances. Some of the more pronounced are: Financial, disassociation from friends, school, work, play, and other social activities. The foremost sacrifice we must naturally make is the separation from our families. This is just as difficult for the child from his parent, as the parent from his children.

My primary reason for writing this is for you younger people that have had to leave home and school. Although this may only be for a few months, it may be enough to require you to repeat a grade when you resume your formal schooling.

These are not words that just come from my pen, but from my heart and mind, through experience. At one time my own schooling was disrupted by a "monster" called "War." We call our monster Tb. I do not profess to have the capability of professionally pointing out the values or other advantages of education. But, I can honestly relate a true experience that neither the "monsters" of War, Tb., Heart Disease, or Accident halted any progress in my life. Granted, it may have slowed it down, and at this point, I would like to give you a little insight into my personal life to show why I bring these thoughts to you.

I am not an old man by any means, and have small children of my own waiting patiently for "Daddy to come home." I left school at an early age, as did many others, to follow my brothers and fellow comrades to War. I was one of the fortunate ones who came back, planning to resume my interrupted education. This was a gloriously happy day; I was reunited with those of my family that did return from War! Suddenly, as I was ready for discharge from this service, I found I was to be hospitalized for many years with Tb. You can appreciate the feeling that I endured after giving already four years of my life. I was faced with further undetermined time with Tb. Here I was, little education and an unknown number of years ahead of me to cure Tb., when "rest" was the only cure. To enlarge a bit—other sicknesses and accidents were to use more years of my life. In all, approximately one-half of the past 24 years of my life have been under hospitalization or close medical supervision. These were young years that I needed to prepare for life.

Twenty-two years ago, it was the advice and encouragement of a man who is now on this hospital staff that guided me to prepare for my future. It was simply to use my spare hospital time to the best advantage, by progressing in studies, bit by bit, as my doctors felt I was able. Before I was finally physically fit to start work I was 31 years of age. Because I had taken advice and was prepared, those efforts aided me quickly to a position of responsibility and financial reward.

Again, I am back in hospital, but thanks to advanced scientific drug research, medical science and nursing techniques, I know my stay will only be a matter of months and not years. There is still a lot I can learn, as we all can, and certainly, I promise I will take out of here more useful knowledge than I came in with.

I know "cure" time can be useful time. Although we may not be able to complete what we had planned for this year, we can certainly use some of our time to make next year's problems easier. Certainly, our confinement here is going to be a personal delay. But let us not for a minute worry about what we are going to lose, but what we can gain. Even if it is only by small amounts at a time.

There are many young men and women who, while taking treatment, proceeded by degrees with their education. They eventually became doctors, lawyers, nurses, business administrators, and the finest of tradesmen. Without a doubt, there are a number of such individuals to be found right here at the Sanatorium.

Any goal achieved gives one personal satisfaction, but I think that when this is done with the odds against us, the results are much more rewarding. Our entire lives are involved with learning, whether it is a new recipe for a cake, or how to grease a wheel. Keep in mind that "we learn, not for school, but for LIFE."

What I am passing on to you is for your information, and to try to point out that, in all circumstances, there are advantages, if we only stop to look for them. But we must also be humble enough to seek advice of our more learned.

This brings me to another thought, and this again is a layman's view on any medical treatment. A diploma for any degree does not imply that a person has all the answers, but does have sufficient knowledge to proceed with their chosen profession. They must go on to progress through actual practice; study of up-to-date surgical and medical research; read



and absorb modern medical publications; take refresher courses; and by various other methods. In this way, they are able to treat and advise to the best advantage of you, the patient, who is their prime concern, and their reward is your successful return to health.

Please remember all the advances made over the years on tuberculosis treatment can only be yours if you follow the skilled medical and nursing advice that is available to you. I am sure your doctor will tell you that no two cases of tuberculosis are alike any more than two cut fingers. Yours may heal much more quickly than mine, even though we may use the same treatment or similar drugs. But your doctors and nurses do know what is best in your particular case, and are the people to answer your questions or problems. This is their special field. Your room-mate or other fellow patients may pass on to you what they think your activities or treatment should be. I think all hospitals have these "Ben Casey's" who, after a few months of treatment, profess to know more than the staff who have dedicated years to the study. I can name seven different hospitals, including this one, where, as a patient, I have run across this type. The staff, I am sure, will respect you for asking questions, and will be proud to give you their answers if it is within scientific knowledge.

I pray your stay will be as short as medically possible, and you use what free time you have to prepare to pick up where you left off, or gain as much as possible, for your future place in normal life.

### CHILDREN'S EASTER PARTIES

An Easter party, sponsored by the Port Williams C.G.I.T. group, under the direction of Mrs. Donald Kempton, was held in the Children's Annex on March 18.

The playroom, as usual, had been decorated by the children in advance. Presents were distributed by the hostesses, and this was followed by a program of games and singing in which the children enthusiastically participated.

Delicious refreshments were served by the Dietary staff, supplemented by treats provided by the sponsors.

\* \* \* \* \*

The Easter Bunny paid an early visit to the children in the Annex, but they were ready for him. The playroom had already been decorated, and when, on March 21, the Kentville Gyrettes arrived, a festive spirit was in the air.

Members present were: Mrs. W. R. Sibbit, Mrs. G. W. Butt, Mrs. J. D. MacLeod, Mrs. R. J. Turner, Mrs. G. G. Hudgins.

President, Mrs. A. N. Clarkson, was unavoidably absent.

Games were played, with prizes going to Doreen Barton, Troy Barton, and Marlene Cromwell. Doreen's presence at the party was a welcome surprise, and she was greeted with shouts of joy. Doreen is now a patient on 3 East, having recently undergone surgery.

The hostesses presented each child with an Easter basket, after which delicious refreshments were served.

Bruce Barton, on behalf of the other children, thanked the sponsors for giving them a lovely party.

### ST. PATRICK'S DAY PARTY

A St. Patrick's Day party was held on March 15 in the patients' dining room amidst a setting of bright green shamrocks, pipes, hats, and other reminders of the Emerald Isle.

The party was sponsored by Olympic Chapter, I.O.D.E., Kentville, and members present were: Mrs. W. R. Sibbit, Regent; Mrs. G. Kloss, Party Committee Chairman; Mrs. A. F. Miller, Mrs. Roy Calkin, Mrs. J. E. Hiltz.

Mr. F. G. Barrett, representing the Rehab. Department, introduced and thanked the sponsors, and assisted with the awarding of prizes.

The prizes, donated by members of the I.O.D.E., were presented as follows: Auction 45—Gents' high, Bob Goodwin; Gents' low, Perry Kelly; Ladies' high, Mary Gillis; Ladies' low, Sadie Sorenson. Crokinole—Myrna Nickerson; Chinese Checkers—Cecilia Hubbard; Checkers—Ann Cleveland and Helen Crocker; Cribbage—John Hamilton. A special prize, a beautiful Birthday Cake, was won by Mrs. Margaret Hurley.

Delicious refreshments, provided by the sponsors, were served by the Dietary Department.

### IN APPRECIATION

I wish to extend sincere thanks and appreciation to all the Doctors, Nurses, and Clergy, as well as to all those persons who contributed in any other way to the wonderful care and treatment which I received while a patient in this hospital.

To my fellow patients I also say "Thank you", and I wish you all the best of luck in the future.

Very sincerely,  
Henry Joseph Chiasson,  
Floor III East Infirmary,  
February 23, 1967.

