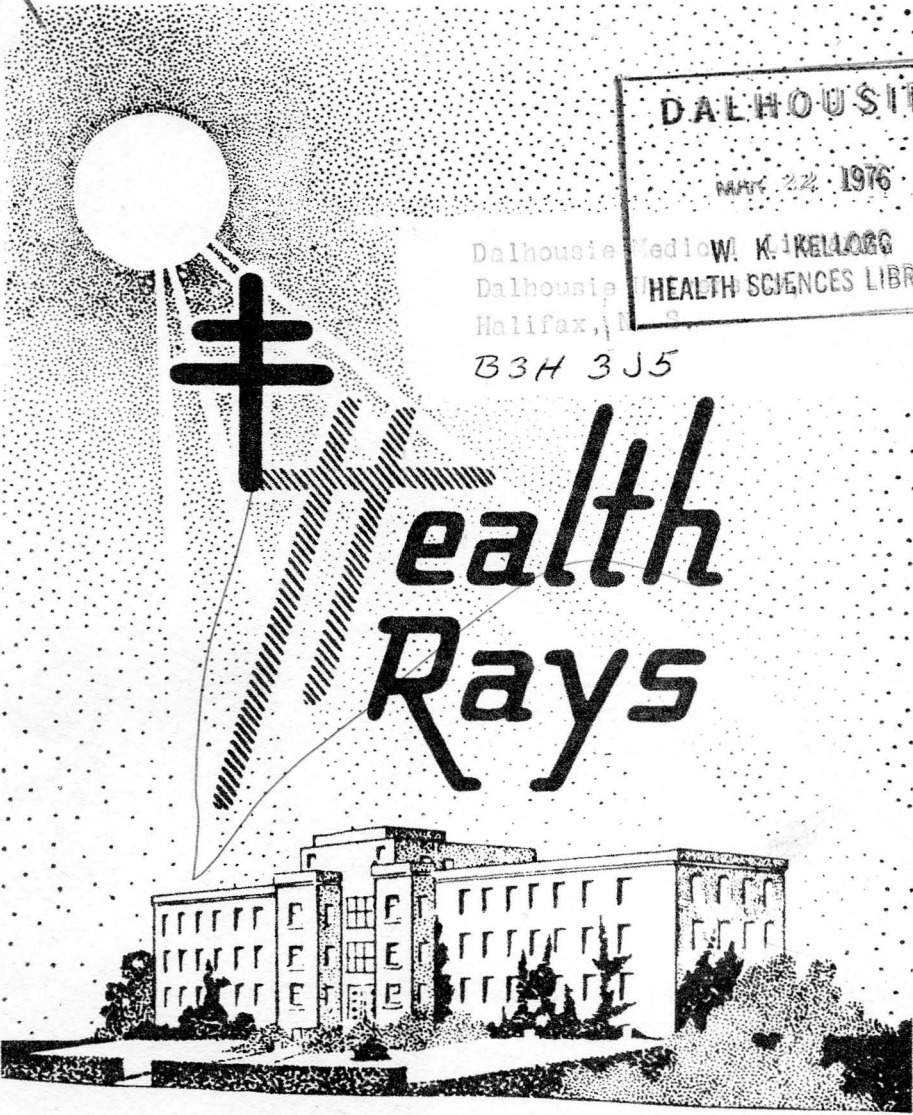


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Health Rays

The Miller Hospital
 Vol. 57 February 1976 No. 2

HEALTH RAYS

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Hospital Visiting Hours

DAILY: 1100 – 2030 (11:00 a.m. – 8:30 p.m.)

ON LIVING IN THE COUNTRY

Lilah Smith Bird

It is astonishing how many people there are in cities and towns who have a secret longing to get back into the quiet country places; to own a bit of soil of the earth and to cultivate it.

I have had, in recent years, many letters from friends asking about life in the country. It is as though one should ask, "Is love worth trying?" or "How about religion"? For, country life is, to each human being a fresh, strange, original adventure. It is packed and crowded with adventure - or it is dull and miserable. There's many a man whose strength is renewed when he settles in the country, and every time his feet touch the earth. Of all places, it is in the country where life can be met to its fullest and freest, where it can be met in its greatest variety and beauty. I am convinced that there is no place to equal the open country.

A walk in the woods at anytime of the year is, to me, an education in itself. There, I see beauty of flowers, birds and small rodents. Many of these I observe through my binoculars.

One bright, cool afternoon in the late fall, when resting in a pasture, I observed across the hill a farmer plowing his land to have it ready for spring. I could see the furrows of the dark earth glisten as they were turned over. The grass in the meadows was a full, rich, brownish green. Hens were active in the yard, and children were shouting and playing around the door, their echoes carrying quite a distance.

For some people who have to toil on the farm for their daily bread I suppose at times they feel that life in

a city would be much easier; but wherever one lives and works there is labor involved.

So many truths spoken by the Master Poet come to us, exhaling the atmosphere of the open country. His stories were often told of sowers, husbandmen, herdsmen, and his similes and illustrations so often dealt with the common and familiar beauty of the fields: "Consider the lilies, how they grow". It was on a hillside that he preached his greatest sermon, sitting among the lilies. The lilies he was speaking of were little red lilies that grow wild in the Eastern Countries.

A person from the country is often made uncomfortable, upon visiting the city, to find two or three ears of corn served for a high price; the same with a dish of berries. Fruit sent to the city is nearly always picked before fully ripe, thus losing that perfection of flavour which the sun and open air impart.

Many educated men are now on farms, and have their books, magazines, music and lectures not too far away in towns. With good roads and machinery, telephones and newspapers every day by rural post, the farmer may maintain as close a touch with the best things the world can offer any man.

