


## FROM URANIA

Dr. Oliver Wendell Holmes.

BETWEEN two breaths what crowded mysteries lie,—  
The first short gasp, the last and long-drawn sigh!  
Like phantoms painted on the magic slide,  
Forth from the darkness of the past we glide,  
As living shadows for a moment seen  
In airy pageant on the eternal screen,  
Traced by a ray from one unchanging flame,  
Then seek the dust and stillness whence we came.

But whence and why, our trembling souls inquire,  
Caught these dim visions their awakening fire?  
O, who forgets when first the piercing thought  
Through childhood's musings found its way unsought.  
I AM;—I LIVE. The mystery and the fear  
When the dread question, WHAT HAS BROUGHT ME HERE?  
Burst through life's twilight, as before the sun  
Roll the deep thunders of the morning gun!



## Looking Back

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**I**N the latter part of the 5th Century, B.C. Hippocrates, who is known to us as the "Father of Medicine," was serving in the temple of the God Asklepios. These temples, called Asclepia, were scattered over the length and breadth of Greece, and thither flocked the sick just as in the present day many patients go to Sanatoria of various kinds.

The Asclepium to which Hippocrates was attached was situated in the Island of Cos in the Aegean Sea. Dis-satisfied with the superstition and sophistry that was prevalent around him, Hippocrates began a series of enquiries into the processes of Nature that were destined to have far-reaching results. As a result of his observations he came to the conclusion that the human organism had the power of adapting itself to its environment, and that many diseases tended to cure themselves. As a proof of his power of accurate observation his description of the countenance of the dying is so accurate that the present-day phrase "Facies Hippocratica" is used to express in brief the description which is attributed to him. He therefore did for early medicine what Socrates did for philosophy, interrogating Nature as Socrates the mind.

After the death of Hippocrates his School began to show evidences of decadence. The small amount of theory that existed in Hippocrates himself was vastly over developed, and opposed to this Dogmatic school there arose at Alexandria the school of the Empiricists, who insisted that not the "Cause" but the "Cure" of disease was of paramount importance.

Greek Medicine was introduced into Rome by Asclepiades in the 1st Century, B.C. He was a man of forceful personality, and had a fairly developed theory of health and disease, which soon became so popular that he attained to the highest peak of professional success. His system was purely mechanistic, being based on the Atomic doctrine of Leucippus and Democritus which had been completed by Epicurus. Out of the teaching of Asclepiades, that physiological processes depend upon the way in which ultimate indivisible atoms come together, was developed by his pupil Themison, a school, the "Methodic," which aimed at striking a balance between the Hippocratic and the Empiristic School.

They believed that the molecular groups comprising the tissues were traversed by minute channels (poroi) and that all disease belonged to one or other of two classes. If the channels were constricted the disease was one of "Stasis." If they were dilated the disease was that of "Flux."

These conditions were recognized by diminution and increase of natural secretions, and the treatment accordingly, if the disease was "Stasis," was directed to methods causing dilatation of the channels, and conversely. This Atomic theory, on which this School based its theory, was introduced to the Roman people by the Poet Lucretius in his great poem "De Rerum Natura." In the sixth book he gives a description of the same Plague at Athens which Thucydides described 300 years earlier. Both descriptions are strikingly similar, but in Lucretius we see an attempt made to incorporate some suggestions in Etiology. He begins at line 117, Book VI of "De Rerum Natura."

"Different places are dangerous to different parts and members; the variety of air brings that about. Therefore when a sky which is alien to us happens to set itself in motion and a dangerous air to crawl about, it creeps slowly like a cloud or mist, causing commotion wherever it goes and compelling change; often also when it has come to our sky, it corrupts it, making it like itself and alien to us. Accordingly this new plague or pestilence either falls on the waters suddenly, or settles on the corn itself, or other food of mankind or fodder of beasts, or even remains as a force suspended in the air itself; and when breathing we inhale the air mixed with it, this also we must likewise absorb into our body. In like manner pestilence often comes to cattle also, distemper even to lazy bleaters. Nor does it matter whether we travel to places unwholesome for us, changing the cope of our sky, or whether Nature herself brings an infected sky to us or something we are not wont to use, which by its recent coming may be able to attack us.

Such a cause of disease and death-bringing current once in the realms of Cecrops poisoned the country-side, made the roads a desert, and drained the city of men. For beginning from the innermost parts of Egypt, and traversing a wide expanse of air and the swimming plains, it fell at length upon all the people of Pandion.

Then they were given over in troops to disease and death. First they felt the head burning with heat, the two eyes red with the fire diffused beneath. The throat also, black within, sweated blood, ulcers clogged and closed the path of the voice, and the tongue, mind's interpreter, oozed with blood, weakened by pain, heavy to move, rough to the touch. After that, when passing through the throat the fell disease had filled the chest and had flooded into the sorrowful heart of the sufferer, then indeed all the barriers of life did totter. The breath rolled out a foul stench, like the penetrating stench of rotting corpses thrown out unburied. And then all the powers of the mind, the whole body, grew faint, being now on the very threshold of death.

These intolerable sufferings were ever attended by torments of anxiety and laments mingled with moans. Retching persisted often through night and day, constantly causing cramps in the muscles and limbs, which quite broke them up, wearying those who were already wearied out. Yet you could not perceive

the uttermost part of the body to be burning with any excessive heat on the surface, but rather to give forth a sensation of warmth to the hand, and at the same time to be red all over with ulcers, as it were burnt into it, like the accursed fire when it spreads abroad over the limbs. But the inward parts in men were burnt to the bones; a flame burnt in the stomach as in a furnace. There was nothing so light or thin that you could turn it to use for their bodies; only wind and cold always.

Some cast their frame burning with the plague into cool streams, throwing the body naked into the waters. Many fell headlong from a height into wells of water, which they struck with gaping mouth as they came. Dry thirst beyond all quenching drenched their bodies, and made a flood of water no more than a drop. Nor was there any rest from pain: out-wearied the bodies lay. Medicine muttered below her breath, scared into silence, because no doubt they so often rolled their staring eyes, fiery with the plague and knowing no sleep.

And many another sign of death was then to be seen: a mind disordered in all this sorrow and fear, a gloomy brow, a mad and fierce look, ears also troubled and full of droning, quick pants or deep breaths rising at long intervals, dank sweat streaming and shining over the neck, fine thin spittle, salt and yellow in colour, a cough expelled with an effort through the hoarse throat. In the hands too the sinews twitched, the limbs trembled, from the feet cold crept up by inches relentlessly. At the latter end also the nostrils were compressed, the tip of the nose grew sharp, the eyes were sunken, the temples hollow, the skin cold and hard, on the face a soundless grin, the forehead tight and swollen. No long time after the limbs lay stiff in death. On the eight shining of the sun's light from the most part, or even on the ninth, they gave up the ghost. And if one of them, as may happen, had escaped the destruction of death, yet afterwards by foul ulcers and a black discharge from the bowels, wasting and death still awaited him, or else a stream of corrupted blood often passed by the choked nostrils with pains in the head: into this ran all the man's strength and substance. Moreover, he who survived this cruel flux of blood, yet found the disease passing into his sinews and limbs and even the genital parts. And some with the strong fear they had for the threshold of death went on living after they had severed the manly part with a knife, some without hands or feet remained in life for all that, some lost their sight: so deeply had the keen fear of death possessed these.

And there were others who fell into oblivion of all things, so that they could not even tell who they were. And although bodies and bodies lay unburied upon the ground in heaps, yet the tribes of winged creatures and wild beasts would either leap away to escape the rank smell, or having tasted would faint in a speedy death. Yet it was not often in those days that any bird was to be seen at all, or the gloomy generations of wild beasts came out of the forests. Most of them grew faint with disease and died. Among the first were the dogs, faithful creatures, which scattered about on all the roads, yielded their breath with reluctance;

for the power of the disease wrenched the life out of their limbs. Nor was any kind of remedy general and certain; for what gave one the power to draw the breath of life into his lips and to behold the regions of heaven, this to others was poison and brought them death.

But the most pitiful thing above all others and the most lamentable was, that when any one saw himself to be involved in the plague, as though he were condemned to death he would lose all heart, and lie with sad spirit, thinking only of death, until he yielded up his own spirit where he fell. For indeed not for a moment did the contagion of the insatiable disease cease to spread from one to another, as amongst woolly sheep and the horned herds, and this was one of the chief causes that piled deaths upon deaths. For if any shirked the visitation of their own sick, avenging Neglectfulness not long after would punish them for their too great greed of life and their fear of death, by a death foul and evil, deserted and without help. But those who remained at hand, passed away by contagion, and the toil which then shame compelled them to face, and the coaxing voice of the weary ones mixed with the voice of reproach. All the noblest spirits therefore met death in this way. Without mourners the lonely funerals fought for precedence . . . different bodies upon different pyres, fighting to bury the multitude of their dead; weary with weeping and grief they returned, then for the greater part took to their beds from grief; nor could anyone be found whom neither disease had assailed nor death nor mourning at such a time.

Moreover, by this time the shepherd and the herdsman and also the brawny guide of the curved plough were all fainting; their bodies lay huddled up in the recesses of their huts, given over to death by poverty and disease. Sometimes you might see the lifeless bodies of parents lying upon their lifeless children and contrariwise children yielding up their life upon the bodies of mother and father. And in no small degree this affliction was brought from the country into the city, for the fainting crowd of countrymen brought it, gathering from all quarters with seeds of disease. They filled all places and buildings; whereby being thus packed into the city, death all the more piled them in heaps. Many bodies dragged out by thirst and rolling over the road lay stretched by the water-conduits, cut off from the breath of life by the too great sweetness of water; many in public places and roads you might see all about, bodies half dead with fainting limbs caked with squalor and covered with rags, perishing in filth of body, nothing but skin on their bones, and that almost buried in foul ulcers and dirt.

Moreover death had filled all the sanctuaries of the gods with lifeless bodies, all the temples of the celestials everywhere were burdened with corpses, all which places the sacristans had crowded with guests.

And now neither the worship of the gods nor their power was much regarded; the present grief was too great. Nor did that custom of sepulture remain in the city, with which this pious

nation had been always wont to be buried; for the whole nation was in trepidation and dismay, and each man in his sorrow buried his own friend as best he could.

Sudden need also and dire poverty persuaded to many expedients: for they would lay their own kindred amidst loud lamentations upon piles of wood not their own, and would set light to the fire, often brawling with much shedding of blood rather than abandon the bodies."

S. J. M.

# Notes From the Jungle

(Dr. Arthur J. Walker, Venezuela)

**A**FTER all, truth is stranger than fiction, even as the writers of fiction frequently affirm; but had anyone told me when I received my Degree at the hands of Sir Arthur Currie, that I would participate actively in the following episode, I would have ridiculed them.

May Day 1926 in Perija began much as many other days at the end of an unduly prolonged and intensely dry season. I arose at 6.30 a.m. to note that it had not rained a drop during the night and to administer the routine prophylactic hookworm treatment to two or three new arrivals that had been medically examined the day before.