\* \* \* \* \*

There is no fun in medicine, but much medicine in fun.

# The Sanatorium Cracker Barrel

J. E. Hiltz, M.D.



During the past month, the Nova Scotia Tuberculosis Association has sponsored eight public meetings in the Municipality of Clare where there is a moderate epidemic of tuberculosis at the present time. Mr. Ralph Ricketts, the Executive Director of the Association, supported by Miss Cecile Amirault, Public Health Nursing

Supervisor, has shown the moving picture "The Quiet Betrayal" and given a talk on tuberculosis followed by a question and answer period at eight different locations on eight different evenings in order to provide information for the relatives and friends of the thirty or more young patients whose homes lie between New Edinburgh and Salmon River, Digby County. This is a very worthwhile undertaking by the N.S.T.A. which is supported by your purchase of Tb. Christmas Seals each year. The N.S.T.A. provides many services not the least of which is Health Education at a time and place convenient for the audience.

Speaking of the Nova Scotia Tuberculosis Association, in February of this year it established a Chest X-ray Centre at its headquarters, 17 Alma Crescent, Fairview, not far from the Bayers Road Shopping Centre and the entrance to Bicentennial Drive. This has been set up for the convenience of those persons living in Halifax County in the Fairview area, and also those living in the Northwest section of Halifax City. Its use will be restricted, for the present, to those persons who need a survey chest film only—school teachers, food handlers, and persons found to have a positive tuberculin reaction and referred to it by Health authorities. Later, it is hoped to establish there a full-fledged Chest Clinic under the direction of a physician especially trained in chest diseases. To the Clinic will then be referred persons who are not well or who are suspected of having tuberculosis or some other lung disease. The N.S.T.A. Chest X-ray Centre is another important step taken by the Tuberculosis Association to provide a needed service for the people in the Halifax area.

Centre and a Chest Clinic? The former provides only an x-ray film which may or may not be normal in appearance even in the presence of lung disease. A Chest Clinic, on the other hand, provides an assessment service: the patient is interviewed by a physician who finds out how he is feeling and if he has symptoms of chest disease; the physician may or may not examine the patient's chest depending upon the need indicated by symptoms; a chest x-ray film is taken; sputum tests for tubercle bacilli or tumour cells are carried out as indicated; and finally, all findings are brought together and the result reported by the Clinic Physician to the family doctor and to the appropriate Health Unit Director. An x-ray Centre provides a partial service. A Chest Clinic provides a complete service. Each serve a very useful purpose, but the x-ray Centre is more limited in its scope. Congratulations to the Nova Scotia Tuberculosis Association upon the opening of this Chest X-ray Centre.

\* \* \* \* \*

Would you believe it possible! Within the past month we have had two patients admitted to the Sanatorium with far advanced tuberculosis of the lungs and sputum very positive for tuberculosis. Both were known cases of tuberculosis. One had not had an examination for fifteen years and the other not for ten years. How much damage had been done to others by spreading infection to companions cannot be stated at this moment. Let us all resolve, however, for the sake of our friends and relatives, as well as for our own sakes, to have an examination—including sputum tests—every year even if our tuberculous disease is no longer active when treatment is over. A yearly examination should be a lifeline precaution on a lifetime basis.

On April 3 to 5, the Annual Staff Conference of the Department of Public Health is scheduled for Halifax. By the time that this column is read, the Conference will be over and we hope that much good will come of it. Senior personnel gather at that time to state their problems and seek solutions for them. The first day is to be given over entirely to a discussion of tuberculosis. It is disappointing to learn that during 1966 we found 217 new active cases of tuberculosis in Nova Scotia compared to 201 in 1965 and 168 in 1964. There are problems to discuss.

\* \* \* \* \*

What is the difference between an X-ray

## NURSING NEWS

Congratulations are in order for recent graduates from the Nursing Assistants Course:

Miss Judith Carey—Bras d'Or, C.B.

Miss Wanda Churchill—Sanford, Yarmouth Co.

Miss Donna Eisner—Kentville.

Miss Wendy Haagenson—Greenwood.

Miss Sue Anne Sweeney—Tusket, Yarmouth Co.

Mrs. Mabel Ray—Chester.

By the time **Health Rays** is "put to bed", Miss Patricia Atkinson of Port La Tour, Shelburne Co., Miss Diane Coombs of Greenwood, and Miss June Magarvey of Parker's Cove, will also be graduates.

Miss Carey, Miss Eisner, and Miss Sweeney are joining the Nursing Staff at the Sanatorium; Miss Churchill goes to Yarmouth Regional Hospital; Miss Haagenson goes to her home in Red Deer, Alberta. The remainder have not as yet divulged their plans. Formal graduation exercises will take place later in the year.

On February 20, 1967, a new class entered the Course for Nursing Assistants:

Barkhouse, Miss Sadie Elva

Buchanan, Miss Eileen Dorothy

Churney, Miss Jeanne Marie

Deveau, Miss Joan Marie

Firth, Miss Myrtle Joyce

Gould, Miss Gertrude Ellen

Gould, Miss Kathleen Sheryl

Hughes, Miss Patricia Audrey

Johnstone, Miss Sadie Geraldine

Kennedy, Miss Doreen Ann

LeBlanc, Miss Barbara June

LeBlanc, Miss Mary Delphine

MacDonald, Miss Jessie Elizabeth

MacDonald, Miss Karen Ronaldal

MacIntosh, Miss Paulette Raylene

MacIntyre, Miss Mary Louise

McNeil, Miss Angela Maureen

MacPherson, Miss Judith Dianne

Penney, Miss Audrey Anne

Rogers, Miss Anita Charlotte

Sanders, Miss Lorna Doreen

Sandford, Miss Faye LeVerne

Titus, Miss Glenda Joyce

Wile, Miss Wanda Lynn

As of this date, 42 Student Nursing Assistants are on course.

We still need registered nurses and certified nursing assistants on the nursing staff and would be pleased to receive applications.

Mrs. Catherine Boyle, R.N., Instructor, and Mrs. Ceila Best, R.N., attended a Career Conference at the Western Kings Rural High School in Auburn.

Miss Florence Harris recently became Mrs. Floyd England and congratulations are in order.

Mrs. Velma Corbin, C.N.A., and Mrs. Louise Wood, who have been on Casual

Staff, joined our full time Nursing Staff in March.

Mrs. Irene Hamilton, Nurses' Aide, resigned in February.

Mrs. Maude Black, R.N., Kentville, joined the Nursing Staff in February.

Sympathy is extended to Mrs. Rose Houghton on the death of her mother.

Mrs. Elsie Tracey resigned, and is expecting a blessed event.

Miss Helen Thompson is now Mrs. Bernard Young. Congratulations and best wishes are extended.

To Miss Heather MacLeod our congratulations on her engagement.

Miss Berneice Weeks, C.N.A., will be leaving for England soon.

We are sorry to report that Miss Floris Smith, R.N., fell on the ice at home in February and has a fractured arm.

Ordinarily we do not report on vacations but Miss Margaret Potter, R.N., and Miss Heather MacLeod, R.N., had a trip to Boston, Vermont, and Montreal, and enjoyed skiing in Vermont and in the province of Quebec.

## APRIL RAIN

It is not raining rain for me,

It's raining daffodils;

In every dimpled drop I see

Wild flowers on the hills.

The clouds of gray engulf the day

And overwhelm the town;

It is not raining rain to me

It's raining roses down.