The real advantages of country life have come to be a strong lure to many people in towns and cities. Any city man who would venture on this new way of life by moving to the country, and still be within reach of his accustomed work, can have a small farm to experiment with. The shorter

work week has made this possible for many wage earners. Out of all of this is likely to come some of the greatest rewards that man can know - a robust body, a healthy appetite, and cheerful spirit.

A few weeks ago I read a story of Tolstoi's called "The Candle" - how a Russian peasant, forced to plough a field on Easter Day, lighted a candle to "his Lord", and kept it burning on his plough as he worked through the Sacred Day.

The afternoon I saw the man ploughing in his field in late fall I thought of Tolstoi's story of the peasant and wondered if this is not as true a way of worshipping God.

"My doctrines shall drop as the rain
My speech shall distill as the dew
As the small rain upon the tender herb
And as showers upon the grass".

ON PLANTING A TREE

Planting a tree is an act of faith, the setting of a foundation for a place of worship, for a growing tree is a rising cathedral drawing man's eyes upward.

Planting a tree is a labor of love for posterity. There are few of us - unless we perform the good deed at a tender age - will live to see the tree in the full splendor of its maturity. We can only hope that this tiny sapling will prosper and brighten the lives of those of another day. That among its branches a child will hear and heed the voice of the wind. That an artist, resting beneath its sheltering arms, will find inspiration in the shifting patterns of leaves in the lively colours

of the autumn; the green of summer against the tall blue skies. That a poet will somehow capture the quintessence of that lonely cry: the dark filligree, stark and bare amid the winter's bitter white, and later hear the song of the cosmos, the throbbing pulse of spring in the fat, bursting buds.

We must trust that the hands of man shall be stayed from this masterpiece of Nature. That through the slow years, a society which is so impatient with the deliberate, purposeful workings of growing things, will somehow in his hastening way spare for countless, as yet, unhatched generations of birds a haven of rest, a place to rear their young, a podium from which to proclaim the goodness of Nature's ways.

In the planting of a tree which will wrestle with the winds passing over our graves, we labor in the faith that that labor shall not be in vain. We hope to become a part of creation; to leave the world better for our passing: this being the sum total of man's existence.

Eugene L. Hamm
Owlhoot
Clarence, N.S.
BOS 1C0

A diagnosis of tuberculosis is a very serious matter. The problems associated with the diagnosis of tuberculosis are different in each person who becomes infected. Each case is made up of different factors such as race, age, sex, ambition, family, financial conditions, work, future plans and individual responsibilities. So for each person who has been told that he has tuberculosis there is a different set of problems which he must face.

* * * *

THE GOOD OLD DAYS

Among the material which reached this office for World Health Day was a brochure which showed a balcony full of patients, wrapped as for a day in Arctic wastes but lying in bed. It was a picture taken long, long ago of the porch of a sanatorium. Would you be interested in what treatment was like in those far off days? Then stay with this for a few minutes.

Sanatoria were built with verandahs all the way around the floor above floor of them. Doors led on to these porches from patients' rooms so that the beds could be wheeled right out - and they were, come wind come weather.

That's when electric blankets would have been the ticket, but they hadn't been invented. No electric pads either. Hot water bottles, yes. But in the winter a hot water bottle stays hot only so long. Patients and nurses became quite expert in the best way of wrapping a blanket. We recall articles in sanatorium magazines about whether it was better to wear gloves in winter and so be able to turn the pages of a book or mitts and have to take them off at short intervals - the faster one read the shorter the intervals.

Heads were kept warm as well as hands and feet. Nowadays quite a number of people go bareheaded the year through and seem to be none the worse for it. They took a different view back in the first 25 years of this century. No use at all for rash defiance of the cold and conformity.

In sanatoria, where everybody knew everybody else, they put comfort ahead of style and warm caps with ear laps which turned down were to be seen in the winter months. If you have heard people complaining about

all the clothes they have to put on to go outside in winter, and then take off again as soon as they get in, you know the mood in those old sanatoria when it was time to go outside.

Not much could be done about noses.

Why didn't the patients balk at being put out in the cold? For a variety of reasons. One was that there was a general belief that the colder air was the fresher it was. Well, it feels that way. In addition, somehow deep in many of us is the notion that what's uncomfortable is good for us. Also it may have been a nuisance but it was also a diversion and they needed a diversion. Not only were these the pre-drug days when treatment was likely to be anything from two to five years. They were the pre-radio and pre-TV days. Also those were the days when there weren't as many books around as now. Neither was there a rehabilitation department to help plan activities to help the time to go.

There are people in this world who spend a lot of time sighing for "the good old days". TB patients should never be in those ranks.

The only good thing about the good old days in TB treatment was that they were a lot better than the older days. About 1900 people got tuberculosis, thousands and thou-

(continued on Page 5)

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A DOCTOR LOOKS AT HEALTH

Chronic Lung Disease and Cigarettes

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

Medical Director, The B.F. Goodrich
Company, Akron, Ohio

Chronic obstructive lung diseases are increasing at an alarming rate throughout the entire population. Breathing polluted air is the probable cause. Seventy percent of our population is concentrated in ten percent of our land area. Air pollution in urban areas is a national problem. Dusts, pollens, burning furnaces, incineration of refuse, exhaust from cars and trucks, and certain manufacturing processes are the principal sources of air pollution.

Chronic bronchitis is prevalent in communities where air pollution is the highest. It is a common condition in cigarette smokers. More men than women are affected. In chronic bronchitis the secretions into the bronchial tubes of the lungs are increased and the air flow through the bronchial tree is impaired. The bronchus is a perfect site for infection to occur. As it does, breathing becomes more difficult. Often, infecting organisms are found in the bronchial system when no outward symptoms of infection are present. During acute episodes of air pollution the bronchial tree may go into spasm resulting in coughing, difficulty in breathing and even death. Tobacco smoke and cold air as well as irritation from air pollutants, will cause bronchial spasm. Who has not heard the "wracking" cough and the rasping sounds as a heavy smoker clears his nose and throat?

