

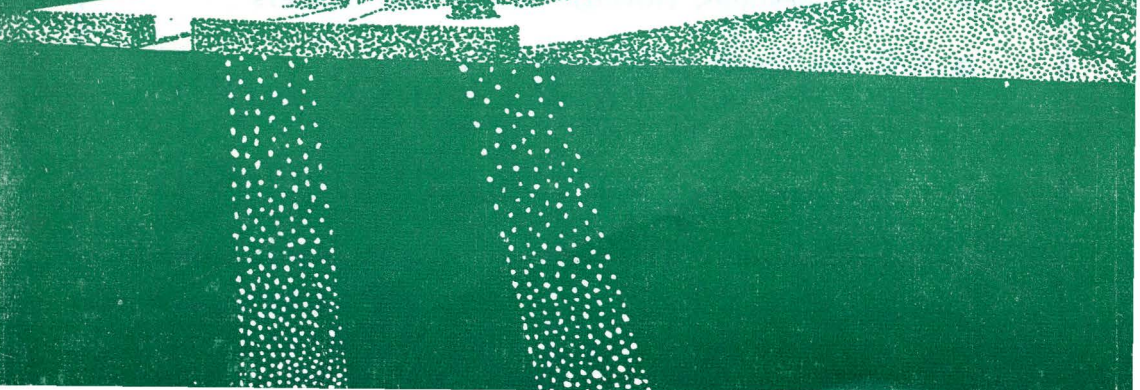
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NOVA SCOTIA SANATORIUM
VOL. 45 SEPTEMBER-OCTOBER, 1964 NO. 9

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DAILY: 3.15 - 4.45 P. M.

DAILY: 7.30 - 8.30 P. M.

Absolutely no visitors permitted during

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

Kentville Church Affiliation

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Sanatorium Chaplain	<i>Rev. J. A. Munroe</i>
Baptist—Minister	<i>Dr. G. N. Hamilton</i>
Assistant	<i>Rev. D. M. Veinotte</i>
Lay Assistant	<i>Lic. David Wilton</i>
Lay Visitor	<i>Mrs. Hants Mosher</i>
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Pentecostal—Minister	<i>Rev. C. N. Slauenwhite</i>
Roman Catholic—Parish Priest	<i>Very Rev. J. H. Durney</i>
Asst. Roman Catholic Priest	<i>Rev. Thomas LeBlanc</i>
Salvation Army	<i>Capt. R. Henderson</i>
United Church—Minister	<i>Rev. K. G. Sullivan</i>
Sanatorium Chaplain	<i>Rev. J. D. MacLeod</i>

The above clergy are constant visitors at the Sanatorium
If you wish to see your clergyman, make your request known
to the nurse in charge.

HEALTH RAYS

A MAGAZINE OF HEALTH AND GOOD CHEER

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VOL. 45

SEPTEMBER-OCTOBER, 1964

No. 9

The Sanatorium Cracker Barrel

J. E. Hiltz, M.D.,

Medical Superintendent



The controversial sanatorium fence has now become a reality. It is hoped that we have not hurt anyone's feelings by having it put up. Our grounds are still "open" as there is no fencing on Exhibition Street from the eastern boundary of our property to the power house entrance. The fence was deemed necessary in order to cut down on unwarranted

traffic encroaching upon the Sanatorium grounds from all sides and leading to the setting of dangerous brush fires, damage to our greenhouse and flower beds and petty annoyances by prowlers around our buildings. It is hoped, too, that we may now be able to keep the periphery of our grounds in more attractive condition for strolling patients on walking exercise. This is a program for the future so please do not expect too much too soon.

* * * *

Sorry about the inconvenience caused our East Infirmary patients due to the remodeling of our bathrooms. That building has now been in operation for thirty-three years so it is not surprising that the fixtures and the piping had to be renewed. We trust that you all agree that the reconditioning was worth the inconvenience.

Miller Hall, too, has taken on a new look with acoustic ceilings which not only make the auditorium and foyer look more attractive but also have improved sound reproduction whether it is the spoken word or moving pictures. Our students and others attending meetings there should notice quite an improvement.

* * * *

Perhaps you think that finding a needle

in a haystack is difficult. Well, it can be a cinch compared to finding and demonstrating the presence of tubercle bacilli in sputum. A small cube of sugar is about one cubic centimetre in size. In order to detect a positive sputum by staining and looking at it through a microscope, there must be at least 100,000 germs in a quantity of sputum the size of a sugar cube. If only 90,000 germs are present, the sputum will probably be reported as "negative". Before we can *culture* the sputum it must be treated with an alkali mixture. This kills over 99 per cent of the germs present. Indeed, less than one in a thousand survives to grow on the culture medium. Even this one will not grow if the culture medium is not sufficiently moist and if it is not kept at just the right temperature in an incubator for three to ten weeks. Is it any wonder, therefore, that sometimes when six specimens of sputum are cultured only one will come up positive—that is, grow on the culture medium? One positive cancels out all negatives. Indeed, to say that sputum is negative is to use an incorrect term. We really mean that tubercle bacilli (the germs of tuberculosis) were "not demonstrated". "N.D." is preferable to "negative" as a descriptive term. This is just by way of explanation in case a few of you were puzzled about positive and negative (N.D.) reports.

Respiratory disease—RD—rank fourth among all causes of death. Tb.—the oldest known respiratory disease — kills more people than any other infectious disease.

Older people respond to tuberculosis drug treatment as well as younger people provided that the strains of the tubercle bacilli are susceptible to the drugs used—and if the older patients take their drugs regularly as prescribed.

In Memoriam — John W. MacLeod

A Tribute by Mrs. Irene T. Spicer (R. N.)
NOVA SCOTIA SANATORIUM

The Chronicle Herald of January 24, 1964, brought us the picture of a strong kind familiar face, "Died in his sleep at the age of eighty-six". How lovely that he should be spared suffering—he who did so much to prevent suffering. In the years of 1911 and 1912 a well bound book of some size CONSUMPTION: ITS CAUSE, PREVENTION AND CURE, with this quotation, "If preventable, why not prevented?" (Edward VII) was placed in over fifty thousand homes in Nova Scotia.

The book was written by George H. Cox, M.D., of New Glasgow, and John W. MacLeod was Business Editor. The 1911 Edition of 16,000 copies was published by the Tri-County Branch of the Anti-Tuberculosis League. The 1912 Edition of 36,000 copies was issued by the Anti-Tuberculosis League of the island of Cape Breton. The books were printed in London by Eyre and Spottiswood Limited, His Majesty's Printers, London.

John W. MacLeod worked his way to England by cattle boat to arrange for the printing and to solicit funds from prominent friends of Nova Scotia in England. He did this twice.

Chapter XI of the book was in the Micmac language. Chapter XII was in Gaelic. The book woke the province to the fact that something could be done about the crippled children in the schools, about the young promising college student sent home to die. Something must be done and many of these books were distributed on foot by John W. MacLeod who was then teaching at St. Francis Xavier. When he was principal of Stellarton High School, Mr. MacLeod made it possible for the youngsters "up the river" to attend his school by train. There is a Gaelic word for the "Head of the River" which is "Braith na h-aimhne". We were known as the "Braith na h-aimhners".