A recent epidemic of Beri-Beri had so frightened the natives that men left whenever they felt a little bit sick, rather than risk coming to the hospital where some six or seven cases had died. The hospital was therefore very light and so the greater part of the day was occupied with monthly reports. Came evening, as the movie sub-titles say, with little relief from the heat, and our two white men sat down to dinner, greatly pleased to act as hosts to four men geologists and engineers who were starting out on various expeditions with this camp as a jumping-off place. The after-dinner chat and smoke was therefore very cheerful and everybody was put in good humor when, after a preliminary blow, a rattling good tropical shower came on. This lasted until about 10.30 p.m. when I returned to my room adjoining the hospital determined to write a letter before retiring.

At 11.20 the camp was thrown into something of an uproar by the sound of two shots in quick succession from the edge of the clearing and armed white men rushed out from various houses to confront four very tired natives who had just come fifteen kilometers along the railway, through the downpour of rain, in the remarkable time of two hours and a quarter. They breathlessly explained that three trees had fallen at various intervals along the line throwing the telephone out of commission and that they had been sent in to notify the doctor that Señor Smith, the drilling foreman, had been shot in the back with an arrow, by Indians who had crept up close to the living house where the drillers lived. As usual in such emergencies, no one had taken the trouble to write a note or even describe the site of the wound and the man's condition, and all they knew was that he was laying on his face with the arrow protruding from his back and that he could not talk.

While the camp boss was getting out engine, cars, drivers, etc. and axemen to cut any fallen trees, I hurriedly gathered my emergency

kit and the case of operating things, such sterile goods as were available and my sterilizer, and with the geologists, all armed with revolvers and shotguns full of buckshot, we started off, mentally complimenting the courage of the four messengers who made the trip armed only with one single barrel shot gun and some cheap pearl handled revolvers that are so dear to the Latin-American eye.

We made the best time we could but, with wet rails and the danger of fallen trees and small land slides, it wasn't remarkable, and about midway of the line we encountered a huge tree blocking the way. So, climbing out into the mud, I stood guard with an automatic while the axemen cut sufficient passage to get us through.

About 1.20 a.m. with the primus stove going merrily under the sterilizer we pulled up the hill leading to the camp at Buena Esperanza. Leaving the others to bring the six boxes of stuff I went at once to the injured man. He had been sitting with his back to the side of the house which had no other walls than the copper screen wire, in a big rocking chair, the back of which was formed of 1 inch slats with inch spaces between them. While leaning back in this chair and talking, doubtless of going home in November, two arrows came without warning through the screen and one passed between the slats and, missing the scapula by half an inch, entered his chest. He said he felt as if someone had kicked him and, rising to go and get his gun, the projecting shaft of the arrow caught in the cross piece of the chair back and lifted the chair from the floor. Not daunted he extricated himself and went into a room close by and secured his revolver, but the movement of the four foot shaft so annoyed him that he asked one of the men to "pull the damn thing out." As may be imagined by the ease with which he had lifted the heavy chair, although the man made a valiant effort, he was unsuccessful. In the meantime the others fired several shots in the direction from whence the arrows came but other than the second, which bounded harmlessly between floor and ceiling, no others entered the house. After finding it impossible to withdraw the arrow they cut the shaft about 20 cm. from the skin to leave me a hand hold, the part removed being about 130 cm. long.

My patient I found sitting upright on a mattress laid on the floor in the narrow corridor between the rooms with a barricade of trunks at either end to prevent further doses of the same wooden medicine. And bad medicine it was indeed. He was breathing easily, had spat up only two mouthfuls of blood with pulse of 90 and resp. 20. He had not coughed and complained chiefly of considerable pain in the front of the right chest over the 5th rib in the ant. axillary line. Slight movement of the projecting fragment increased this pain and I could do little else but surmise that the point had imbedded itself in the inner side of the rib. He was a large stocky type of man and undoubtedly the arrow would have gone through a thinner person. The chest, I was pleased to find, was resonant throughout, no dullness



and breath sounds only slightly less than the sound side. There had been about a cup of blood lost from the wound in the back and mentally I thanked God that his condition was as good as it was, as only I had any idea of just what was ahead of the poor chap and, incidentally, myself as well.

So giving him one of those handy little hypo units of M. and A. I started out to make what preparations I could. He at once asked to be put to sleep, but with only inexperienced assistance I could not consider it, even if the wound had not involved the chest and doubtless the lung as well. So explaining the situation to him I pushed off to the next house and there told the oldest geologist to go and suggest that possibly the outcome might not be all that we could expect and to prepare him for it. This man gave me a look of horror saying, "That's a hell of a job to give anyone," but went and did it without question.

It took me about half an hour to boil up most of the instruments in my old U. S. Army operating case, novocaine, syringes, etc., and instruct my help. This latter comprised, two geologists, two engineers a field clerk and three drillers, and what they lacked in experience they more than made up in willingness. So appointing each to a job and choosing the clerk, who had helped me on two occasions before, as an assistant I made up an operating table on a bed with several mattresses and reassuring myself of the patient's condition, scrubbed up and went to work.

When I say that after spending three years with a base hospital in France (chest and fractured femurs some may recall) this man showed *Grit* or to use a less polite and more expressive term "guts"—I mean it—he was a marvel.

About two a.m. he draped himself, as comfortably as he could, over a pile of pillows on his left side. Having thoroughly disinfected the projecting 19 cm. of wood and the surrounding field I infiltrated the surrounding skin and started to work. Hull, my helper, was pretty pale because he could not forget that the proposition ahead of us was really his friend "Smithy," for myself I could not afford to think of that, so just didn't.

The direction of the shaft showed me that the point had apparently passed between the first and second ribs behind and passing downwards and outwards had imbedded itself in the inner side of the fifth in front striking only the lung margin or, as I most earnestly hoped, possibly going between the lobes. (Too severe anatomical criticism is not invited as I could never remember my anatomy at any time). I therefore incised the skin and subcutaneous tissue upwards, laterally and downwards and opened it up a little. The arrow was still as firmly embedded as ever and lateral movement practically impossible. Then the thought crossed my mind—suppose I can't get this out after all.

It then became apparent that the opening would have to be enlarged more deeply and, with a vague uneasiness as to the general distribution of the descending branch of the transverse cervical, I went ahead encountering only small bleeders that were most awfully difficult to control. Then began the real business of probing to locate the axis of the barbs and how they were situated; this was exceedingly tedious on account of the round shaft, the fixity of the arrow and the movements of the chest during respiration.

Naturally I did not wish to open too freely to the ribs and hoped against hope that by gentle torsion I could disengage the barbs once their location was assured. Finally two barbs were located with their direction at right angles to the ribs and lifting the bands of fibrous tissue from the notches on both sides over the points of the barbs which lay just outside the rib borders I grasped the shaft firmly and warning the poor patient I pulled and twisted at the same time and, using all my strength, I suddenly gained  $\frac{1}{4}$  inch. At the same time the wounded man experienced a sensation of something pulling loose inside beneath the point in the front of the chest which was painful. Whilst the arrow itself though still fixed in its general direction had a slightly increased range of movement.

Again more probing to locate the second pair of barbs whose points seemed to lie in the intercostal space. Comparison with the other arrow showed that about  $3\frac{1}{2}$  in. of plain point projected past the first pair of barbs which were approximately 2 in. from second pair. So again freeing notches of tissue and periosteum I endeavoured to withdraw the arrow but it was firmly anchored. I attempted again and again to withdraw it using only gentle force without effect. Then I got out the very longest probe and discovered a third pair of barbs holding the arrow having caught on the inner surfaces of the ribs.

Directing one of my assistants to give another  $\frac{1}{4}$  gr. I looked over the situation. There was a small amount of hemorrhage, doubtless from the intercostal. The first set of barbs disengaged were catching in the sides of the sinus-like opening I was working through. An unexpected and unusually close second set had their points just outside the ribs, and apparently the third had their points caught inside, while the triangular head practically filled the whole space between the ribs themselves. So, opening the interspaces as widely as I could by posture, we wrapped the proximal points with a wisp of gauze, clamped a bullet forcep over the points of the second set, and with a smooth periosteum elevator and considerable force the deepest set were drawn through between the ribs, and at 5 a.m. the hateful thing was out. The wound packed with a hot saline compress he was laid flat to see how much bleeding would follow and allowed to rest for a quarter of an hour, as the last manoeuvre had been quite as painful as the first.

What a man! It was this fortitude that stimulated me to carry on in the trying days that were to follow but which unlike the stories of fiction, were not crowned with success.

As there was no further bleeding from the wound, I took one look with a probe to the depth of the external wound, long enough to see an air bubble formed on expiration then placing a gauze drain to the mid point of the whole wound, I closed the incisions as tightly as I could with three silkworm gut sutures, the whole area cleansed with alcohol and a thick dressing applied. He was then put to bed well propped up with pillows, no appreciable dullness nor change of breath sounds noted in the chest, pulse 96 and resp 22; the occasional cough was productive of a small amount of streaked sputum.

To avoid further attacks and to be nearer supplies and the almost dry river, it was decided to fix up a bed on a car and bring him in to the base camp where he arrived at 9.30 a.m. Respirations were slightly increased but condition otherwise unchanged.

About 3.00 p.m. he showed signs of distress, respirations 60 and slight cyanosis, dullness over lower chest and an attempt was made to aspirate blood which proved too thick for the generous sized needle which was used as only a few ccs. were withdrawn. However, this acute condition passed off, but as there was no one with any idea of nursing I was forced to remain at the bedside continuously. But human machines don't run continuously and, after having successively investigated a supposed arrow shot against the side of the house, seen a snake come down the wallpost which really was my stethoscope hanging in the uncertain light and having plainly seen a red flannel night cap on the patient's head, I called a young engineer to carry on and promptly collapsed on top of a bed at the end of the 48th hour.

At 6 a. m. the next morning he was more comfortable but T 100.6 R. 48 and P. 108., the dressing clean, and so routine nursing was carried on. That afternoon at five the Chief of the medical department who was making his half yearly visit arrived, took over the case and I slept the clock around.

But as was to be expected with such a weapon and such a wound infection followed, empyema and pneumonia and, although we controlled the fluid somewhat by aspiration, the degree of toxæmia was so great he died about midnight on the 6th. The body was embalmed with such solutions as were available and another accident case was finished.

So with a somewhat superficial wound of the shoulder last fall, a penetrating wound of the abdomen necessitating an exploratory laparotomy some three months ago and this, my third, I feel I have had enough of Arrow Surgery.

## Notes by the Way

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(Dr. S. L. Walker, Halifax, N. S.)

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WHEN medical and friendly advice pronounced sentence,—“A Month's Sick Leave”, the beautiful dry air and sunshine of Northern Arizona greatly appealed to the writer after the snow banks and icy streets of Halifax in March last. On the way, however, two very important gatherings could not be overlooked, and the ‘ticket of-leave’ man took in both.