It is not raining rain to me,

But fields of clover bloom,

Where any buccaneering bee

Can find a bed and room.

A health unto the happy,

A fig for him who frets!

It is not raining rain to me,

It's raining violets.

—Robert Loveman

Our desire for a continuous series on Hobbies for Shut-Ins has ground to a halt. We have been trying to persuade a friend to write on bird watching. If he won't, will you? Without half trying we have seen Cedar Waxwings and Evening Grosbeaks in the Mountain Ash trees, and we mustn't fail to mention the Snow Buntings and Horned Larks on the dyke. Juncos and our lone Robin have frequently been seen around the Rehab., and a single Song Sparrow had been feeding with the omnipresent English Sparrows. But—the most exciting sighting has been of a Bald Eagle on the dyke, no more than two hundred feet from our car. He flew when we stopped, pursued by two angry gulls. Won't you write more to explain how pleasant a pastime it is to watch our feathered friends?

## DUCK HUNTING OFF CAPE SABLE ISLAND

Hubert Atkinson

Off the southern tip of Nova Scotia lies Cape Sable Island, often called "Cape Island." (This should not be confused with Sable Island, "The Graveyard of the Atlantic", one hundred miles southeast of Halifax.) Until a few years ago, a small ferry plied between "Cape Island" and the mainland. Now a fine causeway defeats the intentions of nature, and makes travel to and from the Island a pleasure indeed.

The Island boasts one incorporated town, Clark's Harbour, and several smaller communities. Many of the Islanders are fishermen, owning their own boats and gear, while others go as crew.

When the cold blasts of October sweep over the Island and sea, the fisherman lays his fishing gear aside and takes his gun. He will still use a boat, and begin a long, tiring day at four o'clock in the morning, but will not be venturing far out into the deep. Rather, he will be cruising around his own Island and smaller neighboring ones, for this is the duck and goose season.

Years ago, the duck hunter used a fourteen-foot-long skiff, pointed at both ends, and carrying forty gunners. These were no sporting expeditions! They were the means of providing a livelihood throughout the long, cold fall and winter months.

Today, the duck hunter uses an outboard motor-boat. Invariably, the sound of the motor creates confusion and panic among the ducks, making them easy prey. Now, as in the past, large numbers and many varieties are shot. This particular spot is directly on the course followed by these birds in their flight to and from the South; hence, the good hunting.

On one occasion, the keeper of the light on the tip of the Island, found sixteen dead ducks at the base of the light. Blinded by the light on their night flight, they had crashed into the building.

The most outstanding hunter of the Island was a man by the name of Howard Smith. Six days a week, without fail, he hunted, daunted by neither wind nor weather. One bitter day, as he waited in a blind with the patience of the skilled and practiced marksman, for the ducks to draw near, he was astonished that his dog did not respond to his command. The poor, faithful creature—less rugged than his master—had frozen to death!

Now, as in bygone days, wild ducks and geese are a delicious dish, when cooked by an expert.

As told to Marguerite MacLeod

## RAIN

As I wander through the earth  
I see that the rain  
Has come to cleanse thee, earth  
To nourish, and create a new life.

Rain, the beauty of the heavens,  
Has come forth to bring joy  
To man and his docile creatures,  
So, if rain is joy and happiness

Why does rain destroy the creation  
That has been, but through  
The lapse of time, why,  
Because of its nature, unknown?

Rain, the beauty in which it creates  
Within its own medium of joy  
To fall and ease the thirst  
Of the sweltering earth to a passive  
state of rest.

So when rain comes with the smoothness  
of velvet and joy of laughter,  
To cast its warmth and life upon the  
earth of such beauty,  
To bring life and prosperity to mankind  
Oh, rain of beauty, come forth

To us to shower our dried  
Fields green, so that they  
May sway in the breeze  
Of a countless number of raindrops.

For happiness has come to us  
Because the rain has come  
To put to rest, our weary souls  
Of our own creation.

For the rain has come and gone,  
But a maze of beauty has been left  
So man can look and thank  
The beauty of rain.

Because now that rain has gone  
We rest and slumber,  
For happiness is with all  
Which rain has created.

—J. M. W. Nicholson  
N. S. Sanatorium.

## RESOLVE

Let me be a little kinder,  
Let me be a little blinder  
To the faults of those about me.  
Let me praise a little more;  
Let me be when I am weary  
Just a little bit more cheery—  
Let me serve a little better  
Those that I am striving for  
Let me be a little braver  
Let me strive a little harder  
When temptation bids me waver;  
To be all that I should be.  
Let me be a little meeker  
With the brother who is weaker;  
Let me think more of my neighbor  
And a little less of me.

The Link

## The Social Assistance Act

The purpose of the Nova Scotia Social Assistance Act is to provide financial Assistance and Welfare Services to persons in need and persons who are likely to be in need if services are not provided. The payments of financial assistance replaces family earnings which have terminated because of illness, death, sickness, unemployment or other personal cause. The objective of welfare services, often referred to as case work services, counselling and rehabilitation services is to lessen, remove or prevent the causes and effects of poverty and dependency.

There are two types of Assistance. Provincial, payable under Part 1 of the Act and Municipal, payable under Part 2. Generally speaking the applicants who qualify for Provincial Social Assistance under Part 1 are relatively long term recipients of assistance whose eligibility is not likely to change suddenly. They are generally applicants about whose eligibility there is little question or dispute. All needy persons who do not qualify for Assistance under Part 1 may apply for Municipal Assistance under Part 2. Thus recipients of Municipal Assistance tend to fall into the following general categories or groups:

- (a) Employable persons who are temporarily unemployed and without sufficient income to maintain themselves or their family;
- (b) Recipients of Provincial Social Assistance whose Assistance payments are inadequate because of some special need such as shelter, costs of Health Services etc.;
- (c) Unemployables who do not qualify under Part 1, especially persons suffering from emotional and personality disorders;
- (d) Transients;
- (e) Persons with short term need or whose eligibility for assistance is in doubt or subject to question.

Provincial Social Assistance is concerned exclusively with individuals and families who qualify for categorical assistance as specified by the legislation. The qualifying categories have been regrouped under the new Act into three sections and the payments and services increased. Payments under both Parts are determined by a needs test. Recipients of categorical assistance under Part 1 will receive their cheque direct from Halifax. Those qualifying under Part 2 will be assisted by the Municipal Unit in which the person resides.

Section 7 (Disability Assistance) pro-

vides a maximum payment of \$55.00 a month. Persons must be disabled to the extent that they are unable to work, and the disability of such a nature that it is likely to continue for at least one year. The maximum cash or securities permitted under this section is \$1,000.00 for a single person and \$1,500.00 for a married person when the home is shared with the spouse.

Section 9 (Assistance to Needy Mothers) provides for payments to a maximum of \$150.00 a month on a needs test basis. This applies to a mother when the father, due to death, disability, desertion, imprisonment, divorce or other cause, is unable or fails to support his family. Unmarried mothers maintaining their own home are included under the Act.

The maximum permissible amount of cash and securities for the mother has been increased from \$1,500.00 to \$2,500.00. In addition, each child may retain \$1,500.00 in trust for special educational purposes.

Section 11 (Assistance to Foster Parents) provides for a payment of \$25.00 for the first child and \$20.00 for each additional child maintained through necessity in a foster home. (Orphaned and abandoned children are assisted at the same rate.) In all cases the Administrator must determine that need exists, that the natural parents are unable to help, and that the total income in the foster home does not exceed \$5,000.00 per year.