However, after the years and two Great Wars those of us who are living still have not forgotten "John Willie", the wise, kind, good man who inspired us. The young came to him for help to the last day he lived. "The light he leaves behind him lies upon the paths of men."

—(Reprinted From The United Churchman)

February 12, 1964

STELLARTON 1903-1907

AN INTERVIEW WITH JOHN W. MacLEOD
DURING THE SUMMER OF 1963

One does not reach the 87th year of life and continue active in various fields without a certain amount of publicity. My life as operator for the past 47 years of the Greenwood Coal Company Ltd., the publishing, financing and free distribution of the 42000 edition anti-tuberculosis book, "Consumption, its Cause, Prevention and Cure", compiled by the late Dr. George Cox and brought out and distributed with the sympathetic assistance and advice of the late Reverend Monsignor MacPherson of St. Francis Xavier University, have been at one time or another the subject of published interviews. It is, however, that part of my life that was spent in teaching to which I look back as most rewarding. My great pride in and affection for the many young people who were my pupils are among my

best memories. These were of varied abilities yet true to their Scottish ancestry ambitious and anxious to make a success of their lives.

Before leaving to take Mining Engineering at McGill University and subsequent teaching at university level, for eleven years, from 1896 to 1907, I held several teaching posts, at Beech Hill, Brule, Lyons Brook and from 1903 to 1907 at Stellarton, where I was principal of the Stellarton schools.

My memories of my teaching days in rural schools are most pleasant and I recall with pride the very large proportion of my students who went on to take positions in the teaching profession, to hospital training schools and to the universities as well as those who carried on at the home

farms to become scientific farmers like the late Allie MacKay, Scotsburn, and the backbone of the community.

As I recall my years as Principal in Stellarton I had at first a hard task as successor to the late John T. MacLeod, an outstanding teacher. But with the support of the late W. G. Miller, Chairman of the School Board, of my fellow teacher and close friend, James W. Henderson and the good people of Stellarton. I can now look back on those days as among the most satisfying in a long life.

There were in my Stellarton years about 450 pupils enrolled and for the first two years I taught all subjects in Grades IX, X and XI to classes of around 54 in number. The students worked hard and in order to give them every opportunity I regularly kept open class on Saturday morning for any needing extra assistance.

When it came to my notice either by hearsay or through study of the Provincial Examination lists that there were good students in the rural areas outside of Stellarton, it was my custom to go by bicycle for interviews with such in order to induce them to attend Stellarton High School. Several extremely successful careers resulted, to name only one that of the late Mrs. George Finlayson, born Isobel Grant of Springville, who lead the Province in Grade XI with an aggregate of 1076. At that time Miss Grant was only 15 years of age. Later Miss Grant, Gold Medallist from Pictou Academy and a graduate of Dalhousie University, applied in competition for the position as Actuary with the Dominion Government over the signature of I. M. Grant. She was accepted only to learn in those days when "womens rights" were not recognized, that such positions were open to men only. A place in the same Department was found for Miss Grant, however, and subsequently she and her brilliant husband, Mr. George Finlayson, held important posts in the Department of Finance, he as Deputy Minister.

Back in the early 1900's the only way to get about was by horse and buggy, by bicycle and on foot. As Principal in Stellarton it came to my notice that there were many children playing about who should be in school. So I set out on foot and on my own completed a census of all Stellarton children of school age, the first of its kind, I have been told, in Nova Scotia. I found 55 children of all ages who had never attended school. With already crowded conditions in the available classrooms, I do not know just how the Stellarton School Board felt when called on to pro-

vide extra space for what amounted to a whole new class.

Realizing the value of outside reading to my students, I urged the Board of Trustees to set up a school library and before leaving had the satisfaction of seeing the nucleus of a library provided consisting of some of the classics and subscriptions to several of the better magazines. I also collected and had framed about in all 125 pictures of famous Canadians, including all Prime Ministers of Canada up to and including Sir Robert Borden as well as all Premiers of Nova Scotia to date, many notable men from all parts of the Dominion with a wide selection of our own Pictou County stalwarts. I understand that such collections are in great demand for our new Nova Scotia High Schools. My collection I left in the Stellarton Schools.

Perhaps subconsciously forecasting present day condemnation of cigarette smoking as a cause of lung cancer, while in Stellarton I made a survey of the High School students to ascertain the percentage of smokers. When I found the percentage was 16% I recommended to the School Board that the Minors Protection Act be invoked again at those dealers selling cigarettes to minors.

I have mentioned the late W. G. Miller. Never have I met a finer citizen nor one more interested in the betterment of his native town. When it came time for me to make a change and go on to the university, Mr. Miller told me that he had hoped that I would remain on as principal to teach all of his family. This I considered a great compliment. Another old friend, James W. Henderson, who was Vice-Principal during my teaching days in Stellarton, I held in the highest regard. I found him a loyal colleague and excellent teacher and until his death a few years ago we always met with great pleasure to talk over the old days.

To this day I have calls from those whom I call "My Old Students", those who are still living. The fact that after all these years they remember their former teacher is a matter of great satisfaction to me. The people of Stellarton were of the fine old Pictou County stock and I am proud to have had the opportunity to serve them as their School Principal for a period of four years; I recall their kindness and courtesy with gratitude.

(Health Rays take pride in publishing belatedly this interview with one, now passed to his reward, who did so much for the tuberculosis movement in the early 1900's).
Ed.

"The Little Red" Is Moved

Over the weekend I was interested to observe that the Associated Press reported the moving of **The Little Red** at Saranac Lake to new quarters, near the new research centre.

The Little Red was North America's first sanatorium, built three years after Koch had discovered and isolated the tubercle bacillus. The last spike in the CPR was driven in 1885, for those who think in terms of Canadian history. Money to build the hospital was collected by Dr. Edward Livingstone Trudeau, the great pioneer in TB work who was both doctor and patient. His belief that rest and fresh air would bring people back to health (because they brought him back to health) convinced philanthropists that it was worth trying and they contributed the necessary funds.

The Little Red is now a museum. That is why it is being moved and preserved. I visited it some years ago at its original site. A friend was with me. I had explained that I wanted to see the first sanatorium. We went up a path which was overgrown with grass and weeds and arrived at the one-roomed brick building.

"There must be a road farther on," said the friend, "I'm sure we didn't pass one".

She thought, you see, that we were at the wrong place. Gently I broke the news that this was indeed the first sanatorium. It certainly did not look like any sanatorium she had ever seen so it took a bit of explaining.

That one-roomed building, however, had the comforts of home in 1885—that is, it had iron bedsteads, a washstand with pitcher and basin, and a stove in the centre of the room which, wood being plentiful, undoubtedly was effective central heating during the day. I think it was four patients who could be treated there at one time.

The treatment was rest, fresh air and nourishing food. It was going to be quite some time before surgery was to have a part in treatment and 60 years before effective drugs entered the picture.

Most of the patients who came had at least moderately advanced disease and a good many had far advanced, so recovery took time, a great deal of time.

Rest worked. That was the important thing. The news got around slowly by our standards but maybe not slowly by the standards of those days. Sanatoria, often small with room for only a few patients, were built. Then came the large sanatoria such as the one at Saranac Lake replacing the **Little Red** and Muskoka at Gravenhurst. But there were never enough beds in either Canada or the United States. There were always waiting lists until the drugs shortened treatment and shrank the stay in hospital from years to months.