In Ottawa, April 8th and 9th, 1926, was held the Ninth Annual Convention of the Association of Officers of the Medical Services of Canada. This Association is the out-come of what was originally the “Canadian Militia Medical Officers Association,” which was first organized in 1892 and revived and reorganized in 1907. At this latter date the late (Dr.) Sir Frederick Borden of Canning was Hon. President, Dr. Guy Carleton Jones of Halifax, a Vice-President, and the late Dr. Geo. M. Campbell of Halifax, a member of the Executive.

The recent meeting at Ottawa gave opportunity for overseas members of the C. A. M. C. to renew friendships made during the War, untrammelled by any insignia of rank or position. It was also noticeable that, while the papers dealt directly with medical matters of army interest, they also were of interest and value to ex-members of the C. A. M. C. now again in private-practice. Another feature of the meeting was the desire to give full time for discussion of papers, every opportunity for renewing acquaintances, and freedom for a full consideration of all topics of interest to those present. The sessions were held in the Tudor Room of the Chateau Laurier morning and afternoon. The first mid-day luncheon was given by the President, Dr. Perry Goldsmith of Toronto, and nearly all the medical members of Parliament were present. At the second luncheon business matters of the Association were considered. The annual dinner was held at the Chaudiere Golf Club, Aylmer Road, Que. The appointments for this function were complete in every particular, the favorite song being,—“Mademoiselle of Armentieres”. On the second evening the Officers in attendance were invited to the Dance at the Governor-General's following the annual dinner to the Dominion Rifle Association.

Papers of exceptional merit were presented as follows:—

“Examination of the Recruit and Medical Documentation”, Lt. Col. J. L. Biggar, C. A. M. C.

“Administrative Difficulties in Medical Units”, Col. Wallace A. Scott, C. M. G., C. A. M. C.

“The Organization of a Field Ambulance in Peace-Time”, Lt. Col. Oscar A. Cannon, C. A. M. C.

"First Aid Treatment of Wounds", Lt.-Col. A. T. Bazin, D. S. O., C. A. M. C.

"Treatment of Common Complaints of the Morning Sick Parade", Lt.-Col. F. A. C. Scrimger, V. C., C. A. M. C.

On April 12th to 14th the Annual Meeting of the Canadian Red Cross Society was held in Toronto, and the writer was a representative from the Nova Scotia Division. Morning and afternoon sessions were held these three days devoted wholly to a consideration of the ways and means by which the various Divisions could best co-operate to carry out the obligations assumed by Canada and fifty other nations that are signatory to the Covenant of the League of Nations. The question is sometimes asked, even by members of the medical profession, as to why there is so much Red Cross activity at the present time. The question reveals a lack of knowledge of the responsibility of these signatory nations that by Article XXV. of Covenant have pledged themselves to support—"National Red Cross organizations, having as purposes, the improvement of health, the prevention of disease and the mitigation of suffering throughout the world." Opposition or lack of support means an attitude that in War times was regarded as cowardice or shirking. There is the patriotism of Peace even more honorable than that of War.

Red Cross Health Work in Nova Scotia, and elsewhere, is carried on in close co-operation with the Provincial Department of Health. In Nova Scotia district or county health nursing service was paid for by the Red Cross and directed wholly by the Department of Health in every county in the Province save one. If it has not been completely successful, the reasons must be found in its administration or its reception by the profession. Over and above all official work by a Department with its health officers and by each and every doctor in the country, a district health nursing service offers the greatest hope of success in our war against disease and the improvement of health. In Canada, besides Educational health work along general lines, three forms of practical service have been evolved:

1. Health instruction and practice in the schools by the formation and operation of Junior Red Cross Branches teaching the practical rules of health. To make this more effective in Nova Scotia a Red Cross Nurse has been added to the staff of the Normal College, and the value of school inspection and general health work is demonstrated to pupil teachers.

2. To carry health instruction into the homes by means of Home Nursing Classes which everywhere receive the cordial support of doctors and nurses. Despite the many hospitals the greatest amount of sickness must be cared for in the homes.

3. The establishment of outpost Nursing, and in many instances Medical services in scattered rural districts. While this appears chiefly applicable in newly and sparsely settled districts in Western Canada and Northern Ontario, for a number of years to some extent it

has been carried on in Nova Scotia. The demands of such country districts in Nova Scotia are so just and pressing, that only the profession itself will be to blame if the effort to solve the problem made by the laity does not meet the approval of medical men. Why should not the Medical Society suggest some plan by which scattered rural districts may have a sufficient medical and nursing service, and the physicians and nurses a sufficient remuneration. Perhaps, in view of the Extra-Mural Post Graduate Lectures now being directed by the Canadian Medical Association it may be noted that this work has been carried on in the Province of Ontario for several years from funds donated by the Ontario Division of the Canadian Red Cross Society.

In order that the health work carried on by the Red Cross in the several provinces may be better co-ordinated, a Chief Commissioner has been appointed in the person of Lt.-Col. James L. Biggar of Ottawa. He will be remembered by many C. A. M. C. overseas officers, and has been associated with the D. S. C. R. and Pensions work for several years past.

April is a little early to expect the plains, deserts and mountains, through which the Santa Fe passes from Chicago to Los Angeles, to make much show of vegetation. The visits, three times daily, to the Harvey Dining and Lunch Rooms were very pleasant breaks in an otherwise monotonous three days. In these days of good highways even trans-continental train travel is affected by the general use of the automobiles. Yet the Railways do not appear to realize the need of catering still more to the travelling public. Indeed the chance traveller, at least, gathers the impression, that the train service in general is not as good as formerly and he knows that it falls far short of what it should be.

Leaving Nova Scotia about 26 years ago on account of poor health Dr. John W. Flinn of Wallace, N. S. to-day owns and conducts a cottage sanatorium in Prescott, Arizona, and is recognized as one of the leading practical Tuberculosis authorities in the United States. With all his prosperity his wife's relations were most kindly received, and our stay in Arizona was delightful, owing to the full and charming hospitality of Doctor and Mrs. Flinn, and their friends as well.

What appeals most to one spending a month in a State like Arizona is difficult to state in a short paragraph. But, at least, one is impressed almost immediately with the vastness, its extensive deserts, its encircling mountain ranges, its natural scenery on a grand scale, its mining and ranching resources, its wonderful climate, its possibilities in general agriculture and fruit raising where irrigation is available, its magnificent highways over plains and up mountain sides with yawning canyons hundreds of feet below, its Grand Canyon never adequately pictured or described, and the general optimism of its population of mining pioneers and health seekers.

Attendance at the Annual Meeting of the State Medical Society gave opportunity for a motor trip over South Arizona, which with a

side trip to Nogales, Arizona, was most delightful. Nogales is a Mexican border town, most of its business being carried on in its United States side, and all of its Restaurant business being conducted on the Mexican side, this for obvious reasons.

The 35th Annual Meeting of the Arizona State Medical Association was held in Globe, Arizona, April 26-27-28, 1926. Following the meeting of the American Medical Association at Dallas, Texas, several speakers from the A. M. A. session were present at the State meeting. The rules of this meeting state that,—“No address or paper before the Association, except those of the President, orators and invited guests, shall occupy more than twenty minutes. Those opening discussions shall be limited to five minutes, those who follow three minutes, and no one shall speak more than once on the same subject.” Papers when read, shall become the property of the Association and shall be handed to the secretary to be published in South Western Medicine. It is noticeable the liberty given the president, orators and visitors. It is rather difficult to hold an annual convention of any kind without hearing from several orators, it is a part of the official entertainment. It is, however, desirable to note that visitors invited to give papers or addresses are not limited as are members of the Association. It would be absurd for us to invite a prominent physician, surgeon or specialist to attend our annual meeting and give a twenty minute paper. We would, however, do well to adopt the five and three minute plan for discussion, and the president has a bell at h's hand.

The following scientific papers were presented:—

- “Granuloma Inquinali” Dr. H. M. Purcell, Phoenix.
- “The Present Status of the Wasserman Reaction” Dr. P. B. Newcomb, Tucson.
- “Iron Therapy, New Light on old Subject”, Dr. George Dock, Pasadena, Cal.
- “Tularemia” Dr. A. Martin, Phoenix.
- “Manifestations of Syphillis in Skin and Mucous Membrane”, Dr. H. T. Clohessy, Phoenix.
- “Ethylene Anaesthesia” Dr. H. R. Larson, Phoenix.
- “Blood Transfusion”, Dr. Victor M. Gore, Tucson.
- “Intestinal Obstruction; Case Reports” Dr. H. W. Rice, Morenci.
- “The Recognition and Treatment of Urinary Infection” Dr. Wm. F. Braasch, Mayo Clinic.
- “Ureteral Calculi” Dr. W. G. Schultz, Tucson.
- “Nephroptosis” Dr. Charles S. Vivian, Phoenix.
- “Radiant Energy in Accessible Malignancy of the Head and Face” Dr. W. Warner Watkins, Phoenix.
- “Contraceptive Techique” Dr. James F. Cooper, New York, Director American Birth Control League.
- “Focal Infection in Relation to Tuberculosis” Dr. Chas. C. Browning, Los Angeles.

"The Pathology of Bone and Joint Tuberculosis" Dr. John W. Flinn, Prescott.

"Treatment of Pulmonary Hemorrhage" Dr. Victor Randolph, Phoenix.

"The Public's Interest," Dr. W. O. Sweek, Phoenix.

The Presidential Address and the last mentioned paper indicated that State Societies have many of the same problems as those in our Canadian Provinces. Among these may be noted the relations between the public, the general practitioner and the specialist; group practice; recent influx of quacks and their hold on the public; to what extent can a State Society influence State legislation, etc. It was brought out that local city or county societies should be the primary agencies to bring pressure to bear on the various legislators, and the State Association to voice these opinions to the State Assembly and Senate.

It is noted that only two papers were concerned with topics not of interest to a practitioner, say in Nova Scotia,—the rather rare "Granuloma Inguinale Tropicum" case report and report of a number of cases of Tularemia. The desert has several good crops, one of them, the Jack Rabbit, being responsible for transmission of the latter disease.

The doctors were entertained at a Smoker at the Cobre Valle Country Club one evening and, with their wives, at a Banquet and Dance at the same place another evening. At this latter function speeches were only given by distinguished visitors, including the representative from Nova Scotia. The contribution by Mrs. (Dr.) Horst, appearing in last month's Bulletin, was made at this banquet and was most cordially received.

With receptions, teas, motor trips, golf, etc., the ladies of the party were finely entertained, one feature being an inspection of perhaps the largest copper mine in the United States at Miami, Arizona. Nearly one hundred doctors and their wives were in attendance and not a dozen of them arrived in Globe by rail.

Any account of this medical meeting would not be complete without a reference to the contribution of Doctor Cooper, Medical Director of the American Birth Control League. It is quite improbable that the paper would have been received were it anticipated it would deal only with the mechanical means of preventing conception. Nor would it be worth while to make mention of the incident here were it not that, both in England and the United States, Societies have been organized under various names to control the national births as regards quantity as well as quality. Had the speaker dealt primarily with the reasons why such control was desirable the paper might have been accepted and be open to discussion. The address given, however, was disgusting to say the least, and no medical Society in Canada will advance its interest or those of the community by giving the advocates of this latest fad an opportunity of being heard.