The diagnosis of chronic examination and by x-rays of the chest called bronchograms are necessary to reveal

the extent of the abnormalities of the bronchial tree. Pulmonary function tests are valuable measurements of the condition of the lungs because they provide an evaluation of the air flow characteristics and enable an assessment of the effectiveness of treatment or of deterioration.

Pulmonary emphysema is a destructive loss of the air cells at the ends of the bronchial tubes. It is a disease of the terminal units of the respiratory tree and it may exist without the individual being aware of its presence. The lung destruction which is pulmonary emphysema, is closely associated with chronic bronchitis. As the bronchitis progresses, so does the emphysema. However, all cases of chronic bronchitis do not result in emphysema. Pulmonary function tests can determine the extent and severity of pulmonary emphysema. X-ray examinations are valuable in forecasting this disease.

Once the lung has been destroyed by pulmonary emphysema, there is no method of restoration. Therapy is aimed at improving the condition of the bronchial tree and attempting to limit further progress of the emphysema. There is no cure. *It is absolutely necessary for persons with*

(continued on Page 5)

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A DOCTOR LOOKS AT HEALTH

(continued from Page 4)

chronic bronchitis and/or pulmonary emphysema to stop smoking cigarettes. It probably would help these individuals if they would move to an area where there is less air pollution. All chest conditions must be treated promptly. Every effort must be made to relieve bronchospasm. There are drugs that work well. In some patients no measures seem to make the slightest difference to the troublesome cough and the difficulty in breathing.

In their initial stages chronic bronchitis and emphysema are unspectacular diseases. Hospitalization is not required and x-rays may be of no value. Yet there is every indication that together chronic bronchitis and emphysema overshadow the better publicized problems of lung cancer. From the standpoint of the number of people involved and the seriousness of the disease, these diseases may well be described as representing a major environmental challenge comparable to coronary artery heart disease.

Because of the extreme danger of polluted air, it is important that all of us insist that this tremendous health hazard be brought under control before it reaches a critical level to life itself. The dangers of cigarette smoking have been well publicized and should be recognized by everyone. The warning whistles of air pollution are blowing loud and clear. It would do well for all of us to heed them.

-HEALTH

"THE GOOD OLD DAYS"

(continued from Page 3)

sands of them. They became sicker and sicker. They were treated at home and on an average gave TB to five others before they died themselves.

Then the fact percolated through the general thinking that rest could go a long way in treating tuberculosis. The quieter a person was the less expanding and contracting the lung was doing and the better chance it had to heal.

Just plain rest was the ticket. Sounds easy - but it wasn't. It meant staying in bed 24 hours a day - maybe allowed up once or twice to go to the bathroom. A visitor could go up and down the corridors of many a sanatorium and not meet a patient. They were in bed or sitting quietly in a chair - maybe being allowed up for half an hour morning and afternoon. A patient was really on the mend when exercise (meaning a strolling walk) was allowed around the grounds or when they were given some kind of little job that meant being up and around for a fair bit of the day.

The absolute minimum a patient could expect to be in sanatorium was a year. Among the 200,000 or so ex-patients who are now living normal lives there are thousands who were three years "chasing cure". Five years was not unusual. With some it was seven.

Two things happened in the post war years to change this. One was the introduction of drugs. The other was the drive to find cases early. The length of stay in sanatorium had a lot to do with the state of advance of disease before it was found. It still has a lot to do with it, even now that drugs and surgery have changed the picture so much.

It's not much comfort when you feel impatient because of inactivity to know that in 1933 it would have taken much, much longer - but for what it's worth, it did. So bear up.

TB... and not TB

RON ILLSLEY
ESSO SERVICE STATION

BY ANY OTHER NAME

E.B. Cooke

Ever since I can remember, and undoubtedly before that, there has been a stigma attached to tuberculosis by many people. Families have been embarrassed if a well-meaning neighbour inquired about a member who was in a sanatorium. Tuberculosis was spoken of as a "lung condition", "weak lungs", or "chest trouble", in an apologetic manner as if it were a crime to be associated with the word "tuberculosis" in any way. I recall seeing a sign over the door of an excellent hospital for the tuberculous in an Eastern state - "Diseases of the Chest!"

All this foolishness has resulted in many people being afraid to mention their stay in a sanatorium lest they become an outcast; ashamed to give others the benefit of their experience and knowledge for fear of being spurned. There are, actually, expatrients who will ignore each other in public rather than run the risk of one or the other mentioning the san!

This unhealthy mental attitude is not only sheer idiocy, but has its share of the responsibility for the spreading of tuberculosis. It is the duty of everyone who has learned of this disease "the hard way" to combat this condemnation of the tuberculous with instruction. Teach the public to accept the disease as a disease and not as a sin. You don't need to brag about your time in the san, but neither do you have to conceal it. Nothing is more absurd than being ashamed of a disease contracted through no fault of your own. No reasonable person would do it.

Let's bring the "bug" out into the open and talk about it - those weird

shadows in the dark lose their awesomeness when the light is turned on. Let's tell folks how to avoid it, what symptoms to look for, so if they do develop the disease they will be able to recognize it before it gets beyond control. Let them know that the person who has had tuberculosis and knows how to protect others against it is much safer to have around than the person who may have it without being aware of it.

If a member of your family is in a sanatorium, try to be proud of him rather than ashamed. Help him to put up a good fight. Undoubtedly he is calling upon every bit of courage, patience, and self-control he has, and when he wins (and the majority of them do) he rates his place in society. He has worked hard for it.