Maybe a day will come when the **Little Red** will be a reminder of a disease that has been eradicated. Maybe!

—Tb. and Not Tb.

Cooperation Please

The Tb. patient who leaves the hospital against medical advice is one of the great problems of tb. eradication today. The sick person gets sicker and meanwhile spreads his germs to other people.

But it isn't easy to stay put in a tb. hospital. Compared to the length of hospital stay for other illnesses, the time in the hospital for the tb. patient is a long one—often months. In spite of everything the hospital can provide to help pass the time, the days go by very slowly sometimes. The tb. patient has too much time to think, and the weight of his illness tends to make him brood.

The least complaint or tone of anxiety from his family will be mullered over and exaggerated out of all proportion. Lack of

any news may have the same effect. Something is wrong. The family isn't getting along without me. The bills aren't getting paid. The children aren't getting proper care. I'd better get out of here and go home and take care of things.

It is vital for all members of the family of a tuberculosis patient to understand their importance to his cure. Community agencies can help them through their other domestic difficulties. The family can keep the patient up to date on family news that will not depress him and include him in family discussions on matters which will not upset him. They can help him by cheerful and confident acceptance of the fact that he or she must stay in the hospital until the doctor says it's okay to leave.

The Patients In Manitoba—One-Third Were Under 19 Years

While it is true that tuberculosis is gradually increasing among the older segments of our population, it is wrong to conclude that this infectious disease no longer presents a serious threat to young people.

From the Sanatorium Board's annual reports and from statistics recently given to us by the admitting office at the Central Tuberculosis Clinic, the News Bulletin has turned up some rather interesting figures.

For example, on April 23 there were sixty patients undergoing treatment for tuberculosis at the Central Tuberculosis Clinic. Twenty, or one-third of these patients, were nineteen years of age and younger.

Most of these youngsters were whites (largely from Metropolitan Winnipeg) only a few were Treaty Indians or Metis. Some had been in the clinic for as long as six months. Not all had pulmonary tuberculosis; a number, for example, had pleurisy with effusion, and two others had tuberculosis of the spine. One of the two babies had Tb. meningitis.

The majority of the young patients were referred to the clinic by their doctors or a hospital, or they had come to the clinic for routine examinations as tuberculosis contacts. Two or three were picked up by the Board's Industrial or school surveys.

1963 Admissions:

According to the annual report of Medical Director Dr. E. L. Ross, there were 433 patients occupying beds in the Manitoba sanatoria at the end of last year. Of these 170 were occupied by children.

Of the 286 new discoveries of active tuberculosis in Manitoba last year, 175 had their

diagnosis finalized at the Central Tuberculosis Clinic.

And of these 175 new discoveries, 50 were patients 19 years of age and under, and 23 were nine years and under. Eighty-one or nearly half, were 29 years of age and under—while 41, or about one-quarter, were 60 years and over.

At Manitoba Sanatorium, where the patient population is 50 per cent Treaty Indian or Eskimo, 31 per cent of the patients on December 31, 1963, were 15 years of age and under. Nineteen per cent were 60 years and over.

At Clearwater Lake Hospital the patient population is predominantly Eskimo. Last year 113 of the 322 admissions were nine years and under, and 221 were below the age of 29. Many of these children and young adults entered the hospital following an outbreak of tuberculosis at Eskimo Point (55 per cent of the children in the settlement were admitted), and 21 of the children admitted to Clearwater in 1963 were picked up at Thicket Portage, Manitoba.

As a final footnote, we point out that out of the 46 new active cases found on the Sanatorium Board's tuberculin and x-ray surveys last year, 29 (or well over half) were 19 years of age and younger. Seventeen of these 29 young people were whites.

The Bulletin does not attempt to draw any conclusions from these figures, except to point out, most strongly, that tuberculosis is still being spread in all segments of the Manitoba population. When young people become infected—indeed, when they break down with disease—the defeat of this insidious disease is still a long way off.

OCTOBER

October turned my maple's leaves to gold;
The most are gone now; here and there one lingers;
Soon these will slip from out the twig's weak hold,
Like coins between a dying miser's fingers.

—T. B. Aldrich.

Insufficient sleep can affect the worker or student seriously. If his work entails driving or the use of machinery the situation could be dangerous. Teenagers and children require more sleep than adults. The average person seems to do best with eight hours sleep each night.

Among the diseases over which medical science has gained much control is diabetes, a disease for which, not so long ago, little hope was held for a normal life for the patient. Today, if the symptoms of diabetes are diagnosed early enough and treatment given, the patient may look forward to an almost normal life. The important thing is early discovery and strict obedience to doctor's orders.

Dept. of Nat. Health & Welfare

The small but painful cut received sometimes when opening food cans should be cleansed and covered with one of the small ready-made dressings, to protect it from infection.

CONFESSION

You will recall, some time ago,
I wrote a poem amusing so,
But by its trend no soul could see,
What God in grace had done for me.

Its message was but gay and light,
And to the world would be delight,
Alas, I had my Lord denied,
Who loved me so and for me died.

Alas, I followed Him afar,
And thus God's work of grace did mar,
Like Peter often brave and stout,
Stood at the door, yet stood without.

I feel I owe my loving Lord
To show His grace in deed and word,
Instead I wrote that poem so gay,
Denied to be a child of day.

Dear friend, allow me please to write,
As I'm indeed a child of light,
And one redeemed by precious blood,
By wondrous grace a child of God.

I pray this big mistake I made
Will soon in gloom and darkness fade,
And trust that by its message none
Be hindered coming to God's Son.

You wonder why this should be so,
And why for life you too should go
To Christ who once Himself did say,
"I am the Truth, the Life, the Way."

So friend, prepare to meet your God,
By simply claiming Jesus' blood,
Christ died for sinners as you see,
And if you're such, He died for thee.

"Eternity", oh let this thought
Forever to your mind be brought,
In heaven or hell, where will it be?
Where will you spend eternity?

Good living isn't what God required,
Although by others much admired,
It's only on redemption ground
A soul, with Christ, in heaven be found.

I trust this message ever new,
Dear friend, will loudly speak to you,
And may you come to Christ today,
You'll praise and worship Him for aye.

—Cathy Bos
Affiliate N. S. San

AUTUMN

The melancholy days have come, the
saddest of the year,
Of wailing winds, and naked woods,
and meadows brown and sear.

—Bryant.

NEWS RELEASE

NOVA SCOTIA SANATORIUM
Kentville, Nova Scotia

Mr. Hugh Thompson Cook of Truro, who was discharged from the Nova Scotia Sanatorium in March of this year, recently dropped in to thank Dr. Hiltz and the medical staff for their part in returning him to health, and Mr. Barrett and the rehabilitation department for their assistance in his start in a new career. For many patients with tuberculosis, convalescence is often fraught with anxiety concerning their ability to return to their former occupation on discharge. Hugh Cook solved his problem with the help of the Rehabilitation Division of the Department of Public Health. He has recently graduated from the Reisch American School of Auctioneering in Mason City, Iowa, and is the proud possessor of a certificate for Auctioneering in General Sales, Livestock Judging, Voice and Oratory.