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## Prohibition and the Profession

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**W**E were the goat. When the people of this province, at the behest of the temperance reformers, placed the Prohibition Law on the statutes there had to be a loophole somewhere. The politicians, mostly lawyers, looking around for that loophole—a tongue in each cheek—cast their eyes upon us and chuckled ironically. “Look you!” they cried. “The people want this prohibition so we can’t side-step it. We must give the people what they want—but we’ll fix it so the boys can get what they want from the doctors.” It was a splendid gesture. The noble medical profession in their great work of healing the sick must needs have alcohol. They *must* have it. Suffering humanity, lying at death’s door, needs such stimulus. The splendid doctors shall provide for them.

And then what did the government do? Did they ask us to confer with them and take us into their confidence? Did they seek information from us as to the quantity of liquor that might be required for purely medical purposes before buying a supply? They certainly didn’t take us into their confidence, and if they had asked us about quantities we could have told them that about a thousand bottles of brandy and a few hundred gallons of Port Wine would have been sufficient. Instead, they established a Commission, hired a lot of helpers, bought a large warehouse, and stocked it with sufficient hard liquor to fulfill the purely medical needs of the whole world for at least a year. Did that mean that the government was going to be tied up with medical supplies of an alcoholic nature until our grandchildren grew beards? Oh, no, the doctors would see to that!

And it was amazing, my brothers, how soon humanity began to suffer from complaints and sicknesses that only liquor could cure. And it was amazing how soon humanity cast all pretence of suffering aside and stalked into one's office planking down a dollar and demanding "Scrip, Doc!" We had become the goat. I recall one Saturday afternoon keeping count of the gentlemen entering my office. At the time I was beginning practice in this city. Every step on the stairs brought the hope of that patient for which I had spent many thousand dollars and many long years preparing myself professionally. But of the twenty-two gentlemen who stepped into my office that Saturday afternoon every single one laid their dollar on the table and said: "I wanna scrip, Doc!"

In short, when prohibition was forced upon this province the government, with the consent of the temperance workers, foisted the entire responsibility of saying who was and who was not to have liquor upon our profession. We accepted it. There seemed very little else we could do. Those few of us who had strong wills and decided convictions were able to refuse to write a prescription except in such rare cases as those in which it was indicated. But what of the great majority of us who were not so bucklered? Did we always refuse to write a prescription when we knew quite well the liquor was merely for purposes of pleasure? Let me give my own experience. I was, as I have indicated before, beginning to gather a few patients when the law came in. A gentleman whose wife I had attended would come to my office to pay his bill. That pleasant matter concluded, he would suggest that a scrip for a dozen ale would give pleasure and comfort and would I write the same. I make no bones about it, I did as he asked. I hated doing it, but I would have been mighty uncomfortable refusing him. The best I could do for my self respect was to refuse to accept payment for such prescriptions. I daresay I was a fool, but these Presbyterian upbringings plays the devil with a fellow's conscience.

Not only was that my experience but it was the experience of most of the men in the profession with whom I have discussed the matter. In the first year I was in practice in Halifax I could quite easily have made five thousand dollars writing scrips at a dollar per. Now that is a terrible temptation for a young man to have to face, no matter how strong he may be or how good his intentions. I maintain, furthermore, that it was a damnably unfair temptation for the temperance workers to allow foisted on young men. As I one day enquired with considerable blasphemy of a bleary gentleman who planked fifty cents on my table with the usual demand: "Do you think I spent ten years of my life studying for the purpose of writing you a booze scrip?"

However, those bad days are past. Thanks to the kindly bootlegger we are not troubled any longer by the thirsty—at least to no uncomfortable degree. But we have not yet done with indignities.

Recently I had a letter from the Liquor Commission informing me that if I wished to write prescriptions for liquor in the future I must write them on serially numbered forms which they would provide—*on application!* In other words, the Liquor Commission informs me, a doctor, that I cannot write a prescription except on the forms they provide. Personally, I will see the Liquor Commission in a hotter climate than Sierra Leone before I will make application for their serially numbered prescriptions. But that is not the worst. I get yet another letter, this time from the Inspector in Chief of the N. S. T. A., informing me that I must make affidavit to him every quarter of the liquors purchased by or for me, and that I must make such affidavit under oath. And lastly I am given warning that if I fail to comply with this high-handed demand I am liable to ten days in the local hoosegow. To my way of thinking this is the last indignity. If we, a body of free men following humbly and by the grace of God in the footsteps of Aesculapius, lie down under it, we are indeed less than the dust.

I am for law and order. But there is or should be some limit to the follies of legislation. If we, as a profession, were loaded with the responsibility of deciding who was and who was not to have strong drink, we should refuse to bear that responsibility unless we are given a free hand. We did not seek the privilege of writing booze scrips. It was thrust on us and most of us accepted it with considerable distaste. But if we are going to be checked up like a lot of criminals—while bootleggers can travel with impunity every road in this province—I think it is high time we relinquished our goatish task. Let the lawyers—or the ministers—take on this business. Let them try for a few years deciding who should and who should not have liquor.

But seriously, it seems to me that this latest restriction that is being forced upon us is a matter for grave consideration and should at least be discussed at our annual meeting. If we are going to have our prescribing rights interfered with by the Board of Vendors, if we are going to be liable for prison if we do not tell the Rev. D. K. Grant four times a year under oath what medical supplies we have purchased, we are allowing inroads into our professional rights and liberties that may set a serious precedent.

We have been the goat of Prohibition long enough.

H. B. A.

# Halifax Branch Medical Society of Nova Scotia

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73rd. Annual Meeting.

Halifax, N. S. July 7th-8th, 1926.

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E. V. HOGAN, President—J. G. D. CAMPBELL, Secretary-Treasurer.

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## TENTATIVE PROGRAMME.

Tuesday, July 6th, 1926.

9.00 P. M. Meeting of Executive Committee—St. Julian Room,  
Halifax Hotel.

Wednesday July 7th, 1926.

10.00 A. M. Registration, (Medical Sciences Building, College St.)

10.30 A. M. Meeting called to Order.

Minutes, Reports of Committees, Routine Business.

11.30 A. M. Presidential Address,—DR. E. V. HOGAN.

“Review of the past year’s work.”

General Discussion.

2.30 P. M. Address in Surgery.—“Combined Medical and Surgical  
Management of Gastric and Duodenal Ulcers.”

Dr. FRANK H. LEAHY—Chief of the Leahy Clinic, Boston,  
Mass.

2.30 P. M. Motor Drive tendered to the Visiting Ladies by the  
Halifax Ladies.

4.00 P. M. Reception and Tea Dance, Brightwood Golf Club, Dart-  
mouth.

8.00 P. M. Address in Medicine—“The Influence of Osler in Medicine”  
DR. JOSEPH H. PRATT, Boston, Mass.

9.00 P. M. “Treatment of Pulmonary Tuberculosis by Artificial  
Pneumo-Thorax.”

DR. A. F. MILLER, Nova Scotia Sanatorium.

Discussion opened by DR. H. K. MACDONALD from the  
Surgical Standpoint.

Thursday, July 8th, 1926.

- 10.00 A. M. Report of Nominating Committee and Election of Officers.  
10.30 A. M. General Business Meeting with reports of various Committees—Full discussion invited.  
2.30 P. M. Halifax Infirmary Surgical Clinic—DR. FRANK H. LEAHY.  
4.00 P. M. Garden Party Jollimore Village, North West Arm, guests of Dr. and Mrs. Evatt Mathers.  
7.00 P. M. The Society's Annual Dinner at Ashburn Golf Club. Hosts, Officers and Members Halifax Medical Society.

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Through the courtesy of Dalhousie University all meetings, except Dr. Leahy's Clinic, will be held in the Medical Sciences Building, College Street.

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All meetings and functions will be run on Daylight Saving Time.

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#### Matters Held Over for the July Issue.

- "A Presidential Address," Dr. A. S. Burns, Kentville.  
"Case Report and Discussion", Dr. W. C. Harris, Yarmouth.  
Cumberland County Branch Report of Meeting.  
"Case Report, Transient Blindness," Dr. W. J. Egan, Sydney.  
Judge Armstrong's Decision in the Suit of Dr. W. N. Cochrane.

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GRADUATES. The degree, M. D., C. M. has been conferred on the following students from the Maritime Provinces and Newfoundland:—

James A. Bynre, Charlottetown, P. E. I.; L. O. 'N Conroy, Saint John's, Nfld.; F. J. D. Dineen, Sussex, N. B.; St. Clair Duffy, Kinora, P. E. I.; P. R. Garcin, Curling, Nfld.; E. B. Hall, Bridgerown, N. S.; Roy Kennedy, Kensington, P. E. I.; C. M. Kirk, Antigonish, N. S.; H. D. Land, Sydney, N. S.; K. S. MacLean, North Wiltshire, P. E. I.; T. F. Meahan, Bathurst, N. B.; L. Natjanson, Sydney, N. S.; L. P. Nelligan, St. Louis, P. E. I.; R. A. Salter, Bridgetown, N. S.; G. A. Strapp, Harbour Grace, Nfld.

## Twenty-Five Years Ago

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**T**WENTY-five years ago, come July 3rd, the Maritime Medical Association met in Halifax. The late Dr. W. S. Muir of Truro, was President and delivered on that occasion, a very note-worthy Presidential Address. This address contained very finely expressed tributes to the character and worth of two recently deceased Confreres, viz: Drs. Edward Farrell of Halifax and James McLeod of Charlottetown.

In view of our meeting July 7th and 8th, what Dr. Muir said regarding the desirability of as many doctors as possible attending such meetings, will bear repetition at this time:—

“We have met to-day for mutual benefit I have just said, still how very small a gathering when you consider the fact that within the Maritime Provinces we have, according to Dr. Roddick’s figures, 476 medical men in Nova Scotia, 90 in P. E. Island and 243 in New Brunswick. Think of that gentlemen, and then look at the attendance here to-day. All professions and trade are to-day organized and armed to the teeth except the medical profession, and if these organizations are not needed, and have not accomplished what they were organized for, don’t you suppose that they would long ago have ceased to exist! One reason, and one great reason, for so little interest being taken by the profession at large in the different medical organizations is that there is no pecuniary benefit derived directly from our annual meetings. Men tell us that they cannot leave their work, that the profession is so overcrowded that they fear to leave home. I grant you, gentlemen, that this may be the case in some small circumscribed places, but where is that overcrowding that we have had thrown in our faces every day for the past twenty years? Not at the top of the medical ladder, I can assure you, but at the bottom, and we shall always stick there if we do not get out of ourselves and give what assistance we can to one another. It is a duty that every medical man owes to himself, his family, and his patients, that once a year, at least, he must have a holiday, and what better way can it be spent than with his co-workers in his chosen profession. Don’t think for one moment that the public do not sooner or later take stock of this, and comment upon it, and hence indirectly you will reap back some of your pecuniary loss.”