If you are an ex-patient, try to feel sorry for the person who draws away when he hears the word "tuberculosis". Help to enlighten him if he gives you an opportunity. Be proud that you have won your battle, of having been able to adjust yourself to the long months of the cure. Be grateful for the medical research and skill which helped you back to health and for the knowledge you gained during your stay in the san.

The battle against tuberculosis is a tough one, and when one fights a tough adversary and wins - what is there to be ashamed of?

NTA Reporter

Ed. Note: This is somewhat in contrast to the excellent acceptance patients at the N.S. San have always had for the treatment of tuberculosis.

GETTING TOUGH OVER HOSPITAL COSTS

Health Minister Frank Miller was obviously flying a high kite when he said the Ontario government was prepared to close hospitals as a way of reducing health care costs.

Miller now says there are no plans at present to close any Metro hospitals but some 24-hour emergency services might have to be curtailed.

It was of course unlikely that a minority government would tell North York General to close because Branson could handle the load, or lock up Scarborough Centenary because everything needed was available at Scarborough General.

But if the hospitals are going to stay in business, there's every reason to run them at lower cost. Health care costs in Ontario are now nearly \$3 billion a year, up from \$2.2 billion in 1974 and rising at a rate of 16 percent annually. They must be checked if the health insurance plan is to be preserved without bankrupting the provincial treasury. And hospital costs are still the largest single item in the total bill.

There's plenty hospitals can do to reduce costs shorts of closing their doors. The advice is available in numerous studies which have been made over the past five years pointing out how to make better use of manpower and facilities.

Wasteful duplication occurs where a community has too many intensive care units, or human transplant surgery facilities, or even maternity wards, than people need.

There's also waste when a patient occupies a hospital bed for routine tests that could be done just as well, if

perhaps a little less conveniently for both doctor and patient, in an out-patient department.

There's more waste when a convalescing patient is kept in hospital too long if cheaper and just as good care can be provided at home. And there's misuse if a chronically ill or elderly person who needs only nursing care occupies an expensive acute-care hospital bed.

All these things are going on. But hospitals, for reasons of community status, or lack of alternative facilities, or reluctance to offend doctors and specialists who use hospitals as extensions of their offices, have failed to take the action necessary to save money.

It's urgent to make savings now. If this threat doesn't produce action, we may well arrive at the point where there's no alternative but to impose blunt economies and risk the pain that's bound to follow. Sometimes surgery is the only way to save the patient.

The Toronto Star



It has been well said that no man ever sank under the burden of the day. It is when tomorrow's burden is added to the burden of today that the weight is more than a man can bear. Never load yourselves so, my friends. If you find yourselves so loaded, at least remember this: it is your own doing, not God's. He begs you to leave the future to Him, and mind the present.

G. MacDonald

GOLDEN JUBILEE FUND

Contributions to this Fund may be addressed to:

HEALTH RAYS GOLDEN JUBILEE FUND

The Miller Hospital
Kentville, N.S.
B4N 1C4

An official receipt will be sent to all contributors, and all contributions are tax deductible.

The standing of the Fund as of January 16, 1976

Previously acknowledged: \$5,469.70
Transfer from account with the Credit Union

John T. Pye
Thomas Rankin
Clarence Caldwell

Interest

Total 554.41

Less Transfer to Operating

Expense 400.00

154.41

Grand Total \$5,624.11

There is no clear-cut cause and effect relationship between other diseases and tuberculosis, although tuberculosis rates are higher in diabetics and in miners who work in silica - containing ores than in the general population. Any prolonged and weakening illness could conceivably make one more susceptible to tuberculous disease, but make no mistake about it - tuberculosis is an INFECTIOUS disease, and ALL cases are the result of contact with other cases or infected materials from them.

IF

It it weren't for winter we should never love the spring,
If it weren't for the struggle victory songs we'd never sing,
If the tasks were always easy and their outcome plain to see,
And if failure never threatened life would very tedious be.

If we never faced a problem, if we never had a debt,
If everything we wanted without working we could get;
If we never made a blunder, never suffered from a fall;
Were we never disappointed life would hold no joy at all.

It's because we have to struggle; it's because we often fail;
It's because our cares are rugged and our pleasures all so frail;
It's because there's good to cherish, and there's evil to revile,
And perfection is denied us that makes every joy worthwhile.

Edgar A Guest

"Enthusiasm is the physical personification of faith, the contagious spark that gives us the burning desire to accomplish what we most want done. Prayer and thought differentiate us from animals and make us masters of our fate".

John D. Dorrell

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No Man, on his own motion, looks at a watch to find out what time it is: If you see a man consult his timepiece, and ask him the hour, he will almost invariably have to look again to tell you. For he has not asked his watch: "What is the time?" but some such question as: "Have I time enough?" or "How long is it till dinner?" The Watch answers "Yes", or "Half an hour", not at all an accurate statement of time. So if you ask what o'clock it is, he must repeat that question to his watch before he can reply.

George Dyer

"To reject the past is to deprive today of its meaning tomorrow - to evade the limits and significance to time is to empty life of its limits and significance. It is that meaninglessness which pervades this age of instant gratification and instant results and permanent dissatisfaction".

William Shannon

"We in America have already the highest standard of living of any country in history; that is, in terms of physical and material things - food, clothing, housing, and transportation. What we need to concentrate on now is a high standard of living for the inner life - thought, religion, the arts, science, imagination, sensitivity to nature, and human relations - everything that goes on inside us".

Leopold Stokowski

"To me a successful man is one who takes those capabilities with which he is endowed at birth and those which he acquires during his lifetime and uses them the nearest to the maximum of his ability to benefit the social and economic structure in which he lives".

William S. Lowe

"The only graceful way to accept an insult is to ignore it; if you can't ignore it, top it; if you can't top it, laugh at it; if you can laugh at it, it's probably deserved".