Persons who qualify for Municipal Assistance have been described in terms of general categories or groups.

There are 66 Municipal Units in the Province, and 36 of these are serviced by organized Welfare Departments. These 36 with such services comprise 82 per cent of the population of the Province. Assistance may be payable in the other 30 Units, but it is usually substandard, and very often no satisfactory provisions are made.

The benefits payable under Part 2 Municipal Assistance vary considerably from Unit to Unit. The Canada Assistance Plan, under which the federal government shares all such payments, requires that the payments shall be made on a budget deficit basis. This requirement also applies to Provincial payments under Part 1.

The budget deficit method is used in calculating the amount of assistance to be paid in each case. A budget is calculated by totalling the requirements for both regular needs, such as food, clothing and shelter for all members of the family qualifying to be included in the budget,

and approved special needs, and deducting all income resources from the total. Resources include cash income and other things available in lieu of income such as produce, free housing, etc.

When the total of items of budgetary need exceeds available resources, a budget deficit exists. The applicant may then be eligible for assistance in the amount of the budget deficit. If there is no budget deficit the applicant is ineligible for financial assistance. He may, however, be eligible for certain health services if his remaining resources after provisions for himself and his dependents are insufficient to cover these needs. Here again eligibility would depend on the policy prevailing in each Unit relative to the provision of Health Services.

The budget on which the Province determines need is as follows:

	Costs	
<b>Food</b>		<b>Monthly</b>
Adult		\$24.00
12-18 years of age		28.00
7-11 years of age		20.00
Birth-6 years of age		14.00
<b>Adjustment for Food Allowances only</b>		
For 1 person living alone add 20%		
For a family of 2 or 3 persons add 10%		
For a family of 6 persons and over deduct 5%		
An adjustment is not made for a family of 4 or 5 persons		
<b>Clothing</b>		<b>Monthly</b>
Adult		\$ 9.00
12-18 years of age		10.00
7-11 years of age		7.00
Birth-6 years of age		6.00

**CHEERFULNESS**

Cheerfulness means a contented spirit, a pure heart, a kind and loving disposition; it means humility and charity, a generous appreciation of others and a modest opinion of self.

—Thackeray

\* \* \* \* \*

**THE MAN WHO THINKS HE CAN**

If you think you are beaten, you are;  
 If you think you dare not, you don't.  
 If you'd like to win, but think you can't,  
 It's almost a cinch you won't.  
 If you think you'll lose, you're lost,  
 For out in the world we find  
 Success begins with a fellow's will;  
 It's all in the state of mind.  
 If you think you're outclassed, you are;  
 You've got to think high to rise.  
 You've got to hustle before  
 You can ever win a prize,  
 Life's battles don't always go  
 To the stronger or faster man;  
 But soon or late the man who wins  
 Is the one who thinks he can.

—Anonymous

**Rent**—The actual amount up to \$100.00 per month. The sum total of rent or mortgage payments, taxes, fuel, electricity and water shall not, in any one case, exceed \$115.00 per month.

**Mortgage**—Fifty per cent of the mortgage payment.

**Taxes**—The actual amount paid per month.  
**House Maintenance**—For **Home Owners** only—\$12.00.

**Fuel**—The actual amount paid up to a maximum of \$20.00 a month.

**Electricity**—The actual amount paid up to a maximum of \$12.00 per month.

**Water Rates**—The actual amount paid to a maximum of \$4.00 per month.

**Miscellaneous Essentials**

	<b>Monthly</b>
Adult	\$4.00
12-18 years of age	5.00
7-11 years of age	4.00
Birth-6 years of age	3.00

**Board Rates**—Where an individual or family unit is boarding in someone else's home, the following board rate will be allowed:

	<b>Monthly</b>
Adult	\$50.00
12-18 years of age	40.00
7-11 years of age	30.00
Birth-6 years of age	25.00

—James C. MacNeil  
 Administrative Assistant  
 (to be continued next month)

Miss Lacey: "Name six wild animals found in Africa."

Myrna: "Two lions and four tigers."  
 \* \* \* \* \*

Donald: "Did you take your degree in law?"

Gordon: "No, in Halifax."  
 \* \* \* \* \*

Garvin: "I've changed my mind."  
 Perry: "Does the new one work any better?"  
 \* \* \* \* \*

Jacques: "Dad, can you sign your name with your eyes shut?"

Father: "Certainly I can, son."

Jacques: "Then please shut your eyes and sign my report card."  
 \* \* \* \* \*

Le moniteur de l'ecole de conduite automobile a une debutante qui n'a visiblement pas beaucoup de talent:

—Il vous reste encore quelques minutes de lecon. Voulez-vous que je vous apprenne a remplir les formulaires a utiliser en cas d'accident?

## Question Box

Dr. J. J. Quinlan



Q. What determines the decision that the patient should undergo lung surgery?

A. There are many indications for surgery in the patient with pulmonary tuberculosis. To summarize them, one might regard lung resection as an adjunctive measure

to the treatment of tuberculosis with drugs and bed rest. In a considerable number of patients prolonged treatment will bring about considerable improvement in the disease but foci of active tuberculosis will be left. These are unlikely to benefit from further conservative therapy and are best treated by removing them.

Q. After excisional surgery may a person return to their job involving hard physical labour?

A. The modern objective in the treatment of tuberculosis is to return the patient to a normal life. This is effected by drug treatment, bed rest, and when necessary, surgery. There is no reason why an individual who has had a portion of his lung removed cannot return to a position involving hard physical labour providing his lung function is adequate as evidenced by the absence of shortness of breath on exertion.

Q. What is tuberculous meningitis?

A. Tuberculosis meningitis is inflammation of the membranes covering the brain and spinal cord due to infection by the tubercle bacillus. In the great majority of cases it is brought about by blood stream involvement from progressive primary infection of tuberculosis usually undiagnosed and untreated. In the rare case it may represent a terminal event in an adult who has very serious pulmonary tuberculosis.

Q. What causes sarcoidosis? Is it contagious?

A. An answer is available for the second portion of this question. Sarcoidosis is not contagious. As to its causation this subject has been debated for years and is still no nearer settlement. Some investigators regard the condition as nonspecific, that is, as a response of the body to a variety of agents. These

may be bacteria, fungi, viruses or metals, to name a few. By others, it is regarded as a definite disease entity and for many years some experienced chest physicians have regarded it as an unusual response to infection by the tubercle bacillus, or in other words, as an unusual form of tuberculosis. Sarcoidosis is very common in regions containing large pine forests such as the Scandinavian countries, and the South, North, Central and the New England States of the U.S.A. and it is felt that there is a relationship between Sarcoidosis and the inhalation of pine pollen. The only fact that can be stated with certainty is that the cause of sarcoidosis, up to the present time, is not known.

Q. Can streptomycin cause arthritic symptoms to develop in a patient?

A. Some patients do develop a form of arthritis when streptomycin is administered to them. However, this adverse reaction is not confined to streptomycin. A great many drugs have undesirable side effects and these are often manifested by pain, swelling and limitation of movement in joints. Streptomycin remains one of the two most effective drugs in the treatment of tuberculosis and when one considers the vast number of individuals that have received this drug and have benefited from it, the incidence of troublesome side effects is extremely low.

### IN APPRECIATION

To the Management,  
d'Eon's Restaurant,  
Kentville, N.S.