**Cancer Cure Fraud.** There have recently been broadcasted through the mails, to the doctors of Nova Scotia, some pamphlets advocating the use of Koch's Cancer Antitoxin. Although this may be new material to some of the profession it is an old exploded scheme in the United States.

The Journal of the American Medical Association dated May 8th, 1926, gives the history of Koch and his associates. Koch graduated in 1918 from the Detroit College of Medicine and Surgery and in less than a year of his graduation he claimed to "have developed a real specific cure for Cancer."

The Journal states "Seven years have passed during this time Dr. Koch has seen fit to keep this secret to himself. During that same time we have been unable to learn of a single instance in which a case of unquestioned malignant disease has been cured by the Koch treatment. On the other hand we have received information regarding individuals who have *promptly died* after taking the treatment."

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**Added Equipment**—The Halifax Infirmary has recently added to its equipment a "Metabolism Apparatus" (Sanborn Graphic). This not only contributes to Hospital efficiency, but also to the comfort of the patients who up to the present time, have been obliged to go outside the Infirmary for this test.

When to use the Graphic:

In differential Diagnosis:

To indicate thyroid disease—to differentiate hyperthyroidism from tuberculosis—and to separate toxic from non-toxic goiter.

In Surgery:

To help classify the patient for initial procedure—to warrant thyroidectomy—and to verify an arrest of toxemia.

In Therapy:

To check the dosage and frequency of X-ray—to determine the effect of rest and diet—and to regulate the feeding of thyroid extract.

For all Patients:

With enlargement of the thyroid gland; exophthalmos; any endocrinopathy, retarded mentality, sluggish vitality; with unexplained tachycardia, tremor, loss of weight, gain in weight.

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**Glace Bay General Hospital.**—The Graduating Exercises of the nurses in training at the General Hospital took place about the middle of May, five nurses constituting the class of 1926. That these occasions are made interesting and open to the public is only as it should be. The hospital is for public service and the more people become interested in its general operations, the more heartily will it receive public

support. One special feature of these Commencements or Closings is the special address given to the public, altho addressed to the graduating class. Local or outside speakers, most frequently physicians, are selected to give this address.

Dr. John McDonald of Sydney addressed the recent graduating class of the General Hospital. He said,—Religion, War, and Education were three factors in the development of nursing as a profession. Our present service received its great impetus during, and on account of, the harrowing days of the Crimean War. Thirty years ago there was only one training school in Nova Scotia, turning out seven to eight nurses each year, while to-day there were no less than fifteen well-equipped training schools, all measuring up to the required standards.

Glace Bay was fortunate in having two such fine hospitals noted for the calibre of their graduate nurses. Much of the success of these institutions and the splendid service they afford to the mining communities is due to the pioneer work of the late Doctors R. A. H. McKeen and Hon. William McKay. Both these men were gifted with talents which would have won for them prominence in larger fields, but the mining districts in Cape Breton are to-day reaping the benefits of their unselfish lives. Perhaps largely on account of this the people of Glace Bay to an extraordinary extent take an interest and pride in St. Joseph's and the General Hospital, which is fully justified by the work of these institutions.

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**Curricula for Training Schools for Nurses:** It is proposed to consider this matter at the June meeting of the Canadian Medical Association under the following headings:—

- (a) To study and report upon the curricula of Training Schools for Nurses in Canadian Hospitals.
- (b) To determine the process by which the present curricula have been evolved and the supreme authority in determining these matters.
- (c) To request co-operation in this study from other Canadian organizations directly concerned in the education of nurses, pupil or graduate.
- (d) To request co-operation also from the American Medical Association, American College of Surgeons, American Surgical Association, American Hospital Association, American Association of Nurses, etc.

Commenting on this a prominent Medical Educationalist writes as follows:—

“It would appear to me that the training of nurses has almost if not entirely passed out of the control of the Medical profession;



that in some particulars it is assuming a character quasi-scientific and theoretical at the expense of practical knowledge in the care and comfort of the individual patient; that it tends to reduce the number of resident pupil nurses available for the care of the sick and thus increases, without adequate return, the cost of hospital administration."

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### Valley Medical Society.

(Being a Press Despatch from Wolfville under date of Tuesday, May 11th).

The nineteenth annual meeting of the Valley Medical Society was held in Wolfville to-day, Tuesday, May 11th, the first session being convened in the Carnegie Science Building at three o'clock. The President, Dr. E. DuVernet of Digby, was in the chair, while Dr. C. E. A. DeWitt, of Wolfville, was Secretary.

After routine business the subjects treated were: "Pyloric Stenosis in Infancy," by Dr. Crowe: discussion led by Dr. Gosse. "Some Interesting Fracture Cases," by Dr. L. R. Morse, Lawrencetown: discussion led by Dr. Sponagle. Case Report, by Dr. Elliot, Wolfville.

Dinner was served to the association at the Royal Hotel.

At the evening session, the address of welcome was given by Mayor Roach, to which President DuVernet, responded.

Dr. W. H. Eagar of Halifax gave a talk, illustrated with lantern slides, on the subject, "Gall Bladder and Spinal Diagnosis by the X-Ray." This was followed by "Diagnostic Methods in Urology," by lantern slides by Dr. F. G. Mack, of Halifax.

Officers elected were:

President, Dr. William Grant, Wolfville.

Vice-Presidents, Dr. W. R. Dickie, Barton, for Digby County; Dr. A. A. Deckmann, Bridgetown, for Annapolis County; Dr. J. P. McGrath, Kentville, for Kings County.

Secretary-Treasurer, Dr. C. E. A. DeWitt, Wolfville.

Executive—Dr. R.O. Bethune, Dr. L.L. Crowe, Dr. A.B. Campbell.

The next place of meeting will be Bridgetown.

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### Workmen's Compensation Board.

(Resolution passed by the Western Nova Scotia Medical Society at Yarmouth, May 27th, 1926).

*Whereas* the present method of adjusting claims of physicians for services rendered injured workmen by the Workmen's Compensation Board is unsatisfactory to the profession; and *Whereas* reasonable

medical evidence does not always appear to be accepted by the Board; and *Whereas* the question of physicians' responsibility does not appear to be appreciated in fixing fees allowed in serious cases; and *Whereas* the Board is provided with a competent medical officer; and *Whereas* the medical officer is the proper official to adjust claims of physicians for services rendered; and *Whereas* the time limit of thirty days, for paid medical attendance is not sufficient in many cases;—*Be It Resolved*, therefore, that the Western Nova Scotia Medical Society at regular meetings assembled, does hereby request the Local Government to so amend the Workmen's Compensation Act, during the Session of the Legislature, so to provide that:

- First: Reasonable medical evidence be given more consideration by the Board.
- Second: That the question of physicians' responsibility in serious cases, be taken into consideration for fixing fees.
- Third: That the medical officer be a member of the Board with power to adjust claims of physicians for services rendered injured workmen.
- Fourth: That the time limit of thirty days be so extended to provide for the payment of medical attendance beyond thirty days when necessary.
- Fifth: That the Nova Scotia Medical Society be asked to take definite action towards having this Resolution brought before the Government of Nova Scotia with the least possible delay.

*Further Resolved* that a copy of this Resolution be forwarded to Hon. E. N. Rhodes, Premier of Nova Scotia, a copy of each to the Branch Medical Societies and a copy to Dr. G. H. Murphy, Chairman of the Workmen's Compensation Board Committee of the Nova Scotia Medical Society.

This Resolution was moved by Dr. G. W. T. Farish of Yarmouth, seconded by Dr. A. R. Campbell, Yarmouth, and passed unanimously.

THOMAS A. LEBBETHER.

Sec. Tres. Western Nova Scotia Medical Society.

#### Western Nova Scotia Medical Society.

The Western Nova Scotia Medical Society held its annual meeting in the Kiwanis Club Building, Yarmouth, Thursday afternoon, May 27th. At the conclusion of the routine business, a paper was given by Dr. W. C. Harris on "Obstetrics, Case Report." The following officers were elected for the coming year:

- President.....Dr. W. C. O'Brien, Wedgeport.
- Vice-President.....Dr. S. H. Thibault, for Digby County.  
Dr. L. O. Fuller, for Shelburne County.  
Dr. A. R. Melanson, for Yarmouth County.

Secretary-Treasurer . . . . . Dr. Thomas A. Lebbetter, Yarmouth.

Representatives to the N. S. Medical Society Executive: Dr. A. R. Campbell and Dr. C. A. Webster.

The meeting was adjourned until June 7th at 8 p.m. when the Society was addressed by Doctors Frank S. Patch of Montreal, who spoke on "Renal Infections"; L. M. Murray of Toronto on "Cardiac Irregularities;" and E. K. MacLellan of Halifax on "Indications for Caesarian Section." This meeting was held in the Kiwanis Club Building at Yarmouth. These excellent papers were very much enjoyed. Dr. G. W. T. Farish occupied the chair. These papers were discussed by Doctors Farish, Lebbetter, Morton and Fuller A. J., of Yarmouth.

A hearty vote of thanks was extended to Doctors Patch, Murray, and MacLellan from this Society.

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"**Social Medicine**" is the title of a paper by B. Franklyn Royer, M.D. in *Journal A.M.A.* May 15th, 1926. The article, after indicating the relations of the Dalhousie Medical College to the Public Health Clinic makes the following references to Dr. W. H. Hattie as its Director, in his efforts to give the Medical Student the proper Public Health point of view:—"Dalhousie University is blazing a new trail in preventive medicine. Dr. Hattie is giving the students who pass his chair an opportunity to see that social medicine is far from being state medicine; in fact, is opposed to state medicine. He is making the young practitioner appreciate that physical examination of the patient and writing of a prescription for a drug are, after all, the smallest part of the sum total of the practice of medicine.

"Dalhousie University's school of medicine is in a position to send out through the three Maritime Provinces practitioners of medicine who will have no fear of state medicine, but who will serve as the real leaven in their communities to stimulate and arouse those various social activities which, when co-ordinated with executive health work, will multiply the effects of public health endeavor manyfold. This new departure in teaching social medicine will be followed with great interest and is likely to be adopted in all progressive universities."

## OBITUARY

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The death occurred May 23rd, at Barrington Passage of Mrs. Frances Robertson widow of T. W. Robertson for many years Collector of Customs at that port. She was 87 years of age, highly esteemed and respected. She died at the home of her daughter, Mrs. Banks, wife of Dr. H. H. Banks of Barrington.

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The death occurred in Saint John, N. B. May 30th, of Dr. Ives M. Anglin after an illness of two years which began while he was an Interne in the Royal Victoria Hospital, Montreal. He was a son of Dr. J. V. Anglin, who has been a prominent physician and active citizen of the City of Saint John ever since 1883.

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The press records the death in Saint John, May 16th, of Dr. Howard D. Fritz, a leading Eye, Ear, Nose and Throat Specialist of New Brunswick. He graduated from McGill in 1888 and practiced for a short time in Nova Scotia.