Mr. Cook was a patient at the Sanatorium from July, 1962, to March, 1964 undergoing surgery in September, 1963. His doctors advised him against returning to his former employment as a meat cutter due to the extremes of temperatures encountered in the refrigerators. In searching around for a suitable substitute, he read of the school for auctioneers and approached Mr. Frank G. Wellard, Co-ordinator of Rehabilitation for the Province, to ask if that department would sponsor him. Mr. Cook's previous experience in meat cutting and his interest in meeting the public enabled him to be accepted for training and he left by air on August 2nd to attend the two-week course in Mason City. His complete expenses were looked after by the Rehabilitation Division and he is very grateful to have had this opportunity to become qualified in a new field of endeavour. He hopes to carry on his auctioneering in the Colchester and Pictou County areas, specializing in livestock auctions. He lives at 139 Pictou Road, Truro, with his wife, also a former patient at the Sanatorium, and his three children, Jackie, Pat and Billy. We are sure they will be very proud of their father when he steps on the auction block and calls "going once—going twice . . ."

And see the rivers how they run
Through woods and meads, in shade
and sun,

Sometimes swift, sometimes slow,—
Wave succeeding wave, they go
A various journey to the deep
Like human life to endless sleep!

John Dyer—Grongar Hill

Question Box

Dr. J. J. Quinlan



1. Q: If a person has never had a positive sputum, how long is it necessary to continue drug treatment?

A: The presence or absence of sputum positive for tubercle bacilli is only one of the factors taken into account in the duration of treatment for pulmonary tubercu-

osis. Much, also, will depend on the original extent and type of the disease and the response to treatment as evidenced by the clinical status of the patient and the clearing of the disease as shown by repeated chest x-rays. Nowadays, we feel that the minimum period of treatment for any patient with tuberculosis and receiving the antimicrobial drugs is one year, and for most individuals, two years would be a more correct estimate.

2. Q.: Does Tuberculosis of the skin look like eczema?

A.: Tuberculosis of the skin is extremely rare today. When it does occur it can resemble many other more common conditions, one of which is eczema.

3. Q.: Why do some patients have many negative tests and then come up with a positive one?

A.: The finding of tubercle bacilli in the sputum is frequently a fortuitous occurrence. In many cases, a lot depends on the type of specimen submitted to the laboratory. For exam-

ple, sputum submitted following a good deep cough, particularly in the morning, is much more apt to be positive than a specimen obtained by merely clearing the throat. At any rate, one positive test is of far more significance than hundreds of negative ones.

4. Q.: Why do some patients with positive sputum tests remain strong? Will their disease spread? Can you tell how extensive the tuberculous disease is by sputum tests?

A.: A patient's symptoms of a constitutional nature such as weakness and a lack of a feeling of well being are related to the effect of his tuberculous disease on his body as a whole and are more apt to be present when the tuberculous process is in the acute stage. When the disease becomes chronic his body defences have been at work for some time so that aside from local symptoms, such as cough and expectoration, he may feel completely well. At the same time, the disease process may still be quite active in his lungs and tubercle bacilli may be constantly secreted in his sputum. His lung disease may or may not become more extensive but the chances are that without adequate treatment it sooner or later will spread.

It is impossible to determine the extent of the patient's disease by sputum tests. A person with a very slight lesion may have tubercle bacilli in his sputum, whereas one with extremely extensive disease in both lungs may have negative sputum.

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No. 9

STAFF

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EDITORIAL COMMENT

Here it is Autumn already — we keep wondering what happened to our summer! Probably it is like our vacation — coming, just a bit late.

This year we are combining the September-October issues of Health Rays, which is the general procedure for vacation time. Last year it was the July-August issues; but, we have been waiting for the weather man to smile on us a bit.

To the young folk, and some older folk as well, September means back to school. To the artist and photographer it presents unlimited beauty. It also brings us to our last summer holiday.

October with its shorter days and crisp mornings are a cool reminder that winter is just around the corner. With harvest time, thanksgiving, and hallowe'en we are gently transferred from the temperate to the frigid.

Fall is a rather silent time. The birds no longer sing, the diminutive insects have taken over with their various harmonies. Not being much of a Naturalist, we can distinguish only the songs of a very limited number of insects. Most of us however, can recognize the familiar strains of the locust and cricket.

We have in the Library a very interesting book on insects. From it we learned that there are about 1,400 species of crickets. The tree cricket, which is dark green in colour, produces the most musical of insect sounds. "If moonlight could be heard," wrote Nathaniel Hawthorne, "it would sound like that." Only the males of the crickets, grasshoppers and cicadas sing these loud songs, the young and the females are voiceless. This fact was recognized some 2,400 years ago by the Greek

dramatist Xenarchus, who wrote, "Happy the cicadas' lives, for they have voiceless wives." The common North American tree crickets sing by the thousand in unison and have very musical notes. In some regions of China the crickets are caged for their songs and cricket fighting is a favourite sport.

It is said that man knows more about the moon, billions of miles away, than he does about the insects under his feet. Seems strange doesn't it? But the fact remains that the moon has always been the ultimate goal of man.

LIFE ON A STRYKER

My little home is not very big,
It's only two by six;
It's made of steel and canvas,
There isn't one small brick.

The reason I call it my little home—
I'm in it night and day;
I never go out and walk around
Not much to do you'll say!

When I'm on my back I sleep a lot,
Sometimes I just day-dream—
Of the day when I'll be up around
And won't see this steel frame gleam.

Not everyone has their breakfast in bed,
Or their dinner or supper either,
I shouldn't complain it's not too bad,
This living on a stryker.

—June Atwood
N. S. Sanatorium

Solitude is as needful to the imagination
as society is wholesome for the character.

—Lowell.

A Basis For Personality And Happiness

by J. D. Riley, M.D.

Happiness is that illusive something that we all desire but sometimes find it difficult to attain. Very few of us decide definitely what we want of life and then get it, but the rest of us can accept what we get and use it to attain happiness provided we are unselfish enough to give without hope of material reward. The best reward is the happiness that the privilege of doing something for others brings.

Happiness does not come from fine possessions, a pleasant home, loved relations, kindly friends. These things contribute, but many who have these things are not as happy as others living shabbily, desperately.

Why are you not content? Why does life seem strangely empty—unreal—like a dream which slips through your fingers as you try to grasp it? Why are some people actually happier when poor and struggling than later when the things that they once thought were success have come? It is because there is more happiness in achieving than in possession, that in achieving life has more color because one's feelings are then more wonderful.

We get out of life what we put into it. Life is as vast or petty, as exciting or monotonous, as beautiful or ugly, as noble or wretched, as our own feelings about it.

Life is not what you do, or what you have. Life is only what you feel; and fortunately you can feel what you choose to feel, but nobody else can do this for you. Even your nearest and dearest cannot become a part of it. Life is your own inner secret stream of consciousness for which you alone are

responsible—which you alone enjoy or despise.

Perhaps the reader has tuberculosis. Once you were marching in health and vigor. Sickness was a far-off shadow; then gradually, or perhaps suddenly, illness interfered with your plans and brought you to bed and now you are a horizontal citizen of the sickroom, an unwilling initiate in the fellowship of tuberculosis.