Russell Lynes, Jr.

* * * * *

Small kindnesses, small courtesies, small considerations, habitually practised in our social intercourse, give a greater charm to the character than the display of great talents and accomplishments.

Spin cheerfully,
Not tearfully,
Though wearily you plod.
Spin carefully,
Spin prayerfully,
But leave the threat with God.

Anonymous

* * * * *

To be of use in the world is the only way to be happy.

Hans Christian Andersen

* * * * *

Happy the man who can endure the highest and lowest fortune. He who has endured such vicissitudes with equanimity has deprived misfortune of its power.

Seneca

* * * * *

After all, the kind of world one carries about in one's self is the important thing, and the world outside takes all its grace, color, and value from that.

James Russell Lowell

* * * * *

You find yourself refreshed by the presence of cheerful people; why not make earnest effort to confer that pleasure on others?

L.M. Child

* * * * *

Those men who try to do something and fail are infinitely better than those who try to do nothing and beautifully succeed.

Jenkin Lloyd Jones



Chaplain's Corner

Msgr. J. H. Durney
in THE VETERAN

FAIR PLAY

The Golden Rule, "Do unto others as you would have them do unto you", is perhaps one of the most popular and universally admired principles, but with some individuals it does not work. They do not play fair.

One of the greatest contributions of sports to life is that it inculcates the spirit of fair play into the contestants, and stimulates the admiration of that spirit in the crowd.

In the business world this same spirit of fair play can be noted in what we call "the square deal". We all look for that. Honesty is the best policy in the long run, and most business people learn that sooner or later. The "square deal" pays off.

However, the remarkable thing about fair play is that, although it is universally admired and recognized in public life, it frequently falls down in private practice. It is not uncommon to see a man who on the playing field or in business and among his associates is regarded as beyond suspicion, but in his private life has earned for himself the reputation of being a "chiseler".

One explanation of this double dealing is selfishness. We are so careful in looking out for "number one" that we cannot resist the impulse at times to do a little trimming and shading in dealing with our neighbors. We expect others to play fair with us, but when our turn comes, we do not measure up.

Some people are extremely sociable and likable on the outside, but they are anything but companionable in their home and with their immediate family. Charity begins at home, and

the first demand is for fair play for those with whom we live. It is easy to live with some people and hard to live with others. But the cause of the difference is lack of consideration. Some people are naturally tidy and orderly. Others leave behind them a trail of disorder; someone has to be after them perpetually straightening things out and putting them back where they belong. We must all grow up and be more considerate about our habits of living. Everyone must pitch in and do his or her share. There are no rewards or medals handed out for distinctive service in the home, but happiness, peace of mind and friendship are the common rewards for fair play. That is something worth bearing in mind and going after.

LOVE WITHOUT DIMENSIONS

The example of Our Lord is the greatest motive we have for practicing fraternal charity. His own people, as we might expect, had a special place in His love. "And Jesus went about the cities and towns . . . and seeing the multitudes, He had compassion on them". His charity began at home. Those, too, who believed in Him and followed Him had a special place in His heart and were united to Him by bonds as close as those of blood. Stretching His hand toward a group of them who had gathered around Him, He said, "Behold my mother and my brothers, for whosoever shall do the will of my Father who is in heaven, he is my brother and sister and mother". The Apostles, of course, were even dearer to Him. Of them He said, "I have called you friends, because all things whatsoever I have heard of my Father, I have made known to you". In

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CHAPLAIN'S CORNER

(continued from Page 10)

His farewell to them He not only said, "I have loved you", but He also indicated the intensity of His love: "even as the Father has loved me". To little children, too, there went out from our Lord a special love. He enjoyed having them flock around Him, "because the kingdom of heaven is for such as they". Particularly conspicuous was Our Lord's love for sinners: "And it came to pass as He was sitting down at table, many sinners came and sat down with Jesus and His disciples". It was precisely sinners whom He came to save: "I am not come to call the just, but sinners". Most conspicuous, perhaps, was Our Lord's love for enemies: "You have heard it said, 'Love your neighbor and hate your enemy'. I, on the contrary, say to you, love your enemies and pray for your persecutors, and thus prove yourselves children of your Father in heaven". This sublime teaching Our Lord confirmed and sealed with His dying breath: "Father, forgive them, for they know not what they do".

When Our Lord told us that the greatest and first commandment is to love God with all our heart, mind, soul and strength, it is with good reason that He went on to say that the second commandment, by which we are obliged to love our neighbor, is like the first: they cannot be separated. They are not two different loves, but a single love. We are bound to love our neighbor with the same love with which we love God, because we should love our neighbor not in and for himself, but in and for God. It is God Himself whom we love in our neighbor.

Great men are they who see that spiritual is stronger than any material force; that thoughts rule the world.

Emerson

IF WE LOOK ABOVE

A rift of blue in the leaden sky,
And the riven clouds with the wind
sweep by,
A glimpse of heaven, a gleam of light,
And the shadowed earth again is
bright;
For, beyond the clouds shines a starry
way
That leads us on to the endless day.

And so at times, when the clouds
hang low,
And the winds of passion around us
blow,
If we look above, the rift of blue
Will let the stars of hope shine
through;
And our darkened path will again
grow fair,
In the light and gladness of faith and
prayer.

Beyond all the toil there is peace and
rest,
In the heart of God, where all are
blest;
Beyond the cares that our hearts now
fill,
There is joy in the thought of the good
God's will.
And to us will come, if we look above,
The needed grace from the source of
love.

Exchange



IN APPRECIATION

I would like to sincerely thank the doctors, nurses and staff of the Sanatorium for their excellent care and kindness to my husband Les. Asbell, who passed away January 24th, 1976. They were also very kind to me when I visited there.