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The death occurred recently at his home in Antigonish of James Carter, a highly respected citizen of that County. Dr. P. McF. Carter of Sydney is a son of the deceased.

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The death occurred in Glace Bay on May 27th of J. A. H. McLean, who for four years has been prominently associated with the building up and development of that large mining town. He was regarded as the largest real estate owner in Glace Bay. He is survived by his widow, five daughters, and three sons. One son is Dr. John A. McLean, Dalhousie 1924. Dr. McLean began practice in Dominion No. 6, took post-graduate work in the United States and is now associated with Doctors Calder and McAskill in Glace Bay.

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The death occurred on June 4th at Vancouver of Dr. Allison Cumming after an illness of about one year. He was an Art's graduate of Dalhousie, and took his M.D.C.M., from McGill. He was born at Hopewell, N. S. in 1879, and is survived by his wife and three children, Melville Cumming of the N. S. Agricultural College is a brother of the deceased.

The death occurred at Sault Ste Marie, Ont. June 7th of Dr. James McLurg aged 74 years. He began practice in 1887. He was father of Vice-Pres. J. E. McLurg of Besco, so well known in Halifax and Sydney.

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Vol. 11 No. 2 of "The St. Michael's Hospital Medical Bulletin" has been received. It contains a fine cut of the late Dr. McKeown of Toronto with an appreciative obituary notice. Dr. McKeown, will be remembered as the medical member of the Ralston Commission which opened its sessions in Halifax. He will be remembered by many members of the C.A.M.C. as O.C. No. 4 General Hospital, President of the Standing Medical Board at Folkstone, and O.C. of the Imperial Hospital at Brighton.

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Members of the medical profession in Nova Scotia who had the pleasure of meeting Dr. John H. Allingham of Saint John at Medical meetings in Yarmouth and Halifax, will sincerely regret to learn of his death on June 3rd, after only a few days illness. His contribution to Chest Surgery, particularly in the field of Thorocoplasty, is distinctly of value, and there is between the several institutions for the Tuberculous a distinct field for this special phase of surgical work. Dr. Allingham leaves in his immediate family his wife, father, a brother and two sisters.

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The funeral held in Earltown on June 8th was practically attended by all the people of that village and surrounding country. It was a tribute of respect and esteem to the person and life of John MacKay who died June 5th, aged ninety-two years. He was an elder in the Presbyterian Church for over forty years, and in his younger days much interested in Militia matters, holding a Colonel's commission. He had two sons in the medical profession, Dr. V. N. MacKay of Halifax, and the late Dr. J. S. MacKay of Windsor. One daughter surviving is Mrs. Campbell, widow of the late Dr. Geo. M. Campbell of Halifax, another is a Registered Nurse Miss Harriet MacKay. Dr. A. E. Blackett of New Glasgow and Dr. J. G. D. Campbell of Halifax are grandsons of the deceased.

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Dr. J. C. Ballem of New Glasgow was recently called to Charlottetown, P. E. I. on account of the illness and death of his brother.

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The death occurred June 11th at Truro of Mrs. J. J. Snook at an advanced age after a short illness. Mrs. J. H. MacKay, widow of the late Dr. J. H. MacKay Truro, is a daughter of the deceased, and Dr. Joe MacKay, now on the Staff of the Montreal General Hospital, is a grandson.

## PERSONALS

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Dr. K. F. Blackadar of Hebron, visited Boston for a few weeks recently.

Dr. A. R. Cunningham of Halifax spent part of the month of May in Philadelphia.

Dr. J. H. Alexander, formerly at Lockeport, is now located at Westchester, Cumb. Co.

Dr. Geo. H. Cox of New Glasgow has returned home after spending the winter in Florida.

Dr. S. W. Williamson of Yarmouth is the recently Elected President of the local Y. M. C. A.

Dr. A. R. Campbell of Yarmouth was in attendance at the recent Kiwanian Convention in Montreal.

Dr. J. S. Chisholm of Mahone Bay accompanied by Mrs. Chisholm is spending a few weeks in New York.

Dr. R. S. Gass of New Glasgow, who spent last fall and winter in Curling, Nfld., has returned to his home.

Dr. E. B. Muir, recently on the staff of the Nova Scotia Sanatorium has gone to Boston for special post-graduate work.

Dr. L. N. Morrison, Dalhousie 1925, is now located at Mahone Bay, his card appearing in Progress-Enterprise weekly.

Dr. and Mrs. G. W. MacKeen visited for a few days in Halifax early in June previous to their return to Baddeck for the summer.

Five nurses received their diplomas from the Yarmouth Hospital on May 19th. Dr. S. W. Williamson addressed the graduating class.

Dr. E. R. Davies, Dal. 1924 of Saltsprings, Pictou Co., has located at Londonderry, in the field formerly filled by the late Dr. R. O. Shatford.

Dr. I. R. Sutherland, Dalhousie 1925, of Pictou, recently in the General Hospital in Saint John is reported as locating at Annapolis Royal.

Dr. D. S. Sutherland, Dalhousie 1925, of River John is now located at Seabright in place of Dr. F. J. A. Cochrane who has removed to New Brunswick.

Dr. J. A. Sponagle of Middleton was a delegate to the recent meeting of the General Council of the United Church of Canada in Montreal.

Two well-known physicians were honored at the recent McGill Convocation with the Degree of Doctor of Laws.

Dr. R. O. Bethune of Berwick and Dr. Robinson Cox of Upper Stewiacke have been appointed Coroners in their respective counties.

Dr. Joseph McKay, who has been in practice in Truro for several years, is now in the Montreal General Hospital, Assistant in the X-Ray Laboratory.

Dr. F. H. Alexander formerly of Lockeport and who removed to Westchester, has now located in Truro, and is in the office formerly used by Dr. Joe McKay.

Recently seventeen chiropractors were charged with practising medicine in the State of New Jersey. Of these thirteen paid fines and the other four went to jail.

Dr. M. E. Armstrong of Bridgetown was recently a visitor to Montreal in attendance at the meetings of the General Council of the United Church of Canada.

At the recent Dalhousie Convocation, Miss Margaret MacKay daughter of Dr. H. H. MacKay of New Glasgow, received her Master of Arts degree with distinction.

Dr. and Mrs. A. A. Dechman of Bridgetown, spent the latter part of May motoring over the Province visiting among others friends at Amherst, Baddeck and Sherbrooke.

The first year prize man in Medicine at McGill this year is Mr. H. F. Moseley of Lunenburg, N. S. He was also awarded the Jackson Prize in histology and Embryology.

Mrs. McDonald, wife of Dr. Nat. McDonald, Sydney Mines, accompanied by her two children left May 16th to spend the summer with her parents in Nelson, B. C.

Dr. John McDonald of Sydney was the special speaker at the graduating exercises of the Glace Bay General Hospital on May 18th, when five nurses received their diplomas.

Dr. F. R. Davis of Bridgewater, has been Elected President of the South Shore Baseball League. Three teams representing Halifax, Lunenburg and Bridgewater constitute the League.

Monoxide Gas asphyxiation is given as the cause of the recent death of Mr. W. C. Feindell, Mayor of Middleton. He was found unconscious in his closed garage with the engine still running.

Dr. Clarence F. Moriarty, Dalhousie 1925, son of Mr. P. F. Moriarty of Halifax, accompanied by his wife, has recently spent a vacation at his former home in Halifax. He is in practice at Suffolk, Virginia.

Dr. A. E. Blackett of New Glasgow was a member of the local Rotary Minstrels in their recent show. Just what was A. E.'s particular stunt is not mentioned, but, anyhow, he was on hand to help.

Dr. J. H. Lyons, Halifax, has removed his office from 13 to 17½ Spring Garden Road. He is now in the office, until recently occupied by W. W. Woodbury D. D. S. on the corner of Queen and Spring Garden Road.

Early in May the homes of Drs. H. B. Webster of Kentville and Dan Murray of Tatamagouche were threatened by fire, the incipient blaze however, in each case being extinguished before serious damage was done.

At the K. of C. Banquet in the Queen Hotel, Halifax, May 26th, Dr. W. F. McKeough of Sydney Mines and Dr. P. McF. Carter of Sydney, proposed two of the chief toasts in speeches that were greatly appreciated.

Miss Ann Wardrope of Milford, Hants Co., recently celebrated her 99th birthday. She has a nephew of four score and a niece who is a great grandmother. Dr. J. M. Wardrope of Springhill, is one of the younger nephews.

Dr. Ronald Webster, son of C. O. H. Webster D. D. S. and Mrs. Webster of Pictou, having completed an internship at the Royal Victoria Hospital, will be attached to the Hospital Ship "Arras" for service on the banks.

The press notes that Dr. F. C. Lavers of New Ross, Lunenburg Co. met with an accident May 31st. The doctor's horse became frightened by an auto truck and bolted. In jumping from the wagon Dr. Cole struck his head on the truck. It is hoped he will speedily recover.

At the 1926 Convocation of St. Francis Xavier College a Reunion of the class of 1901 was held. There was only one lady member belonging to the class and she was present,—Mrs. Chisholm, wife of Dr. H. A. Chisholm of Halifax. Dr. P. S. Campbell also of that class, was one of the chief speakers.

Dr. E. Murray Britton, Dalhousie 1924, whose engagement to Miss Dalley of Quincy, Mass. was announced in the February Bulletin, was married in New York, April 24th, where they will reside. He was born in Westville, and is a son of the Rev. J. W. and Mrs. Britton, now residing in Oxford, N. S.

Ten national women's organizations in the United States have pooled their resources to defeat any amendment to the Sheppard-Towner Act. As the Act concerns itself with the birth of children perhaps their views should be considered in spite of the general opposition of the medical profession.



Dr. M. G. Tompkins of Dominion, is taking a three month's vacation rendered necessary by his recent illness. During his absence his practice will be carried on by Dr. J. Fabian Bates, Dalhousie 1926. Dr. Bates will be remembered as prominent in Dalhousie Athletics, as well as graduating with honors.

A recent examination of 667 children by French doctors gives this conclusion as to the value of the Dick test in Scarlet Fever,—“The Dick test cannot help in diagnosis of Scarlet Fever; but it may reveal whether or not there is immunity to the disease, and indicate the proper serum for prophylaxis or treatment.”

Sir Berkeley Moynihan, K. C. M. G., C. B., is temporary major-general A. M. S. of the Army Medical Advisory Board. He is professor of Clinical Surgery at the University of Leeds, Hon. Fellow of the American Surgical Association and a member of the Council of the Royal College of Surgeons in England.

A very successful Clinic for crippled children was held at the Yarmouth Hospital, May 21st and 22nd. under the auspices of the Yarmouth Rotary Club, Dr. T. B. Acker of Halifax being consulting and operating surgeon. At least a dozen town and county doctors were in attendance. The local Rotary Club proposes a similar clinic each year.