Perhaps your reaction is to rail fretfully against fate, to resent bitterly such untimely interference with life's routine. Yet your illness can confer substantial benefits—and not just in the realm of Job-like piety, either. An enforced holiday in bed blamelessly releases us from a too-busy world, sharpening our mental and spiritual perception, and permits us a clearer perspective of our lives. Often a serious illness is an opportunity to gather dividends and generate energies that mere health cannot bestow. Your illness will of course interfere with your plans and will stop your much needed income which would provide money to buy necessities or luxuries which you and your loved ones could enjoy, but greater than these material things is happiness and personality.

Personality was once regarded as an indefinable something which certain people had and others lacked. Now we have discovered that personality can be developed by training just as the mind can. By personality we mean the extent to which one is able to interest and influence other people.

(Continued on Page 23)

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Chaplain's Corner

Rev. J. A. Munroe

Do you believe that what happens to you matters to God? If so, it makes perhaps more difference to you than you think, in your attitude toward life, peace of mind, and confidence of spirit.

It is quite certain that many people today feel that what happens to them doesn't matter to anybody at all. Nobody is interested in them; nobody cares.

How can a person who feels that he isn't needed and doesn't count come to believe that he is needed and does count? I know no final answer except the Christian answer, which in its simplest expression is this—that every one of us is precious in the sight of God, that for every one of us Christ lived and died and rose again.

One of the great characteristics of Jesus that stands out in the Gospel stories of His life and ministry is His concern for the individual. He taught that the love of God is a love of individuals, love of a particular man here, of a particular woman there, a love for you and a love for me. It is a personal love of you and of me as single persons.

His ministry, we must remember, was not confined to preaching to people in crowds, or marked by healing sick people in groups. It was a ministry extended con-

stantly to individuals as individuals. Christ taught this man; He healed that man; He cheered and encouraged this person; He rebuked and warned that person. And one day He said in words that ring with the clearest note of Gospel truth: "Are not five sparrows sold for two farthings, and not one of them is forgotten before God? But even the very hairs of your head are all numbered. Fear not therefore: ye are of more value than many sparrows."

Recall other vivid phrases from His teaching: "Not a sparrow falleth to the ground without your Father's notice." "If a man have a hundred sheep and one be gone astray, doth he not leave the ninety and nine and go after the one?" "It is not the will of your Father in heaven that one of these little ones should perish." "There is joy in the presence of God over one sinner that repenteth."

We are always persons separately known, separately loved. That is why St. Augustine could say, "God loved every one of us as though there were only one of us to love." That is why St. Paul could say, without any taint of arrogance, "The Son of God loved me and gave Himself for me." The love of God is focused and concentrated in that way upon individuals.

A WORD AND A SMILE

Don't hurry through life with a frown on
your face

And never a moment to spare;

For the World and the smile are always
worthwhile

In a world full of trouble and care.

There are others with burdens as heavy as
yours

Hearts weary with aching and pain,

That are longing to hear just a word of
good cheer,

Will you let them be pleading in vain?

Don't feel that misfortune has singled you
out

And made you her own special prey,

For you may be sure there's no home so
secure

But that trouble will enter some way.

—San-Scan

TUBERCULOSIS AN AIRBORNE DISEASE

The communicability of tuberculosis as an air-borne disease was reemphasized during a recent outbreak in a Tennessee high school. Following the discovery of a far advanced, active case of tuberculosis in a 17-year-old white male pupil, it was found that 31.2 percent of the students were tuberculin positive. Previous tests of tenth grade students in that county has shown less than 3 percent with reactions of 10 millimeters or more. The percentage of reactors increased as association with the index case increased. Indeed, 90 percent of the boy's close school contacts were found to be tuberculin positive.

Since there is an increasing proportion of young people in the population who have never been exposed to tubercle bacillus, the potential for explosive outbreaks of infection and of disease, such as this one, is great.

—North Carolina Health
Bulletin.

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NEWS OF THE NURSING STAFF

We are sorry to report that Miss Made-line Spence, R.N. and Mrs. Kathleen Dakin, R.N., have been patients at the Blanchard Fraser Memorial hospital, also Miss Flora Smith is still absent due to illness. We wish them a speedy recovery and hope that they shall be back with us soon.

Congratulations are in order for Mrs. James Arenburg (nee Beverly Kennedy) on the birth of a son.

Mrs. Joan Fox is back with us temporarily. She is in the physiotherapy department.

A pre-nuptial shower was held in the Nurses Residence for Miss Carol Gaudet, C. N. A. Miss Gaudet plans to be married in the near future.

Our sympathy is extended to Miss Cecile d'Entremont, student nursing assistant, on the death of her father.

Congratulations are extended to Mr. Franklin d'Entremont, who wrote Grade XI English in June and received a mark of 74. Mr. d'Entremont plans to continue his studies and complete his Grade XI. Words of commendation are due also to his teachers, Miss Grace Jones and Mrs. Mary MacKinnon.

We should like to say congratulations to Mrs. Mary MacKinnon, our Radio Operator, and teacher, who successfully completed 1½ courses at Acadia University summer school with a mark of B.

TUBERCLE BACILLI LIKE OLD SOLDIERS

Tuberculosis among older persons, largely older men, is almost entirely due to reactivation of previous disease. Tubercle bacilli, like old soldiers, never die. Unfortunately, neither do they fade away. They sit patiently in old scars—over the years—waiting, waiting for that time when again they may flourish.

Thus, the best prevention of relapse from tuberculosis consists of preventing the original infection. This demands all-out case-finding (more, not less, vigorous as yields diminish), prompt isolation and treatment of infectious cases, and lifetime vigilance, not only over those with x-ray evidence of old tuberculosis, but also over those who are infected—that is, those who react to tuberculin.

Every physician should know whether or not his patients have been infected with tubercle bacilli—not just whether they are ill with tuberculosis, but whether they are tuberculin reactors.

Katherine R. Boucot, M.D.
N.T.A. Bulletin, March, 1964

BOOKS

New additions to the patients library are: "The Last Love" by Thomas B. Costain. This is a very interesting story which portrays Napoleon as a prisoner on the island of St. Helena and how he is befriended by the Botwoods and his affection for the young Betsey Botwood. This is a book of historical significance, it is based on facts and gives a very vivid picture of the once pompous Emperor living a life of humility. It tells of his ingenious attempt to escape and finally the only friends he had, the Botwoods, are forced to leave the island and return to England. We leave Napoleon very ill and feel that he did not long survive after his little Betsey took her departure.

"Rags of Glory" by Stuart Cloete should be the book for those who like war stories. A story of the Boer War, it is painted on the immense canvas of the African veld; where Boers, British soldiers, women and children move over plains and mountains in battle among burning farms. Here we get a glimpse of English leaders—Lord Roberts, Kitchener of Khartoum and Cecil Rhodes; and of their opponents Com Paul Kruger, Borta, DeWet, De la Rey and Smuts. Here is Rudyard Kipling visiting the wounded; Mahatma Gandhi as a stretcher-bearer; Winston Churchill as a war correspondent and Conan Doyle doctoring the wounded in Bleomfontein.

"English Social History" by G. M. Trevelyan (four volumes) takes you back to the days of Chaucer. Volume one, Chaucer's England and the Early Tudors; volume two, The Age of Shakespeare and the Stuart Period; volume three, The Eighteenth Century; volume four, The Nineteenth Century. These volumes contain many pictures and a wealth of knowledge.