On behalf of all the patients on Second and Third Floors of the West Infirmary, Nova Scotia Sanatorium, I should like to extend thanks to you for presenting us with a delicious treat on Wednesday evening, March 1st. The students from the Clare District High School, along with the other patients on the two floors, appreciated this kind and thoughtful expression of friendliness very much. Needless to say, the treat was enjoyed by all.

Sincerely yours,  
Betty Deveau,  
Third Floor,  
West Infirmary.

Be careful of your thoughts, they may break into words at any time.

## 30 Years Ago

Eileen Hiltz

If you think everything in the world has gone up in price, we can show you one item that hasn't: **Health Rays**. The Editorial Comment of April 1937 makes a welcome announcement thus: "If you look carefully on this page, you will discover a change from previous issues. We feel very sure it will be a welcome discovery to all readers and patrons of **Health Rays** magazine.

"Hitherto the price of the yearly subscription was quoted as one dollar and fifty cents. So it stood throughout the year, although as many of you know, for the three months of spring the price was regularly reduced to one dollar per year. Recently the management of **Health Rays** decided that the dollar rate was popular enough to justify a permanent existence, and resolved to adopt it henceforth as the subscription rate for the year around."

And so the price has remained these thirty long years, inflation or no inflation.

Calling Old Timers of the 'thirties, remember that "Devine lady" the tall hand-some gal with the lightly triggered temperament? In the April 1937 **Health Rays** it is Melba Devine who comes under the microscope for one of the "San Person-

ality" sketches written by Allen d'Entremont, himself editor of **Health Rays** at a later date. Melba came to the San. in 1932, when Tb. cut short her nursing career in Montreal, and remained here for a number of years, during which time she graduated from patient to librarian, to switch-board operator, to nurse. Merriment, heart throbs and feuds all came naturally to Melba—there were no dull moments when she was around.

Because we didn't find too much else of interest to readers today, we close with a joke and a bonus:

The teacher of a Sunday school class was explaining the story of Elijah and the prophets of Baal; how Elijah built the altar, put wood upon it, and cut the bullock in pieces and laid them on the altar.

"And then," said the teacher, "he commanded the people to fill four barrels with water and pour it over the altar, and they did this four times. Now, can anyone tell why this water was poured over the bullock on the altar?"

"Please, miss," came a prompt reply, "to make the gravy".

And this one:

Judge—"Do you consider the defendant a reliable man? Has he a good reputation for truth and veracity?"

Witness—"Well, to be honest with you, your honor, that man has to get somebody else to call his hogs at feeding time. They just won't believe him."

### THE DOCTOR

Who comes when we are in distress?

The doctor.

Who hears our call and answers "Yes?"

The doctor.

Who four and twenty hours a day

Is never sure of rest or play

And cannot put his work away?

The doctor.

—Edgar A. Guest

### EARLY APRIL

The sun was warm but the wind was chill.  
You know how it is with an April day:  
When the sun is out and the wind is still,  
You're one month on in the middle of  
May.

But if you do so much as dare to speak,  
A cloud comes over the sunlit arch,  
A wind comes off a frozen peak,  
And you're two months back in the middle  
of March.

Robert Frost.

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# HEALTH RAYS

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APRIL, 1967

No. 4

## STAFF

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*Subscription Manager* . . . . . Steve E. Mullen

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## EDITORIAL COMMENT

For thousands of years the family has been considered the basis of our society. This institution has been protected by both the legal code and the moral code, and backed up by such reputable organizations as the Church and the School. Judges, politicians, clergymen, and teachers have extolled the benefits of a good home, and have decried all those influences that might lessen its influence or in any way defame its name.

Biologically, a home has been considered necessary for the proper upbringing of children—animals that have an exceptionally long period of dependency (infancy). Traditionally, social scientists have taught that a home—even a poor one—is better than institutional life for the care of children. Broken homes have been blamed for many of the ills of individuals, and many of the evils of society.

An insidious change has been taking place for many years; the basis of society has been eroded: Mother, the keystone of the structure has been removed from her place of prominence and walls have come tumbling down. Wars have helped the changes; women have been taken out of their sinecures to do the work of men in industry, business, and even on the battlefield. To head a successful business has become as honorable for a woman as to make a successful home, and to carry a dinner pail, as honorable as to carry a baby. For other reasons, women have demanded the right to become equal with men, even if that meant stepping down off their pedestals.

We believe that French-Canadian homes have withstood the blasts of change better than most, but even in these citadels,

evolution and revolution have had their effect, and corrosion has resulted in the lessening of the influence of the parents, the priests, and the moral code as known for many years. Much blame must be laid to increased affluence: The freedom from household chores, which once bound woman to her home, has made it possible for her to wander; the automobile, and the money to run it, has led the young people to follow mother out the door and then go their own way.

In the midst of all this confusing change, some voices were raised demanding that action be taken to stop the erosion; that something be done to preserve the family and home. To this organization Governor-General Vanier gave his blessing and his name. One reporter has stated that he wished this to become his memorial; that be the act for which he be most remembered.

Happily, The Institute has been able to attract the support of many influential persons, among them, Dr. Wilder Penfield, who is at this time the president. Reportedly, he has recently defined right and wrong: "What is good for the family is right; what is detrimental, is wrong." In the same news report he is quoted as saying, "When a child has learned his instructions for playing the game of life, and he knows the meaning of self-discipline and regard for others, the parents' duty to teach morals and manners has been discharged."

We, personally, would never remember the Governor-General for his war record alone; but we will never forget that he sponsored The Vanier Institute for the Family.

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### CANADIAN CANCER SOCIETY NOVA SCOTIA DIVISION

The Canadian Cancer Society is a volunteer organization operating under the sponsorship, and with continued supervision of the Medical Society, both National and Provincial.

It was organized on a national basis in 1939 and the provincial divisions, among them Nova Scotia, were set up in 1946.

The initial objective of the Society was, and is today, a lay and professional Education Programme to ensure that all levels of the population know the facts about cancer, and to ensure that, at the first sign of departure from normal good health, the advice of the individual's doctor was obtained. Initially, the members of the Canadian Medical Society responsible for formation of the Cancer Society, knew that too long a period elapsed before the first appearance of a patient for advice, and that treatment was undertaken too late.

The Canadian Cancer Society in 1947 undertook 98% of the financial cost of cancer research in all its stages, and in 1967, this Division's share in this important programme will amount to \$57,000.00.

The funds of the Society are also used for post-graduate training in all fields of cancer work.

In 1947, the Society undertook the Welfare Services Programme for the care and comfort of the cancer patient. Today this includes the following services:

1. Cancer dressings
2. Bedside Nursing Supplies and Loan Equipment
3. Transportation expenses to Nova Scotia Tumour Clinic, Halifax
4. Nursing and Housekeeping services
5. Assistance in payment for pain-killing drugs
6. Board and Nursing Home cost
7. Patients' reception rooms (Divisional)
8. Miscellaneous services

In the Nova Scotia Division, to make

sure that the programme is carried out in all areas of the province, there have been set up local branches of volunteers who carry out a year-round programme of Education, Welfare and Membership.

The financial support of the Society comes from the voluntary giving of annual Membership, the majority of which is obtained by our Units during the month of April.

As the work of the Society is carried on in rural as well as urban areas, and due to the expanding research programme, the Society is not a member of any United Fund or Combined Charity Appeal. The Canadian Cancer Society is the only organization in the Province of Nova Scotia concerned entirely with the control of cancer through Education, Research, and Welfare programmes and it works very closely with all professional groups, including the establishments where cancer treatment is given.