Sincerely,

Bertha M. Asbell (Mrs. Lee Asbell)

OLD TIMERS

We have, or have had, several patients recently who have been "old timers". George S. Joudrey, P.O. Box 116, Bedford, who provided us with some material when he was here a year ago, telling us of his experiences when he was a patient in 1924-25. Another is Chesley D. Redmond, 6289 Payzant Ave., Halifax, who was here for several months in 1920 when many of the military patients were housed under canvas. Mr. Redmond showed me a copy of a letter written by his father, on G.A. Redmond and Son letterhead, advising Dr. Miller that Chesley would proceed to the Sanatorium on September 17, 1920. Mrs. Florence (Melbourne) Acker, 4 Lexington Drive, New Minas, who passed away on February 20, had also been a patient a number of years ago.

We recently heard of the death of Mrs. Laura Elizabeth Johnson who had been admitted to the San in June 1970 at the age of 92 and remained for one year.

Two of our subscribers, both former patients, who have recently passed away, are Mrs. W.J. (Elizabeth) Ross, 14 Hillcrest St., Antigonish; and Leonard Patriquin, 836 Summer St., New Glasgow.

On to more cheerful topics, we had a note from Steve Mullen, written Feb. 9, from Yarmouth, commenting on the devastating storm of the previous week. They were without power from 4 p.m. on Monday until around noon on Tuesday, on Wednesday from 4 a.m. until just after dinner time, and on Thursday in the early afternoon until that evening. He closes with the encouraging words, "I am still breathing!"

John Henry MacKinnon, 59 Bomber Drive, Truro, asks us to pass along his best regards to all who

remember him, and says that he is still "up to my neck in leather work".

Here is a renewal from Zeno MacDonald, R.R. 3 Arisaig, and although he doesn't mention it, he is probably still busy with craft work as well.

We have a renewal from Lauchie MacKinnon, Lock Ness St., Inverness, with the comment that he is glad to hear that all is well at the hospital.

We have renewals from Mrs. John Malcolm, Baddeck; Mrs. Pearl Penny, Florence; Miss Margaret Saxton, 2490 Armcrescent West, Halifax; Allan Wood, R.R. 2 Pictou; and Mrs. Charles Settle, 943 Cole Harbour Rd., Dartmouth.

We have a renewal for two years from Mrs. Andrew Doherty, R.R. 2 Baddeck, with a contribution to the Jubilee Fund (which will be shown in the next report). This is in memory of her husband who cured at the San from 1943-48. She writes, "I will always have nice memories of the San as a patient and, later, as a private-duty nurse. I look forward to receiving Health Rays and keeping in touch".

Mrs. Joseph D. MacKenzie, R.R. 1 North Sydney, comments that she is glad that, even with the changes taking place, we are carrying on much as before.

William A. Hines, R.R. 1 Porter's Lake, says that he is remaining well and has words of appreciation for the eight months spent here in '71, and special thanks to Dr. Holden and Dr. Quinlan.

We have a renewal for three years from Mrs. Agnes Melanson, R.R. 3 Middleton. (Her husband, the late Joseph J. Melanson, was a former patient).

We have renewals from Mrs. Weldon (Ginny Allen) Atkinson, Kentville; Mrs. Anna C. McCarthy,

(continued on Page 13)

OLD TIMERS

(continued from Page 12)

56 Normandy Ave., Truro (for 2 years); James V. Jefferson, R.R. 2 Wilmot Station; Miss Frances Gates, 1011 Jones Road, New Minas; Mrs. Laurence Forsythe, Middleton; and Jerome B. Leopold, R.R. 2 New Ross.

A note from Mrs. Ina Williams tells us that she is still taking care of an elderly lady in Shelburne. She wishes to send her best wishes to those who remember her. "Best regards to all the Nurses and Staff at the "San". I certainly enjoyed my time there and had wonderful care. They certainly are dedicated Doctors, Nurses and Staff. Best regards to everyone".

Chesley Spracklin, Sunrise Manor, 2406 Gottingen St., Halifax, writes, "I enjoy the magazines very much, which I have been getting down through the many years. I was a patient at the San in 1927 and again in 1952. I was somewhat sorry to see the name changed but glad the Health Rays magazine is to be continued. Best wishes".

Mrs. Carl (Marguerite) Spidle, R.R. 1 Barss Corner, says that Health Rays is enjoyed by herself, her husband, and her sister and her husband - which is very good to hear. She writes, "Wishing you all health and happiness at the hospital in 1976, in return for all the help you give to so many patients who come there for help".

Gerald Uloth, Cole Harbour, Guys. Co., writes, "My health has been wonderful since I came back home from the San. My best wishes to all the patients and staff members".

We have renewals from Miss Beulah Trask, Switchboard Operator; Miss Eleanor MacQuarrie, R.N.; Mrs. Joan Fox, R.N.; Miss Sadie Barkhouse, C.N.A.; Miss Myra McIvor, former Canteen Manager; and her neighbors from Prospect Street, Mrs. Ronald Miller, and Miss Lois Porter (who was secretary to the

Superintendent until her retirement in the mid 1950's).

We have a renewal from Mrs. Carmen Collins, R.R. 1 Aylesford; and a note from Anne-Marie which reads, "Wilda Marcotte of Tatamagouche was spending a few days with Beulah Trask. She visited the Miller Hospital and was quite amazed at all the changes. She said that it made her feel like a real old-timer when she saw where all the buildings had been demolished. She still works at the Tatamagouche hospital and looks very well".

From the Halifax Infirmary H.I. Lites we see that Donald E. Silver is Assistant Director of Hospital Services at the Fisherman's Memorial Hospital in Lunenburg. He was the only male graduate of the Halifax Infirmary School for Medical Records Librarians, having graduated in 1965. While at the San from June 1960 to Feb. 1963 he completed his high school studies and successfully wrote Provincial Examinations. This was following an interesting and varied career prior to coming to the San.