Librarian

SEPTEMBER

O sweet September, thy first breezes
bring
The dry leaf's rustle and the squirrel's
laughter,
The cool fresh air whence health and
vigor spring
And promise of exceeding joy here-
after.

—George Arnold.

John Bunyan described tuberculosis as the "captain of the men of death." We are working now to demote the "captain" not merely to a lower grade but out of the ranks entirely.

—Stewart C. Thompson, M.D.

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Old Timers

It took summer nearly three months to make up its mind, but finally it came—the last week of August! We were so conditioned to cold and fog that the heat seemed hard to take. When we dropped around to Anne Marie's office in search of news, it was a treat to see her looking so cool and fresh in her crisp white dress and sandals.

We were given an interesting letter which came to Steve from a favorite Old Timer, Betty Logan McCausland. Betty, who was here in 1951, has since married Gordon McCausland and gone to Massachusetts to live. She writes as follows: "We are spending a few weeks in Newfoundland this summer while Gordon is supervising the installation of a marine railway at Clarenville. He has been here since early June and I flew to Gander three weeks ago to have a visit and see something of Canada's 10th province. Tonight I saw my first squid, but fortunately he did not 'get' me right in the eye. The scenery is rugged and rocky, the lakes and rivers so numerous that it is a fisherman's paradise. The highway from Clarenville to St. John's is a bit of a challenge as it is on the route of Trans-Canada, but when the construction phase is finished it will be a scenic drive. The terrain is so different from anything in

THIS HALF PAGE IS WITH THE
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Nova Scotia, trees quite scrubby, bogs and marshes are plentiful, and there seems to be a little pond or lake to complete the view at each turn of the road. Being a lover of nature I find it all quite interesting, but it will be good to go back to Nova Scotia for a few weeks before we have to return to Massachusetts." Betty closes her letter with her best wishes to all the Old Timers—"Health Rays is like having contact with them again", she says. Thanks, and our very best wishes for health and happiness to you, Betty.

Always happy to record the sound of wedding bells for our Old Timers: this time for one who is distinguishing himself in Latin America, Kevin LeMorvan. Kevin, who was here in 1962, is a graduate of the London School of Economics and of the Coady International Institute, Antigonish. He is a staff member of the Institute and

is at present on special assignment in South America. On May 23 of this year he was married to Elsa Teresa Corredor C., in Merida, Venezuela. On behalf of his friends at the San, we wish them all happiness in the years to come.

Still with the wedding bells—a notice in the newspaper tells of the marriage of William R. Snailham, Halifax, a 1961 patient here. On April 18 he was married to Jane Penelope Wigglesworth. Our best wishes go to this happy couple also.

Back to the days of long ago for news of a 1914 patient—Myrtle Graham, now Mrs. Herman. She came in for a check-up during the summer, and says she has enjoyed good health ever since her five month stay at the San. She and her husband, a retired clergyman, now live at Chester Basin.

Mabel Elliot was a school teacher who came to the San from Paradise, Anna, Co., in 1934. She has now retired and lives in Liverpool with her sister, where she leads a very active life in community affairs, especially church and I.O.D.E. Another Mabel came here five years later from Amherst. Mabel Shipley was in to see Hazel LeFave in August, says she travels a great deal and was just back from Florida at that time. Also in for a visit at the San, was Ethel Benedict, who was here in 1956. She now lives in her new home in Highfield, Hants County.

Back again to the 'thirties, we have news of Winnie Cameron, now Mrs. John Campbell of Glace Bay. Winnie, who was here in 1936, has five children now. She and her family were on a camping holiday in the Valley this summer, and came up to see if there were any old friends still around the San. She was delighted to find several, among them former porchmates Beulah Trask, Peggy MacEachern and Helen Littlewood MacKinnon.

News of an Old Timer who now lives in the great city of New York—Vivian Robinson, now Mrs. Talamini, who was a patient here in 1940. She and her two children come to spend the summer at her old home in Parker's Cove. She says she and the children have spent quite a bit of time taking in the New York Fair, having purchased season tickets, which enables them to go for a few hours, at a time and so cover it at leisure.

Hector MacKean and John Lawrence of the Records Department had a visit from

(Continued on Page 25)

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INS and OUTS

Admissions: N. S. Sanatorium, July 16 to August 16, 1964

Claremont W. Jones, Clark's Harbour, Shelburne Co., N. S.; Roy Aubrey Sparks, Canning, Kings Co., N. S.; Alonzo Hupman, Osburne Harbour, Shelburne Co., N. S.; Roland N. Salter, Ecum Secum, Guys. Co., N. S.; Burton R. Rushton, Glenholme, Col. Co., N. S.; Ralph B. Lohnes, Box 354, Digby, N. S.; Mrs. Alice Kenny, Upper Brookside, Truro, N. S.; Elwood E. Taylor, Victoria Beach, Anna. Co., N. S.; Ralph W. Hill, Havelock, R.R. 2, Weymouth, N. S.; Malcolm Blue, 54 Queen Street, Springhill, N. S.; Mrs. Laura B. Cox, Canning, N. S.; Perry M. Kelly, Wallbrook, Kings Co., N. S.; James F. MacDonald, Harrigan Cove, Halifax Co., N. S.; Laurence P. Chase, R.R. 2, Kentville, N. S.; Robert G. Lake, South Maitland, Hants Co., N. S.; Mrs. Helen C. Banks, Wilmot, Anna. Co., N. S.; Alfred M. Roy, Plympton, Digby Co., N. S.; Miss Patricia L. England, Port Williams, Kings Co., N. S.; Mrs. Christine B. Tanner, R.R. 1, Beechville, Halifax, Co., N. S.; Clarence M. Fraser, 503 High St., New Glasgow, N. S.; Mrs. Helen M. Sylliboy, Micmac, Shubenacadie, Hants Co., N. S.; Charles A. Davidson, Scotch Village, Hants Co., N. S.; Mark G. Mullen, Havelock, Digby Co., N. S.

Discharges, July 16 to August 16, 1964

Mrs. Eunice A. Young, Steam Mill, Kings Co., N. S.; Lawrence M. Spencer, Box 5, Falmouth, Hants Co., N. S.; Mrs. Marjorie V. Roberts, 84 Glenridge Ave., Bridgewater, N. S.; Meril D. Eddy, Eastern Passage, Halifax Co., N. S.; Herman G. Leopold, New Ross, Lunen. Co., N. S.; Helen T. O'Handley, Grand Lake Road, Reserve Mines, N. S.; Bernard C. Swinamer, Western Shore, Lunen. Co., N. S.; Roderick H. MacLellan, Churchville, Pictou Co., N. S.; Michael Chisholm, 25 Dominion St., Truro,