Mrs. DeWitt, widow of the late Dr. Geo. E. DeWitt, of Wolfville, accompanied by her daughter Kathleen recently returned from spending the winter in Florida. This has been their custom for several years, and the readers of the Bulletin will recall a very pleasing article, written by Dr. DeWitt while enjoying the warmth and sunshine of that favorite winter resort.

J. Ross Byrne (“Doc”) was admitted as a barrister and solicitor of the Supreme Court of Nova Scotia on June 1st. 1926. He will practice his profession in Guysboro, N. S. He was a popular student of Dalhousie and has a fine record. He is a son of Dr. T. I. Byrne of Dartmouth and a nephew of Hon. Mr. Justice Byrne of the Supreme Court of New Brunswick.

“*The Nova Scotia Branch of the Canadian Legion of the British Empire Service League*” is the rather wordy title of a new veteran organization. Perhaps it is not proper to use the word ‘new’ in case it succeeds in fully absorbing existing veteran societies. The list of officers includes Major General Geo. L. Foster, C. B., M. D., F. R. C. S., L. L. D. President; and Major Nat. McDonald M. D., Vice-President. The principal address at the organization meeting was given by Dr. A. F. Miller of the N. S. Sanatorium on the needs of ex-service men with tuberculosis. Dr. C. J. Sparrow of Reserve, Dr. N. McDonald, Sydney Mines and Dr. S. J. McLennan were other representatives of the medical profession in attendnace.

Dr. David M. Cassidy is a graduate of McGill, medicine 1867, and was awarded the degree of Doctor of Laws, April, 1925. He has a B. Sc. and D. S. C. degree of Edinburgh University, is F. R. C. S. of Edinburgh, L. R. C. S. and L. R. C. P. of Edinburgh and L. S. A. of London. At present Dr. Cassidy is medical superintendent of the Lancaster Mental Hospital.

At the Annual Dinner of the American Medical Association, at Dallas, 250 doctors enrolled as "Medical Veterans of the World War". They will publish a quarterly which will be devoted almost entirely to the personal history of physicians who served in the War. Is it strange that ex-C. A. M. C. officers have not taken similar steps? Not that you could notice.

There have been instances where the work of County Health Nurses has not met with the full endorsement of local physicians. Their work, however, is so valuable as to be absolutely essential in the prevention of disease and the improvement of health. A provincial paper reports a disagreement between a health nurse and a local physician. It would be much better to avoid such publicity.

With one-half of the people in the United States carrying life insurance, and insurance companies spending large sums of money on public and personal health work, a recent medical writer has published an article entitled;—"Is Universal Life Insurance Coming"? If Companies can grant \$15,000 for a Tuberculosis campaign in the Maritime Provinces, how long before they will claim a right to deal with all diseases.

While it is true that Kentville is the natural hospital centre for a very considerable population should not the present movement have materialized years ago. It is quite possible to have too many small hospitals. A small mining town in Cape Breton boasts of two hospitals, one of six beds and the other of twenty-five. Does anyone care to review the hospital situation in Nova Scotia from a scientific, economic and utility standpoint.

Dr. Clement McLeod, Dalhousie 1923, after post-graduate work in Montreal and in England and on the Continent has opened his office at 319 Barrington St., Halifax. He is specializing in Eye, Ear, Nose and Throat work. Dr. McLeod is a son of the late Lieut.-Colonel Roderick C. MacLeod who was the Officer Commanding No. 9 Canadian Stationary Hospital until his tragic death at Bramshott, January 4, 1917 from Anthrax poisoning.

The Kentville Board of Trade on the evening of May 20th observed "Ladies Night" by a dinner at the Cornwallis Inn. The chief speaker of the occasion was Dr. O. B. Keddy, Mayor of Windsor. Dr. Keddy emphasized the need of a hospital in Kentville. A Hospital carried out in the fullest terms, the meaning of "The Brotherhood of Man", the

strong helping the weak. Dr. A. S. Burns of Kentville emphasized the close relation between the prevention and curing of disease as regards local hospitals. A strong committee was appointed to further the proposed new hospital for which some buildings and ample grounds have been donated to the town.

Mrs. Morse, wife of Dr. L. R. Morse of Lawrencetown, on the evening of June 8th, met with a severe auto accident, resulting in a broken arm. She and Doctor Morse were returning from a meeting of the Valley Medical Society at Wolfville that evening when the accident occurred. Doctor Elliot of Wolfville and Doctor Bishop of Kentville were motoring along at the same time, and with Doctor Morse rendered first aid. She was a patient in Westwood Hospital, Wolfville for a number of days.

Two bronze memorial tablets have been placed on view and will soon be placed in the Dalhousie Health Centre. One records the indebtedness of the University and the City to the Rockefeller Foundation for the establishment of the Centre. The other is in memory of the late Dr. D. A. Campbell for many years a member of the Staff of the Medical College, and entirely devoted to the affairs of his profession, who also endowed the Chair of Anatomy, and is recalled to-day as one of the most loyal friends of the University.

The story is going the rounds of a doctor in Amherst staging a collision between a good substantial truck horse and a Ford machine. It is also noted that formerly this doctor was an ardent lover of horses. Coming upon this horse feeding beside the road, but certainly encroaching on the right of way, a sounding horn failed to induce the horse to get out of the way. Thinking possibly the horse was balky, and might need some encouragement, he gradually caused his Lizzie to approach, and the bumper to gently touch poor old Dobbin in the rear. The result was the kicking to pieces of a perfectly good radiator.

The June Number of the C. M. A. Journal has the following reference to two members of the profession in Nova Scotia who have recently given addresses to the profession in New Brunswick under the auspices of the C. M. A. Association,—

"On April 23rd the monthly meeting of the Saint John Medical Society was addressed by Drs. K. MacKenzie and H. B. Atlee of Dalhousie University. Dr. MacKenzie spoke on the various aspects of heart failure, covering particularly the treatment of this condition. Dr. Atlee's address was on the subject of septic abortion. These papers were extremely practical and, therefore, of more interest than usual. These two gentlemen also appeared in Fredericton, Woodstock, Moncton and Campbellton and the reports from these centres are equally flattering. It is the opinion of the writer and of many of his conferees, that the type of paper presented by these, our latest visitors, would be hard to improve upon as the message contained, reaches each and every one of us in general practice."

# The Registered Nurses' Association of Nova Scotia

For the Year Sept. 1925 to Sept. 1926.

Adby, Mildred.....	Grace Maternity Hospital, Halifax, N. S.
Allan, Ann D.....	City of Sydney Hospital, Sydney, N. S.
Anderson, Gertrude I.....	Yarmouth, N. S.
Andrews, Isabelle Beatrice.....	City of Sydney Hospital, Sydney, N. S.
Anna Dolores, Sister.....	Hamilton Memorial Hospital, North Sydney, N. S.
Anna Seton, Sister.....	Halifax Infirmary, Halifax, N. S.
Mary Anthony, Sister.....	St. Martha's Hospital, Antigonish, N. S.
Archard, Alfreda C.....	Victoria General Hospital, Halifax, N. S.
Archard, Sarah A.....	Victoria General Hospital, Halifax, N. S.
Archibald, Muriel J.....	Colchester County Hospital, Truro, N. S.
Arthur, Mary.....	158 So. Broadway, White Plains, New York, U. S. A.
Atwater, Viola Blanche.....	Linwood, Antigonish, N. S.
Auld, Sadie Kehoe, Mrs. E. S.,.....	Mountainside Hospital, Montclair, New Jersey, U. S. A.
Austin Gladys L.....	27 Church St., Halifax, N. S.
Azar, Marion Forbes, Mrs.....	161 George St., Sydney, N. S.
Baldwin, Margaret A.....	Sydney Mines, N. S.
Bamford, Annie L.....	Children's Hospital, Halifax, N. S.
Barker, Bertie Baxter, Mrs.....	Highland View Hospital, Amherst, N. S.
Barrington, Sibella A.....	Red Cross Society, Saint John, N. B.
Bartol, Edith W.....	Oxford Ave., Sydney Mines, N. S.
Barton, Dorothy M.....	Saskatchewan Sanatorium, Fort Qu'- Appelle, Saskatchewan.
Bates, Mary.....	North Sydney, N. S.
Betz, Josephine S.....	Highland View Hospital, Amherst, N. S.
Bennett, Bernice Grace.....	Nova Scotia Sanatorium, Kentville, N. S.
Billman, Alice.....	Armdale, Halifax, N. S.
Black, Amy I.....	Amherst, N. S.
Bligh, Clara Belle, Mrs.....	Apart. 3, 49 Crescent St., Montreal, P. Q.
Boutillier, Ruth A. L.....	8 Princess Place, Halifax, N. S.
Brennan, B. Anna.....	53 Pine St., Dartmouth, N. S.
Brideau, Alvina Bertha.....	117 Lawrence St., Halifax, N. S.
Browne, Elizabeth O. R.....	12 Summit St., Dartmouth, N. S.
Bruce, Katharine.....	Shelburne, N. S.
Buchanan, Margaret.....	Lowell General Hospital, Lowell, Massa- chusetts, U. S. A.
Calder, Jennie S.....	Thrall Hospital, Middletown, New York U. S. A.
Caldwell, Enid R.....	Sweets Corner, N. S.
Cameron, Anna J.....	St. Joseph's Hospital, Glace Bay, N. S.
Cameron, Josephine C.....	Westminster Apartments, Morris St., Halifax, N. S.