—Elizabeth A. Hartling,  
Executive Director and Secretary.

#### IT'S NEVER A MISTAKE

- To tell a man how clever or interesting he is.
- To say "I don't know," if you really don't.
- To ask the advice of an expert.
- To inquire about grandchildren.
- To take the time and trouble to put another person at ease.
- To listen politely to a child.
- To pay an older woman a compliment.
- To praise your husband or wife for the qualities you most want him or her to have.
- To let the host as well as the hostess know you had a fine time.
- To say "I'm sorry," even when the other person is in the wrong.
- To tell a man you value his opinion.
- To tell a parent something complimentary about his child.
- To guess a woman's age five years under what it could possibly be.

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## Chaplain's Corner

Rev. G. N. Hamilton  
United Baptist Church

I had just returned from overseas—the war was really over—one breathed again the great long deep breaths of relief and experienced a sense of freedom and a joy that simply demanded expression. True, some experiences you just didn't want to talk over, think over, nor, in any sense, live over, but there were experiences I really wanted to share. There were the days when, on leave, you visited the great churches in England, Scotland, Ireland, Wales and the Continent. These left a lasting impression of the sacredness of life.

There were the great monuments that wrapped up hundreds of years of history; the people who thought differently from the way you had been accustomed to think. There were great and wonderful monuments of kindnesses by people who had suffered, so much, and, yet, were so brave and strong. There were lands, thousands of years older than Canada in their art, sculpture and culture, and were, as I sensed it, deep in experience and laden with the most interesting historical events. Then, too, in the R.C.A.F. life, there were so many and varied experiences, priceless accounts of loyalties, the unusual in thought, word and deed, humor that could not be duplicated. One could go on and on, great experiences to know and relate.

These things I wanted to share with someone who not only had time to listen but who, through months or years had not had a first-hand account of experiences of this kind. To whom should I go? I knew without further thought. She was a shut-in! For years she had not been able to stand—let alone walk; confined to her room with few visitors and many problems. This would be a bright spot in her life and mine! I knew what I would do! I would use my first free hour to share with her some of these great experiences of my life!

Setting aside some appointments and family gatherings and, with real anticipation, I went to the room of my friend, who was really happy to see me, and showed her happiness by telling me how good it was for me to come and, then, to tell me how lonely it had been. Her problems were many and varied—I could not help but think of the definition of a bore—"A person who, when you ask him how he is, tells you." She told me!

For the full period of time, in spite of several attempts to break in, to relate

what I thought was something of real interest, I was successful in finishing not one account of my experience, but instead, I heard exactly the same accounts of the wrongs that had been done to her—the torture she had endured, the neglect she had suffered, and the state of mind she was in—that I had heard some years before.

I felt I knew the importance of being a good listener and, for a time, I practiced it as she unburdened her soul.

When, at last, I had to leave, she asked me why I hadn't told her some of my experiences and, then, assured me that no one had any time for her.

No doubt we were both quite selfish, but I would like to relate the other side of this much talked about and little practiced side of just being a good listener.

The danger here was, as it so often is, when one gets in the habit of letting no new thoughts get into the mind, "what we are we tend more and more to become."

I have visited, again and again, folks who refused to break off their way of thinking for any cause; they love the familiar, the easy—a card game, a T.V. or radio program—anything to avoid a new perspective of life, a new thought to come to their mind, a story where self is the central character, or, worse still, a smutty joke. And so they indulge in more and more of the same until their whole world may be the restricted limit of a misspent youth or a grievance, a bit of hate or sadness from which they cannot part. They grow older, only in years, but not in experience.

Busy men and women, professional and otherwise, use time and skill to penetrate the iron curtain of persons who need nothing, so much, as a new and uplifting thought.

While I am writing this I am conscious of nothing so much as the thought that what I have written of a poor invalid is more abundantly true of a healthy me, for, in my saner moments, I know that Almighty God, so often, wants to speak to me, but I am so busy with my little thoughts that many of the great and marvellous impressions and expressions of His Spirit are quite unknown to me. The New Testament would give me a new and clear field of thought. The good news of God, the Gospel, is mine in exchange for my old drab and shabby way of thinking. What a profitable exchange!

## Just Jesting

Mrs. MacKinnon: "What is the opposite to woe?"

Julien: "Giddup."

\* \* \* \* \*

Murray: "Who gave you that black eye?"

Garth: "Nobody. I had to fight for it."

\* \* \* \* \*

Mrs. MacKinnon: "Michael, can you give me a sentence with the word loquacious in it?"

Michael: "Sure: my sister was run over by an auto because she didn't loquacious going."

\* \* \* \* \*

Aimee: "Yvonne has just returned from the sea shore."

Emily: "Did she get brown?"

Aimee: "No, I think his name is McLellan."

Linda: "Oh, he's so romantic. When he addresses me he always calls me fair lady."

Glenda: "Force of habit, my dear. He must have been a bus conductor."

\* \* \* \* \*

Customer: "Remember that cheese you sold me yesterday?"

Grocer: "Yes, madam."

Customer: "Did you say it was imported or deported from Switzerland?"

\* \* \* \* \*

Art: "I've come to ask your consent to marry your daughter, sir."

Father: "Have you seen her mother?"

Art: "Yes, but I'd rather have your daughter."

\* \* \* \* \*

Ronald: "What part of the body is the fray?"

Dr. Crosson: "Why, where did you ever hear of that?"

Ronald: "Well this book says Ivanhoe was hit in the fray."

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## Old Timers

The Old Timers column is, perhaps, a little slimmer than usual, due in part, to Anne Marie's sudden departure for Yarmouth, where she will be pounding her typewriter for the next few weeks. We hope she enjoys the change, and will bring back news of some more of our San "graduates."

This month we congratulate a 1965 "graduate", Mrs. Bernard Chiasson (Maria) on the birth of a son—her first child—on March 6th.

Kermit Young, who was a patient here in 1942, and back for assessment quite recently, runs a chicken farm in Cookville, Lunenburg County. He celebrated his latest discharge from the Sanatorium by being elected President of the Broilers Association, which was holding its Annual Meeting in Kentville on the same day. Kermit's wife, Ada, also a former Sanatorium patient, is well. They have two sons.

Rosemary Taylor and young daughter, Cynthia, of Wolfville, who both cured at the Sanatorium in 1963, were in for check-ups recently. Both are well, and Cynthia is attending school regularly, in grade III.

Also in for a routine check-up was Pauline Meek of Canning. Pauline, who was here in 1959, is in the "pink" of condition. Her favorite pastime is square dancing.

Blanche (Conrad) Mapplebeck, a popular patient and staff member in 1943, dropped in on Anne Marie and some of her other San "cronies" one evening recently. Blanche has all the responsibilities that are part and parcel of raising a family—she has four children, all going to school—but radiates good cheer just as in days of yore.

Mrs. Thelma (Garrison) Hoffman, who was first a nurse, then a patient here in the Fifties, now lives in Victoria, B.C. Thelma gave birth to her third child—a son—in January of this year. Congratulations!

A letter from Eileen (Surette) Muise of Surette's Island, tells us that she is very well and happy, as is also her sister-in-law, Mrs. Phyllis Wallace. Eileen was one of the patients transferred to the Sanatorium from Roseway Hospital in the fall of 1960 when the Tb. service of that Institution was discontinued. Phyllis came along later by five years from her home in Yarmouth.