N. S.; Burpee L. Eisnor, Barss Corner, Lunen. Co., N. S.; John E. Moses, 72 Granville St., Bridgetown, N. S.; Lillian A. Cameron, Caribou River, Pictou Co., N. S.; Master Mark B. Mullen, Havelock, Digby Co., to Children's Hospital; James C. Noiles, 17 Main St., Springhill, N. S.; Mrs. Nancy A. Horner, 152 Main St., Yarmouth, N. S.; Mr. Glen W. Kelly, Aylesford, N. S.; Mrs. Eileen F. Robinson, Box 294, 11 Dawson St., Pictou, N. S.; Mrs. Yvonne H. Duncan, Hantsport, Hants Co., N. S.; Mrs. Laura B. Cox, Canning, N. S.; Roland N. Salter, Ecum Secum, Guys. Co., N. S.; Mrs. Catherine M. MacLean, 6 Blackett St., Glace Bay, N. S.; Mrs. Elizabeth Brown, 277 Marsh St., New Glasgow, N. S.; Louis LeBlanc, Box 576, Middleton, N. S.; Edward J. Rudolph, Cambridge, Kings Co., N. S.; Wright R. Howarth, 474 Main St., Kentville, N.S.; Dennis H. Levangie, Lundy, Guys. Co., N. S.; Ralph H. Davison, Box 314, Hantsport, N. S.; James A. Jollimore, Terance Bay, Halifax Co., N. S.; Sharon M. d'Entremont, Lower West Pubnico, Yar. Co., N. S.; Lennie E. Corkum, New Grafton, Queens Co., N. S.; Francois N. Bourque, Slucie Point, Yar. Co., N. S.; Ralph B. Lohnes, Box 354, Digby, N. S.; Thomas H. Clarke, 127 Herett Road, Springhill, N. S.; Mrs. Helen C. Banks, Wilmot, Anna. Co., N. S.

—:o:

Admissions to Point Edward Hospital, July 16 - August 15 inclusive

Gould, Mstr. James Joseph, Membertou Reservation, Sydney, N. S.; Matthews, Miss Martha, Eskasoni, C. B.; Beaton, Mrs. Mary Elizabeth, R.R. 2, Port Hood, Inv. Co., N. S.; Keating, Miss Lillian Jane, 83 Townsend St., Sydney, N. S.; MacDonald, Daniel Angus, R.R. 1, Englishtown, Victoria Co., Sossniski, Mr. John, 170 Victoria Road, Sydney, N. S.; LeBlanc, Mrs. Justina Alvina, Hawker P.O., Richmond Co., N. S.; Chisholm, Mrs. Annie, Margaree Forks, Inverness Co., N. S.; Lewis, Mr. Marshall, River Ryan, New Wat-

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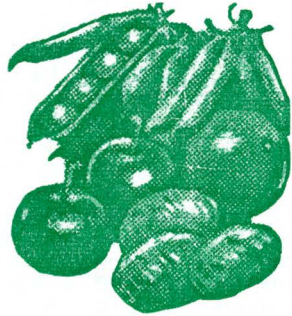
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BASIS FOR PERSONALITY (cont'd.)

ple. This ability to influence other people is made up of habits and skills acquired by practice.

The development of personality we find depends on learning to do an increasing number of things with and for other people. As our personality expands, our happiness also expands. Personality consists of how we feel as a result. Emerson said: "Happiness is a perfume you cannot pour on others without getting a few drops on yourself". Happiness is no more elusive or intangible than is personality. It is not a gift nor an accident; it is something we create. To measure one's personality at the same time measures one's happiness. Both can be raised by effort and practice but only on one condition: the things we do must be such as to please and help others even though we have to sacrifice our own desires in the act. Moreover, these efforts cannot be made on a cash register basis. Only as we use our ingenuity and energies to give happiness to others regardless of our reward may we achieve happiness ourselves.

Many of us are afraid to venture any unusual attention toward people in fear of being misunderstood. Indeed it is amazing how many reasons we can give to justify our habits. Personality and happiness is the determination to form new habits and to embark on new adventures. Of course we shall make mistakes and meet rebuffs until we acquire the necessary skills and finesse, but the person who, because of fear, stops trying new approaches to people, will never expand his understanding or love of people and his happiness, instead of growing, will shrink.

Walking along country roads one cannot but be impressed with the friendliness of rural folk, but in the crowded cities we sometimes see the same persons several times a week for years without learning anything whatever about them. The city dweller often has a limited circle of friends who mean something to him but he loses touch with genus homo, or man as man.

Some pay taxes to support the needy but harden their hearts toward individuals in need. We are all too willing to leave the problem of doing for others to taxpayers, institutions or even to the church instead of looking for an opportunity to render a personal service.

Even in our own families we often fall into a routine and mechanical attitude toward each other. The father, upon his ar-

rival, is often greeted with greater affection by the dog than by his own children. For that matter, he may greet the dog with more enthusiasm than he greets his family. In his spare moments he may be so absorbed in the news of the great world that the news of his family becomes an intrusion. Friendship and understanding in the family depends on personal sacrifice and special attentions just as they do everywhere else.

In recent years most of us have become full of the new social consciousness. We often favor grand schemes which will give the average man a better deal. While we read about the new social order in America, the social order of our personal contacts remains the same. While we acquire new theories of society at large, our habit of indifference toward society at home remains unchanged. Our ideas may have changed but our actions remain stagnant. Our minds have improved but our personality has remained stationary or even deteriorated.

Some make the mistake of confining their exertions only to certain persons thought worth cultivating. Some are interested only in people not for people's sake but for their own sake. Some are not concerned with what they can do for others but with what they can do for themselves. These, instead of pouring out happiness generously, sprinkle drops at carefully chosen points and wonder why these seeds do not bear fruit. These seeds develop and bear fruit bountifully but the fruit is the fruit of selfishness, like unto the seed sown but not recognized by the owner who thought that he sowed seed of altruism and love when he selfishly only attempted to better himself by favouring others who could help him.

Whether our acts of consideration for others be large or small, the principle is the same. The patient or attendant that treats the other like a human being not only creates an area of happiness in the other's day but incidentally receives preferred attention and service which makes living with others more pleasant.

Here is a fundamental study in the art of social intercourse. Here is a religion, not of abstract faith but of human fellowship. Here is a concept of personality in the making. Here is happiness to be had for the giving.

If we were to make the conscious and frequent effort of treating others with con-

(Continued on Page 25)

Just Jesting



Despite his minor ailment, Mr. Gump made things very difficult for the doctors and nurses in the hospital where he was a patient; he was arrogant, crochety and impossible to satisfy. Having completely buffaloed the floor nurses, Mr. Gump was attempting the same tactics on the head nurse.

She listened patiently to his unreasonable requests and petty complaints and quietly agreed with Mr. Gump that he was not getting the care he required. She assured him that this could be easily remedied by having him moved to the fourth floor.

"How does the care on the fourth floor differ from the miserable care I receive right here?" roared Mr. Gump.

The head nurse replied sweetly: "The fourth floor is our Nursery."

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LIMITED

The preacher, hoping to get acquainted with one of the new members of the congregation, knocked on the front door of her home one evening.

"Is that you, Angel?" came the woman's voice from within.

"No," replied the minister, "but I'm from the same department."

Contractor: "How come your sister married such a halfwit?"

Salesman: "Oh, it's only natural. She's such an inveterate bargain hunter that she just couldn't resist anything that was fifty percent off."

"I've never seen such dreamy eyes," he sighed.

"You've never stayed so late before," she complained.

Two men were seated in the lobby of a blood donor station in a city in Arizona. One was an Eastern tourist and the other was an Apache Indian.

After staring for a few minutes, the tourist asked, "Are you a full-blooded Indian?"