STRONG THINGS

Roy Z. Kemp

True faith will never dim
 Whatever load it bears,
 But carries on and waits
 The answers to its prayers.

And hope will never die
 But faces with good cheer
 The task allotted it,
 Without a doubt or fear.

And love or charity,
 For each one is the same,
 Will never weaken when
 It's given in his name.

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Ins And Outs



MILLER HOSPITAL ADMISSIONS

JANUARY 1 to 31, 1976

JOHN DANIEL PETERS, Hammonds Plains; RONALD SPURGEON PRATT Upper Stewiacke; STAFFORD AVERY SANFORD, Neily Crescent, Greenwood; FREDERICK HANDLEY SAWLER, R.R. 1 Kentville; VINCENT EARL GAUL, New Albany, R.R. 3 Middleton; MRS. AUDREY RUBY AMERO, Waterville; MRS. MARY ANNE LONG, R.R. 2 Wolfville; JAMES CALVIN MILLER, Kennetcook; JAMES EDWIN LARDER, R.R. 2 New Ross; LAWRENCE ARTHUR WAGSTAFF, Harbourville, R.R. 5 Berwick; BURLIN WELLINGTON SWEET, R.R. 2 Berwick; THOMAS ALFRED CARRIGAN, Box 342, Antigonish; ELROY WILLIAM HILL, Jr., 149½ McKittrick Road, Kentville; KENNETH DAWSON SPIDLE, Prince St., Lunenburg; ALLAN EDWARD CROWE, Central Onslow, Col. Co.; WILLIAM JOSEPH DAMERY, 27 West Pleasant St., Amherst; MRS. MILDRED WINNIFRED MOORE, 16 James Street, Kentville; DR. WILLIAM HENRY YOUNG, 14 Dennison Ave., Kentville; FINN ODIN WETTER, Lawrencetown; MRS. OLIVE MARJORIE STAPLES, R.R. 2 Annapolis Royal; MRS. MARIE McMULLEN, Kings Road, Dominion; GEORGE CYRUS BROWN, Steam Mill, R.R. 1

Kentville; MRS. KATHERINE CLARE DeWOLFE, 56 Parkview Rd., Kentville; LESLIE JAMES LEE, R.R. 1 Berwick; MRS. MARY SYLVIA MUISE, 30 Queens Street, Yarmouth; MRS. DOROTHY ALTHEA PIERCE, R.R. 6 Kingston; MRS. MARIE WEBB, Dale Street Extension, Wolfville; GEORGE BAZEL TOWNSEND, Clementsport, R.R. 2 Annapolis Royal; MRS. BERNICE MARION COOPS, 5 Sherbrooke Drive, Halifax; JOHN LEO BARTEAUX, Bridgetown East; VICTOR LeROY BRUCE, Bridgetown; DONALD CLARENCE ISENER, Elmsdale, Hants Co.; WALTER HUNTINGTON TAYLOR, R.R. 1 Wilmot; THOMAS MAYNARD BROOKS, Micmac Reserve, Shubenacadie; ISRAEL JAMES MELANSON Plympton, Digby Co.; ALLEN LEONARD MacLEAN, 2399 Creighton St., Halifax; MERTON GEORGE WHALEN, Salt Springs, R.R. 2 Springhill; JOHN DANIEL MacDONALD, R.R. 2 Antigonish; MRS. LOIS MINNIE FORSYTHE, 188 Prospect St., Kentville; CURTIS MORTON WINTERS, 122 McKittrick Rd., Kentville; EARL ALBERT HAMILTON, Litchfield, R.R. 3 Granville Ferry; MRS. ELVA JEAN DeMONE, New Germany; MARSHALL DOUGLAS MOSHER, Dublin Shore, R.R. 1 LaHave; JOSEPH AMEDEE DUGAS, Grosses Coques, R.R. 1 Church Point; MRS. MARGARET JOHANNA BRIAN, 118 Stannus St., Windsor; EARL HARRIS FORSYTHE, R.R. 1 Cambridge; BRENTON ERNST, Home for the Disabled, Dayspring, Lunenburg Co.; WILLIAM HERBERT ATWOOD, Smithville, Shelburne Co.; EDWARD LEO ST. PETER, Maccan, Cumb. Co.; WILLIAM KENNETH SHARPE, Avonport; DORAN EDWARD LUTZ, Aylesford; MRS. CAROLYN ALTHEA SAUNDERS, Hart Chalet, Windsor; MRS. THERESA JANE WILSACK, 152

Hudson St., Stellarton; STANLEY GUY GATES, R.R. 6 Kingston.