Cameron, Mabel Catherine.....	Nova Scotia Hospital, Dartmouth, N. S.
Canty, Doris A.....	4 Mott St., Dartmouth, N. S.
Campbell, Carrie Giles, Mrs. John.....	Baddeck, N. S.
Campbell, Catherine Mae.....	Digby General Hospital, Digby, N. S.
Campbell, Elizabeth Mary.....	Harbor View Hospital, Sydney Mines, N. S.
Campbell, Evelyn Munro, Mrs. D. A.,.....	Thorburn, Pictou Co., N. S.
Campbel, Ida.....	Franklyn County Hospital, Columbus, Ohio, U. S. A.
Campbell, Janet Alexandrina.....	Windsor, N. S.
Campbell, Mary Florence.....	344 Gottingen St., Halifax, N. S.
Campbell, Mary Nora.....	Mountainside Hospital, Montclair, New Jersey, U. S. A.
Canning, Laurie Elizabeth.....	Aberdeen Hospital, New Glasgow, N. S.
Campbell, Annie.....	Meriden Hospital, Meriden, Connect- icut, U. S. A.
Carroll, Elizabeth Ann.....	344 Gottingen St., Halifax, N. S.
Carson, Agnes Douglas.....	Victoria General Hospital, Halifax, N. S.
Carter, Maud L.....	Yarmouth Hospital, Yarmouth North, N. S.
Catherine Gerard, Sister.....	Hamilton Memorial Hospital, North Sydney, N. S.
Cavanagh, Meredith Irene.....	Aberdeen Hospital, New Glasgow, N. S.
Chisholm, Anna Cecelia.....	St. Andrews, Antigonish, N. S.
Chisholm, Isabel Rose.....	St. Martha's Hospital, Antigonish, N. S.
Chisholm, Katherine Marie.....	288 Charles St., Boston, Massachusetts, U. S. A.
Chisholm, Mary Anne.....	Yarmouth Clinic, Yarmouth, N. S.
Chisholm, Mary Ethel.....	303 Brunswick St., Halifax, N. S.
Chisholm, Rachel Ann.....	St. Martha's Hospital, Antigonish, N. S.
Cliff, Florence M.....	344 Gottingen St., Halifax, N. S.
Colwell, Nellie Irene.....	31 South Park St., Halifax, N. S.
Coolen, Mary Ellen.....	Dalhousie Public Health Clinic, Halifax, N. S.
Coon, Martha Emma.....	101 Edgehill Road, East Milton, Massachusetts, U. S. A.
Cooper, Alonzo, Mr.....	Victoria General Hospital, Halifax, N. S.
Corbin, Elizabeth Bertha.....	John N. Adams Memorial Hospital, Perrysburg, New York, U. S. A.
Cox, Agnes.....	169 Whitney Ave., Sydney, N. S.
Crook, Helen Evangeline.....	Aberdeen Hospital, New Glasgow, N. S.
Crooks, Hilda Gertrude.....	c/o Mrs. Bradbury, Port Medway, N. S.
Crosby, Gertrude Janet.....	Dalhousie Public Health Clinic, Halifax, N. S.
Currie, Alicia M.....	Pictou, N. S.
Currie, Susan.....	Pictou, N. S.
Currie, Teresa Elizabeth.....	King Edward St., Glace Bay, N. S.
Campbell, Elizabeth Anne.....	2199 Cadillac Ave., Detroit, Michigan, U. S. A.
Davidson, Margaret.....	Nova Scotia Hospital, Dartmouth, N. S.
Dawson, Martha Helen.....	Springhill, N. S.
DeMone, Mary Emily.....	Children's Hospital, Halifax, N. S.
Desmond, Berthold.....	Granton, N. S.
DeVan, Alice Brady, Mrs.....	678 Robie St., Halifax, N. S.
Dick, Margaret MacF.....	New Aberdeen, C. B., N. S.
Dickson, Emma Isabel.....	Aberdeen Hospital, New Glasgow, N. S.
Dobson, Myrtle Winifred.....	Westmount, Sydney, N. S.
Mary Dolorosa, Sister.....	St. Martha's Hospital, Antigonish, N. S.

Doucet, Catherine Elizabeth.....	37 Winchester St., Brookline, Massachusetts, U. S. A.
Doucette, Eva Anne.....	Springhill, N. S.
Downey, Mary Agnes.....	Ross Memorial Hospital, Sydney, N. S.
Drew, Margaret C.....	27 Tobin St., Halifax, N. S.
Dubbin, Mabel Louise.....	101 James St., Whitney Pier, Sydney, N. S.
Dunlap, Laura A.....	1 Kent St., Halifax, N. S.
Dwyer, Rita P.....	63 Vernon St., Halifax, N. S.
DeVenne, Winnifred Alberta.....	Springhill, N. S.
DeCoffe, Grace Marguerite.....	Afton, Antigonish County, N. S.
Elizabeth Seton, Sister.....	Halifax Infirmary, Halifax, N. S.
Elliot, Ethel.....	Aberdeen Hospital, New Glasgow, N. S.
Enman, Roseanna M. Cameron, Mrs.....	New Glasgow, N. S.
Evans, Rena Mertie.....	26 Edward St., Halifax, N. S.
Farrell, Theresa.....	Main St., Glace Bay, N. S.
Fawson, Emma Maude.....	Nova Scotia Sanatorium, Kentville, N. S.
Fenton, A. Edith.....	Dalhousie Public Health Clinic, Halifax, N. S.
Ferguson, Christena Elizabeth.....	New Glasgow, N. S.
Ferguson, Elizabeth Marion.....	Harbor View Hospital, Sydney Mines, N. S.
Field, Mary Ethel.....	92 Green St., Brockton, Massachusetts, U. S. A.
Fillmore, Mabel Lillian.....	Sackville, N. B.
Fleming, Claudia M.....	Nova Scotia Hospital, Dartmouth, N. S.
Fischer, Mary MacDonald, Mrs.....	Glace Bay, N. S.
Flemming, Minnie Levenia.....	Cottage Hospital, Nantucket, Massachusetts, U. S. A.
Fougere, Lavin Joseph, Mr.....	Nova Scotia Hospital, Dartmouth, N. S.
Francis Joseph, Sister.....	Hamilton Memorial Hospital, North Sydney, N. S.
Francis, Olivia Jeanette.....	Hantsport, N. S.
Fraser, Frances Margaret.....	99 Belgrave Ave., Notre Dame de Grace, Montreal, P. Q.
Fraser, Florence.....	Glace Bay, N. S.
Fraser, Isabel.....	St. Andrews, Antigonish, N. S.
Fraser, Lavinia Flora.....	325 South St., Halifax, N. S.
Fraser, Mary Meikle.....	Nova Scotia Sanatorium, Kentville, N. S.
Fulton, Mary Layton, Mrs.....	Glenholm, N. S.
Geldert, Laura Eaton, Mrs.....	244 Jubilee Road, Halifax, N. S.
Mary Georgina, Sister.....	St. Mary's Home, Sydney, N. S.
Gilbert, Anna Lavinia.....	2 Eaton St., Waterville, Maine, U. S. A.
Gooley, Katherine Lena.....	Emergency Hospital, D. I. & S. Co., Sydney, N. S.
Grady, Stella M.....	6 Wentworth St., Dartmouth, N. S.
Graham, Catherine M.....	17 North St., Halifax, N. S.
Graham, Frances Sheridan, Mrs. Judson, ..	51 Coburg Road, Halifax, N. S.
Grant, Marion A.....	30 Cedar St., Halifax, N. S.
Grant, Nina.....	Aberdeen Hospital, New Glasgow, N. S.
Graves, Laura M.....	94 Vernon St., Halifax, N. S.
Gray, Marguerite O.....	New Glasgow, N. S.
Grayley, Laura.....	Inverness County Memorial Hospital, Inverness, N. S.
Gunn, Hazel Kirk, Mrs. John A.....	East River, St. Mary's, Pictou Co., N. S.
Gonzaga, Sister Maria.....	Halifax Infirmary, Halifax, N. S.
Hanway, Mary Levena.....	Amherst, N. S.

- Harding, Grace M. . . . . Yarmouth, N. S.  
Hare, Ethel Fenwick . . . . . 84 Queen St., Halifax, N. S.  
Harris, Ethel Elmore . . . . . Durham, New Hampshire, U. S. A.  
Harrison, Eunice K. . . . . 27 Tobin St., Halifax, N. S.  
Hart, Lillian M. D. . . . . Sackville, N. B.  
Hart, Ruth L. . . . . 122 Spring Garden Road, Halifax, N. S.  
Harvey, Mary Ellen . . . . . Newport, Hants Co., N. S.  
Hayden, Mary J. . . . . 51½ LeMarchant St., Halifax, N. S.  
Hayes, Mary Mercedes . . . . . The Mount Sinai Hospital, Fifth Ave.  
. . . . . & One Hundredth St., New York  
. . . . . City, U. S. A.
- Henderson, Jessie Muriel . . . . . Antigonish, N. S.  
Herbert, Edith K. . . . . 344 Gottingen St., Halifax, N. S.  
. . . . . (V. O. N.)  
Hills, Ethel Alice . . . . . Portage la Prairie, Manitoba, (P. O.  
. . . . . Box 1338)
- Himmelman, Adeline . . . . . Bridgeville, Pictou Co., N. S.  
Hivey, Helen Elizabeth . . . . . King's Memorial Hospital, Berwick, N.S.  
Hoare, Laura O. . . . . Truro, N. S. (P. O. Box 510).  
Holden, Amy Sophia . . . . . 22 Fenwick St., Halifax, N. S.  
Holloway, Charlotte E. . . . . 249 Robie St., Halifax, N. S.  
Holmes, Florence J. . . . . Dr. Mader's Hospital, Halifax, N. S.  
Hopkins, Grace Rebecca . . . . . Springhill, N. S.  
Hubley, Jennie . . . . . 41 Windsor St., Halifax, N. S.  
Hubley, Laura M. . . . . Westminster Apartments, Halifax, N. S.  
Hunter, Nettie May . . . . . All Saints Hospital, Springhill, N. S.
- Innis, Arabella Susise . . . . . Victoria General Hospital, Halifax,  
. . . . . N. S.  
Mary Irenaeus, Sister . . . . . Hamilton Memorial Hospital, North  
. . . . . Sydney, N. S.
- Jamieson, Janet Bell . . . . . Rahway Hospital, Rahway, New Jersey,  
. . . . . U. S. A.  
Jess, Frances Evelyn . . . . . Evangeline Hospital, 260 Princess St.,  
. . . . . Saint John, N. B.  
Johns, Edna Sarah . . . . . 38 Summit St., Halifax, N. S.  
Johnston Alice M. . . . . Isolation Hospital, Rockhead, Halifax,  
. . . . . N. S.  
Mary Joseph, Sister . . . . . St. Martha's Hospital, Antigonish, N. S.
- Keating, Lillian G. . . . . 87 Coburg Road, Halifax, N. S.  
Keating, Roy Victor, Mr. . . . . Cossack St., North Woodside, Halifax  
. . . . . Co., N. S.
- Keatinge, Mary A. . . . . "Ashcote", Guelph, Ontario.  
Keddy, Ada Myrtle . . . . . New York City Children's Hospital,  
. . . . . Randall's Island, New York, U. S. A.  
King, Rose L. . . . . River Philip, Cumberland Co., N. S.  
Kemp, Ruby Gertrude . . . . . Lawrence Hospital, Bronxville, New  
. . . . . York, U. S. A.  
Kennedy, Bessie Bell . . . . . New Glasgow, N. S. (P. O. Box 826)  
Kennedy, Kathryn Mary . . . . . 248 Robie St., Halifax, N. S.  
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### RABIES.

There is altogether too much "street virus"—too many mad dogs running about the city streets and country turnpikes. They carry death and disaster with them.

How terrifying the outlook would be if there had been no Louis Pasteur to show us how to save the lives of people bitten by mad dogs! Not less than a hundred thousand lives have thus been saved—no one can give the exact figures; but Parke, Davis & Co., who have been marketing a modification of the Pasteur vaccine (a modification in the interest of safety), state that they have sold not less than 10,000 full courses of this vaccine, thus saving, according to estimates based on the statistics of untreated cases, at least 3,000 lives. It would be safe to say 10,000 but for the fact that, while rabies is invariably fatal, it does not invariably develop from the bite of a rabid animal. The clothing may protect, or the virus may be washed out by the escaping blood. Nevertheless, any such wound is exceedingly dangerous.

The P. D. & Co. brand of rabies vaccine is called Rabies Vaccine (Cumming), because it was Dr. Cumming, of Ann Arbor, Mich., who discovered the dialyzing method of eliminating the toxicity of rabies virus without impairing its protective properties.