"Well no" replied the Apache thoughtfully, "I'm about a pint short."

A cute little student nurse was taking a drivers license test and was accompanied by a state policeman when she drove through a red light.

"Young lady, what does a red light mean to you?" asked the trooper.

Quick as a flash, she answered, "A bedpan."

A young lady found herself for the long weekend with a notoriously strait-laced country family in England. Fearing that the pajamas she wore instead of a nightgown might be considered improper, she carefully hid them every morning when she got up. But one morning at breakfast, she suddenly realized that she had forgotten them, that they were lying brazenly on her bed. Excusing herself, she rushed to her room. The pajamas had disappeared.

While she was feverishly hunting for them, looking vainly through closets and drawers, a dour, elderly maid appeared at the door and surveyed the scene. "If it's the pajamas you're looking for, miss," she said, "I put them back in the young gentleman's room."

For a number of years, I taught in the Blue Ridge Mountain schools of Virginia. Trying always to impress the virtue of honesty upon my students, I required them to give a pledge that they had neither given nor received help on their examinations. One young girl handed in her paper with this pledge on it: "I haven't received no help on this exam, and God knows I couldn't give any."

"It is said that the advent of the auto has increased profanity at least 50 per cent."

"Maybe, but think how it has cut down horse stealing."

Young lady: Hurry up, please, and give me a quart of red oil.

Service station attendant: A quart of red oil?

Young lady: Yes, of course. Can't you see my tail light has gone out?

BASIS FOR PERSONALITY (cont'd.)

sideration, the effects on us and on society as a whole would be amazing. Not only our personalities but the personality of the nation would rise to a much higher level and with it, happiness. Here is the homely road, the human road, probably the only road by which we shall achieve that abundant life which all desire.

Sanatorium Outlook

OLD TIMERS (cont'd.)

Lauchie Campbell. Lauchie, who was here in 1952, is now manager of the Men's Department at Eaton's in Sydney.

And Hugh Cook, who went home from the San. early this year, dropped in to tell his many friends here what he has been doing since he left. We understand that there is an account of Hugh's career to be found elsewhere in this issue, so we shall not go into details here. Suffice to say, it sounded very different and interesting.

Edna Rogers of Heatherton, Antigonish County, came visiting at the San. Anne Marie regrets that she was away and so missed Edna, but friends say she looked very well. And when Anne Marie was home taking in the Acadian Festival she saw Pat Comeau. He is very well, still a busy barber at Saulnierville, Digby County, and wishes to be remembered to all his friends at the San. Another summer visitor here was Doris Thibault, now Mrs. Bud Barr. Doris, who was here in 1957, lives at Digby.

John Hood, who returned home just last May, is now back to part time work with the Department of Immigration, Halifax. He sent some fishing flies to Father Durney. And speaking of that good friend of the San. people, Father Durney, he tells of seeing a few Old Timers when he was in Pictou. He found Kay Bowen, who was here in 1940, feeling fairly well, but having a bit of a struggle with the 'flu bug. He also saw Harold Smith and Nick Pellerine, both 1958 patients, and reports both very well.

INS AND OUTS (cont'd.)

erford, N. S.; Smith, Mrs. Margaret, Eskasoni, C. B.; Bishop, Mrs. Ann Camilla, 37 Forast St., Yarmouth, N. S.; Hawley, Mr. Thomas Eugene, Ingonish Ferry, Victoria Co., N. S.; MacIntyre, Mrs. Rita May, 47 Bell St., Glace Bay, N. S.

Discharges from Point Edward Hospital, July 16 - August 15 inclusive

Aucoin, Mr. Leo Paul, 25 Ellsworth Ave., New Waterford, N. S.; Nearing, Mr. Charles William, 133 Dorchester St., Glace Bay,

N. S.; Benoit, Mr. Joseph William, Afton Station, Antigonish Co., N. S.; Battiste, Mr. Peter Andrew, Barra Head, Rich. Co., N. S.; Gabereau, Miss Mary Juliette, 271 Frederick St., Sydney, N. S.; MacDonald, Mr. John Thomas, Gardiner Mines, C. B.; Meunier, Mr. Raymond Joseph, West Arichat, Rich. Co., N. S.; Sampson, Mr. Frederick E., Lower L'Ardoise, Rich. Co., N. S.; Whitty, Mr. Matthew, Ingonish Beach, Victoria Co., N. S.; Conohan, Mr. John Franklyn, 394 Welton St., Sydney, N. S.; MacEachern, Mr. Donald Angus, Port Hawkesbury, Inv. Co., N. S.; Rose, Miss Ida, 2 Beacon St., North Sydney, N. S.; Gould, Mstr. James, Member-tou Reservation, Sydney, N. S.; Bernard, Mr. Stephen, Nyanza, Victoria Co., N. S.; Bishop, Mrs. Ann Camilla, 37 Forast St., Yarmouth, N. S.; Keating, Miss Lillian, 83 Townsend St., Sydney, N. S.; Chisholm, Mrs. Annie, Margaree Forks, Inv. Co., N. S.; LeBlanc, Mrs. Justine Alvina, Hawker P.O., Richmond Co., N. S.

**BOOZE BAD MEDICINE
MISSISSIPPIANS REPORT**

Well, it's finally happened.

Long out of the running as a snake bite antidote, alcohol has lost face again—this time as therapy for heart patients.

Alcohol was long thought to help persons who had recovered from heart attacks by dilating those arteries which would increase blood flow to the impaired heart muscle.

Not so say two research scientists from Jackson, Mississippi.

Reporting their findings to the scientific sessions of the American Heart Association, the two University of Mississippi Medical Center scientists said that contrary to previous beliefs, alcohol decreases coronary flow and makes the heart work harder.

In their experiments with laboratory animals, the researchers reported using alcohol dosage levels varying from the legal limit allowed for human drivers to "dead drunk."

In all cases, the volume of blood pumped from the heart increased, showing that the heart was working harder, while the muscle received less blood while it was doing more work.

In a footnote, the Mississippi team said that their results were identical whether the alcohol was plain "lab" stuff or bonded bourbon.

Sanatorium Outlook

True merit, like a river, the deeper it is, the less noise it makes.

Three may keep a secret if two of them are dead.

—Franklin.



Pictured above are three senior staff members who retired between May and July from the Nova Scotia Sanatorium Staff. Left to right: Gerald D. Moran, Chief Engineer, after 45 years service; Fred F. Graham, Administrative Assistant, after 12 years service, and Pat B. McEvoy, Head Storekeeper, after 22 years service.

IF

If all the people were clever
 And all clever people were good,
 The world would be nicer than
 Ever we thought it could!
 But, alas! It is seldom or never
 The two hit it off as they should;
 The good are so hard on the clever
 And the clever so rude to the good.

—Sunshine Magazine.

A successful baby sitter should be well versed in the procedure necessary in case of emergency. She should have the phone numbers of the place where parents may be reached, police and fire departments, the baby's doctor and a friendly neighbour. She should receive careful instructions as to the baby's feeding. All exits should be shown to her so that she could save the children and herself in case of fire.

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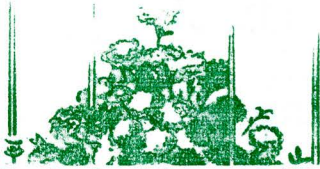
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