DISCHARGES

January 1 to 31, 1976

MRS. NELLIE VIOLA NAUGLER, Nictaux South, Anna. Co.; BOYD IVAN WHYNOTT, R.R. 3 Middleton; MRS. MADELINE BEATRICE CHASE, Nicholville, R.R. 1 Aylesford; FRANK LEWIS MacKAY, Hemford, R.R. 4 New Germany; GEORGE ALBERT STUART, R.R. 3 Centreville; HAROLD LeROY WEIR, Kingston; OTIS ELROY WOOD, Inglisville, Anna. Co.; STEWART LESLIE ASBELL, Oxford; FINN ODIN WETTER, Box 75 Lawrence-town; MRS. MARY ANNE LONG, Black River R.R. 2 Wolfville; JAMES HENRY FIELDER, 112 High St., Pictou; MRS. VERA MARIE CARTER, Millville, R.R. 1 Aylesford (Expired); MRS. OLIVE MARJORIE STAPLES, Allain River, R.R. 2 Annapolis Royal; JENNIFER CLARE PINKHAM, Coddles Harbour, Guys Co.; HAROLD SAMUEL OXNER, Dublin Shore, R.R. 1 LaHave; VICTOR LeROY BRUCE, 13 Queen St., Bridgetown; AUDREY RUBY AMERO, Bent Road, R.R. 1 Waterville; RAYMOND GAUDET, St. Martin, Digby Co. (Expired); BURLIN WELLINGTON SWEET, Shaw Road, R.R. 2 Berwick; ARTHUR GORDON SANGSTER, Prand Pre; CURTIS MORTON WINTERS, 122 McKittrick Rd., Aldershot; CLYDE NORTHWOOD BROWNLEE, Lockhartville, R.R. 1 Hantsport; GARNET FLETCHER TRIMPER, Commercial St., Middleton; STAFFORD AVERY SANFORD, Greenwood, P.O. Box 12 Auburn; VINCENT EARL GAUL, New Albany, R.R. 3 Middleton; MRS. BERNICE MARION COOPS, 5 Sherbrooke Dr., Halifax; MRS.

MARIE WEBB, Dale Street Extension, Wolfville; MRS. LOIS MINNIE FORSYTHE, 189 Prospect St., Kentville; MRS. RUTH LAUREL BROWN, Clementsvale, Anna. Co.; MRS. MILDRED WINNIFRED MOORE, 16 James St., Kentville; GEORGE LESLIE NEWELL, Plymouth, R.R. 1 Arcadia, Yar. Co.; JOHN LEO BARTEAUX, Bridgetown East (Expired); MRS. MARIE McMULLEN, Kings Road, Dominion; ALLAN EDWARD CROWE, Central Onslow, Col. Co.; EARL HARRIS FORSYTHE, R.R. 1 Cambridge; KENNETH DAWSON SPIDLE, Box 1225, Lunenburg; JAMES EDWIN LARDER, R.R. 2 New Ross; ROBERT ARTHUR MORAN, 4 Applecrest Dr., Kentville; CLARENCE EDWARD COLDWELL, Wilmot Sta.; MARSHALL DOUGLAS MOSHER, R.R. 1 LaHave; MRS. BERNICE AILEEN IRVINE, Box 11, Auburn; MRS. CAROLYN ALTHEA SAUNDERS, Hart Chalet Apts., Windsor; MRS. KATHERINE CLARE DeWOLFE, 56 Parkview Road, Kentville; MRS. BEATRICE ANNIE McNEIL, R.R. 1 Windsor; DAVID DANIEL LOVE, R.R. 1 Clementsvale; MRS. FRANCES MARION BROWN, Box 276, Annapolis Royal; DR. WILLIAM HENRY YOUNG, 14 Dennison Ave., Kentville; BUDD WHITMAN GERTRIDGE, R.R. 1 Wolfville (Expired).

* * * * *

It is rare when injustice or slights patiently borne do not leave the heart at the close of the day filled with marvellous joy and peace.

Gold Dust

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QUOTES WORTH REPEATING

Things are only worth what one makes them worth.

Moliere

The world does not so much require to be informed as to be reminded.

Moore

Silence is one great art of conversation.

Hazlitt

How beautiful a day can be when kindness touches it.

Elliston

Take time to be friendly; it is the road to happiness.

Burns

He who is not prepared today will be less so tomorrow.

Ovid

People who fly into a rage always make a bad landing.

Will Rogers

The great man is he who does not lose his child's heart.

Mencius

Some people would rather be wrong than quiet.

The good you do is not lost though you forget it.

THINK

Harsh words, like chickens, love to stray

But they come home to roost each day

If you have angry words to say . . .
Stop and think!

The world will judge you by your deeds;

They can be flowers, fair, or weeds . .

Before you plant those tiny seeds . . .
Stop and think!

God gave us each a heart for song:
A brain to reason right from wrong . .

So, when temptation gets too strong .

Stop and think!

Nick Kenny

From Poems to Inspire

My mind was ruffled with small cares today,

And I said pettish words, and did not keep

Long suffering patience well, and now I weep

For foolish words I never can unsay.

H.S. Sutton

Accustom yourself to unreasonable-ness and injustice. Abide in peace in the presence of God, who sees all these evils more clearly than you do, and you permits them. Be content with doing with calmness the little which depends upon yourself, and let all else be to you as if it were not.

Francois de la Mothe Penelon

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**THE MILLER HOSPITAL
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F.J. MISENER, M.D., F.C.C.P.	Radiologist
MARIA ROSTOCKA, M.D.	Physician
*G.A. KLOSS M.D., F.C.C.P.	Physician
BARBARA LEITCH, M.D.	Physician

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J.C. CROSSIE, M.D., F.R.C.P. (C)	Pediatrics
T. DOK, M.D., D.O.M.S., D.L.O. (Eng.)	Ophthalmology & Otolaryngology
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*D.H. KIRPATRICK, M.D.	Anaesthesiology
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P.W.S. WATTS, M.D., M.R.C.O.G., F.R.C.S. (C)	Obstetrics & Gynaecology

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MISS EILEEN QUINLAN, B.Sc., P.Dt.	Senior Dietitian
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R. MATHIESON, M.D.	Courtesy Consultant, pathology
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MRS. EDNA MacDOUGAL, R.N.	Director of Nursing
MRS. JOAN CHIASSON.	Dietitian

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Hosp. Chaplain — Rev. William Martell

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Asst. Priest — Rev. Luc Gaudet

SALVATION ARMY

Capt. Sidney Brace

UNITED CHURCH

Minister — Rev. Ian MacDonald
Hosp. Chaplain — Dr. J. Douglas Archibald

The above clergy are constant visitors at The Hospital. Patients wishing a special visit from their clergyman should request it through the nurse-in-charge.

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