Thanks to Florence Belbin we have welcome news of three patients who left the San in 1966: Mrs. Gladys Creighton of Pictou, is at present enjoying a visit in England. Another Pictonian, Mrs. "Marg"

Beer, R.N., hopes to be donning her uniform and reporting for duty almost any time now. And from the other end of the Province—Tiverton, Digby County—comes the good word that Mrs. Dorothy Outhouse is making very satisfactory progress, healthwise.

Our thanks to Perry Kelly for the good news that Franklin d'Entremont of West Pubnico, who regained his health here in the early Sixties, has gone back to fishing. Franklin owns his own boat, and he, his wife, and their two children have moved into a home of their own.

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THIS HALF PAGE WITH THE  
COMPLIMENTS OF

*Don Chase, Ltd.*

---

THE NOVA SCOTIA SANATORIUM  
COMBINED CHARITIES FUND

The sixth Annual meeting of the Nova Scotia Sanatorium Combined Charities Fund was held on March 16, 1967 in Miller Hall.

It was noted that there were 121 members, fourteen of whom attended the meeting.

During the year 1966, the total amount subscribed to the fund was \$1,966.00. This was allotted to the various charitable organizations as listed on the back of the pledge cards.

The following is a list of the members of the Board of Directors that were either elected or re-elected:

Dr. J. E. Hiltz  
Miss Marguerite MacLeod  
Miss Eileen Quinlan  
Miss Anne Marie Belliveau  
John Lawrence  
Mrs. Cecilia Pascoe  
Mrs. Helen MacKinnon  
Mrs. Edna Doucette  
Mrs. Catherine Boyle  
Miss Marjorie Croft  
The members of the Allotment Committee are as follows:  
Dr. J. J. Quinlan  
Miss Joan Walker  
F. G. Barrett  
Hector McKean  
Mrs. Jean Ells  
Miss Virginia Allen  
Mrs. Hope M. Mack

At a special Board of Directors meeting held on March 22, 1967, in the Medical Library, John Lawrence was elected Acting Chairman and Marjorie Croft was elected Secretary.

**APRIL  
First**

This is the shape  
A man is in,  
When smiling April  
Days begin.  
Doubtful yet  
And half afraid  
That Spring may  
Somehow be delayed,  
To bring disaster,  
As it were,  
To each bewildered  
Harbinger;  
But still content  
To simply sit  
And brood no more  
On all of it.  
When smiling April  
Days begin,  
This is the shape  
A man is in.

**Thirtieth**

When smiling April  
Days are done,  
This is the way  
A man's thoughts run;  
An idle desk,  
An empty chair,  
A door closed tight  
On dull old Care;  
Sleeping pools  
And fishing lines,  
A little cabin  
Among the pines,  
Then lazy days,  
And nights that bring,  
A fragrant camp-fire  
Flickering.  
This is the way  
A man's thoughts run,  
When smiling April  
Days are done.

Sanatorium Outlook

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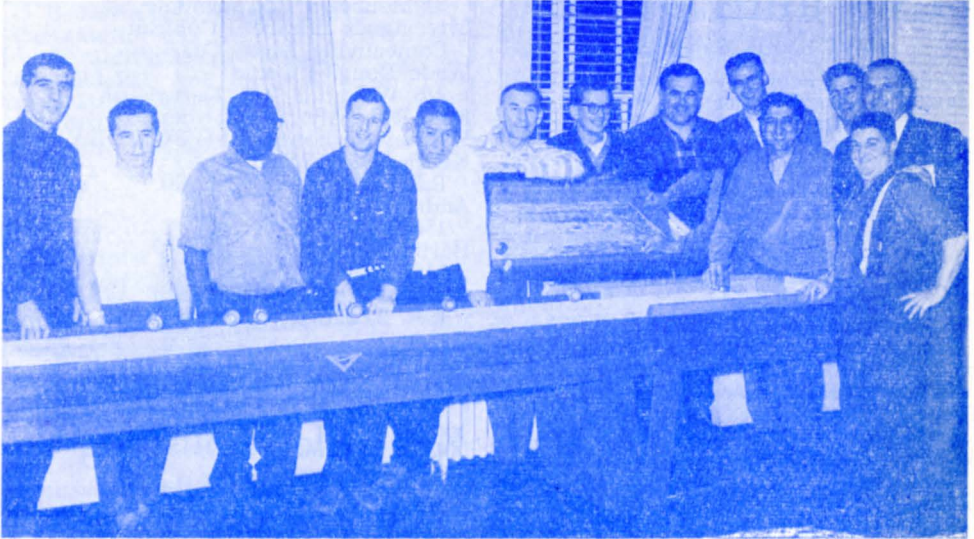
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## ACTIVITIES AT POINT EDWARD HOSPITAL



Here you see some members of the winning Point Edward Hospital Team and also some of the opposing Sydney and District Shuffleboard League. Reading from left to right (Point Edward Team): Greg Dipersio, Joe March, Gerald Barton, Joe MacDonald, John Googoo, and Mike Cochrane. (Sydney and District League): Winston Lordly, Sander MacPherson, Neil Gillis, Kayo Libbus, John Oliver, Stan MacPherson, and Lloyd Breen.

On February 20th a card party was held at the Hospital under the auspices of the various Legion Branches in the area. Approximately 28 patients attended the party. Prizes were awarded as follows: First — Clifford Jackson and Thomas Boutillier; Second—Mrs. Mary C. Gillis and Mrs. D. Hollingsworth.

A delicious lunch was served by the nursing and kitchen staff.

\* \* \* \* \*

On February 24th a full-length feature movie titled "No Time for Sergeants" was shown through the courtesy of the Sydney Suburban West Kinsmen Club. This was much appreciated.

\* \* \* \* \*

Shuffleboard is proving very popular with the patients at Point Edward. Two victories have already come their way—over the Sydney and District Shuffleboard League and the Westside Branch Canadian Legion Team, respectively. Arrangements are already under way to bring other competing teams to the Hospital, and the boys are keeping the rocks hot on the board in order to keep in trim for all future challenges.



Shown above is the mysterious lady whose appearance was ostensibly arranged by the visiting Team to distract the Hospital Team. Sorry, boys, but we couldn't help winning!

# INS and OUTS

## Nova Scotia Sanatorium

Admissions: February 16 to March 15  
 Gordon Norman Plant  
 19 Luann Drive, Dartmouth  
 Charles Robert MacLellan  
 2 Faulkland St., Pictou  
 Arthur Frederick Busby  
 358 Vail St., New Glasgow  
 Mrs. Dorothy Margaret Kaulback  
 9 Marwebb Apts., Clarence Park  
 Shearwater Post Office, Dartmouth  
 Tracey Ann Kaulback  
 9 Marwebb Apts., Clarence Park  
 Shearwater Post Office, Dartmouth  
 Jacques Alfred LeBlanc  
 Saulnierville, Digby Co.  
 Theresa Anne Dugas  
 Meteghan Centre, Digby Co.  
 Nelson Gerard Melanson  
 Saulnierville, R.R. 1, Dig. Co.  
 Germaine Marie Belliveau  
 Belliveau's Cove, R.R. 1, Church Point  
 Mrs. May Eulalie Brow  
 Prietsville, R.R. 4, New Glasgow  
 Roland Oliver Comeau  
 Little Brook, Digby Co.  
 Julien LeBlanc  
 R.R. 1, Church Point, Digby Co.  
 Alzora Marie Soucie  
 Belliveau's Cove, Digby Co.  
 Louise Marie LeBlanc  
 Belliveau's Cove, Digby Co.  
 Nicole Marie Boudreau  
 Meteghan River, Digby Co.  
 Russell John Doucet  
 Cape St. Mary, Digby Co.  
 Marie Theresa Bourque  
 Mavilette, Digby Co.  
 Robert Peter Saulnier  
 Hectanooga, Digby Co.  
 Raymond Gerard Robichaud  
 Meteghan, Digby Co.  
 Elizabeth Louise Deveau  
 Salmon River, Digby Co.  
 Christine Judy Thibault  
 Saulnierville Station, Dig. Co.  
 Marcel Pierre Comeau  
 R.R. 1, Meteghan Station  
 Marilyn Ann Thibault  
 Salmon River, Digby Co.  
 John Maurice Belliveau  
 Church Point, Digby Co.  
 Josephine Marie Muise  
 Saulnierville Station, Digby Co.  
 Charlene Marie Thibault  
 Saulnierville Station, Digby Co.  
 Frances May Chymist  
 Lockeport, Shelburne Co.  
 Edward Joseph Saulnier  
 R.R. 1, Meteghan River, Digby Co.  
 Joel Joseph Melanson  
 Church Point, Digby Co.

Terreigh Alexander Ernst  
 52 Mountain Rd., Armdale  
 Mrs. Agnes Elizabeth Comeau  
 Comeauville, Digby Co.  
 Wade Douglas Poole  
 226 Windmill Rd., Dartmouth  
 Mrs. Ruby Myrtle Boutilier  
 Sheet Harbour, Halifax Co.  
 Keith Alvin Churchill  
 R.R. 3, Overton, Yar. Co.  
 Andrew O'Toole  
 156 Queen St., Truro  
 Barbara Marie Comeau  
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 Clarence Alvin Butterbaugh  
 R.R. 3, Lawrencetown

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 Kingsport, Kings Co.  
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 Mushaboom, Halifax Co.  
 Neil Walter MacIvor  
 Ellershouse, Hants Co.  
 Wallace Ellsworth Borgal  
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 Southville, R.R. 2, Weymouth  
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#### Point Edward Hospital

Admissions: February 16 to March 15

James William Cameron  
42d 3d St., Glace Bay  
Edward Roper  
49 Pond St., Sydney Mines  
Allen Joseph MacIsaac  
210 Wilson Ave., New Waterford  
Elizabeth Ann Kehoe  
Rocky Bay, Rich. Co.  
Patricia Ann Caines  
729 Mechanic St., Glace Bay  
Mrs. Mary Catherine MacDonald  
73 Yorke St., Glace Bay  
Joseph Nelson Johnson  
6 Hankin St., Sydney Mines  
Henry Joseph Chiasson  
73-8th St., New Waterford  
Mrs. Effie Rambeau  
White Point, Vic. Co.  
Fred Bona  
West L'Ardoise, Rich. Co.  
Layton Reginald Fillmore  
89 Johnstone St., Sydney  
Hildred Veronica MacGillivray  
338 Main St., Glace Bay

Mrs. Elizabeth Tomkins  
North East Margaree  
Crawford Anderson MacDonald  
453 2d St., New Waterford  
Jerry Gouthro  
Holland St., Reserve Mines  
Audrey Catherine Nash  
New Haven, Vic. Co.  
Lucy Dorey  
West Arichat, Rich. Co.  
Catherine Eileen Rankin  
Judique  
David Lawrence Watts  
61 Patrick St., New Waterford  
John Andrew Wilkie  
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Allen Alexander MacNeil  
R.R. 1, Iona  
Discharges: February 16 to March 15  
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Gerald Gaston Barton  
R.R. 1, Digby  
Fred William Bona  
West L'Ardoise, Rich. Co.  
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West Louisburg  
Alexander Hache  
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North East Margaree  
Hildred Veronica MacGillivray  
33 Main St., Glace Bay  
Mrs. Mary Catherine MacDonald  
73 Yorke St., Glace Bay  
Joseph Nelson Johnston  
6 Hankin St., Sydney Mines  
Layton Reginald Fillmore  
89 Johnstone St., Sydney

Un pere avait emmene sou petit garcon  
voir le dernier-ne de la famille, dans la  
pouponniere d'un hopital rural. Plante  
devant la grande baie vitree, l'enfant con-  
sidera les 15 petits berceaux, qui n'etaient  
occupes que par 13 bebes.

—Regarde, papa! S'ecria-t-il. On a pose  
deux pieges de plus!

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## The Pickle Jar

Sweet and Sour

An interesting project was launched in our Nursing Education Department when the students in the Nursing Assistant class were asked (and agreed) to try to stop smoking. We have asked for a factual report on this story without getting a favorable response. One thing we know, most of the smoke in the Coffee Bar is exhaled by the youngest of those who congregate there for break period. Too bad. Will they ever learn? "When will they ever learn?" What examples are the oldsters setting?

\* \* \* \*

Dr. Hiltz believes in Divine Providence and that all things work together for good—at least, at this stage, he is hoping this is so. Mrs. Hiltz reports that he sleeps with his fingers crossed. All this has something to do with proof that Tb. is not eliminated, with the Estimates, and with The NEW New Infirmary. We are sorry that this must be written before the tension is eased.

\* \* \* \*

We welcome an ex-patient to our Rehabilitation Teaching Department. Sister Lousie Despres was called out of a period of peaceful convalescence to return to help us meet the emergency caused by the influx of thirty new school students—those from Clare District High School. Significantly, she has been assigned to the teaching of French. We believe she is "teaching French as she should be spoke", our literal translation from the original!

\* \* \* \*

We have previously expressed concern over the proliferation of organizations: In this context may we state that we find it especially regrettable that two recently formed organizations (perhaps formed in the same year) with very similar concerns could not see fit to unite. We refer to The Vanier Institute and The Canadian Conference on Children (and Youth, 1967). Both have vested interests which they are loathe to repudiate.

\* \* \* \*

Apropos of the statement "Tuberculosis

is a social disease with a medical aspect", may we quote from the **National Tuberculosis Association Bulletin** of March, 1967: "The rate of new cases of tuberculosis in New York City is almost three and one-half times higher than it is upstate. Why? Because here is where the greatest enclaves of poverty are found. When we permit poverty to pass from generation to generation, we, in effect, turn tuberculosis from a contagious disease into one which appears almost hereditary.

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"We stand today on the threshold of one of the greatest triumphs in the history of man. We are close to annihilating a killer so fearsome that it makes the slaughter of armies seem merciful. Those of us who carry this awesome knowledge are determined not to be stopped within sight of victory. And that is why professionals in the field of public health are so determined to maintain their indispensable alliance with the voluntary tuberculosis associations."

\* \* \* \*

Kudos were bestowed on our teachers by two ex-patient teenagers who visited our office this week. They stated that while at the Sanatorium they learned as much in the few hours of instruction they received each day as they gain from a whole day of instruction under the system in which they work at present. We have always believed that the closer you can come to a one-to-one relationship, the better will be the instruction. Teachers do have some advantages when teaching here at The San!

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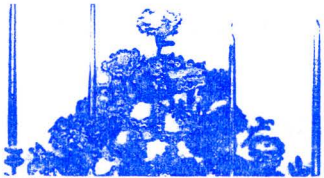
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