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# THE HOSPITAL WORLD

Vol. XII (XXIII) Toronto, November, 1917

No. 5

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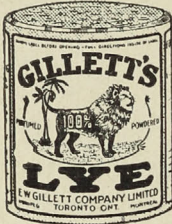
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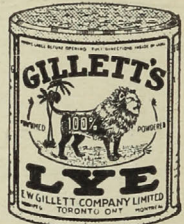
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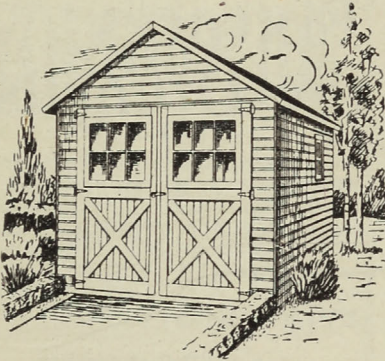
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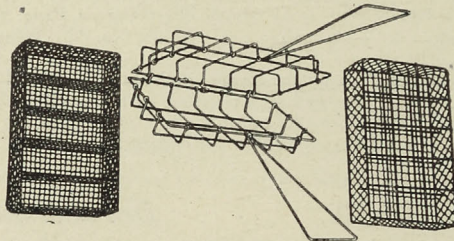
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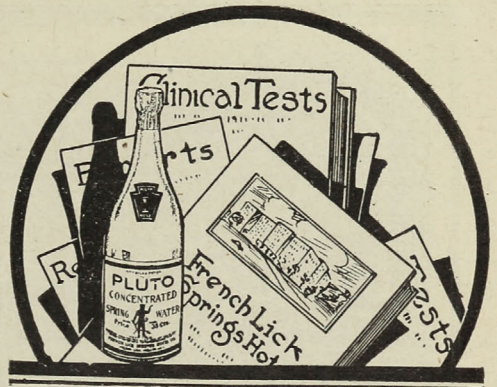
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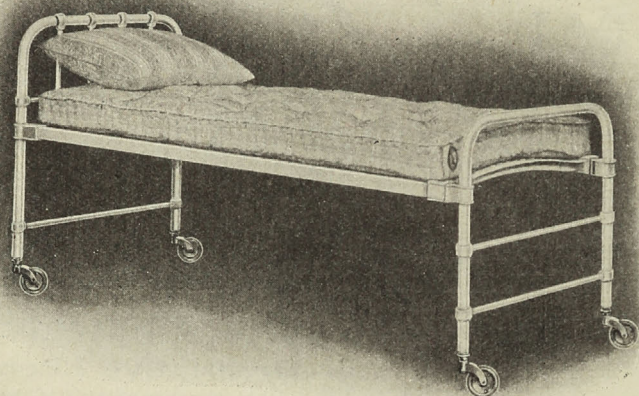
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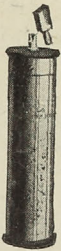
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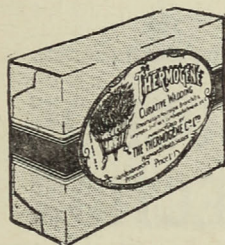
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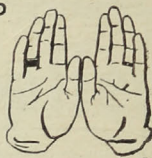
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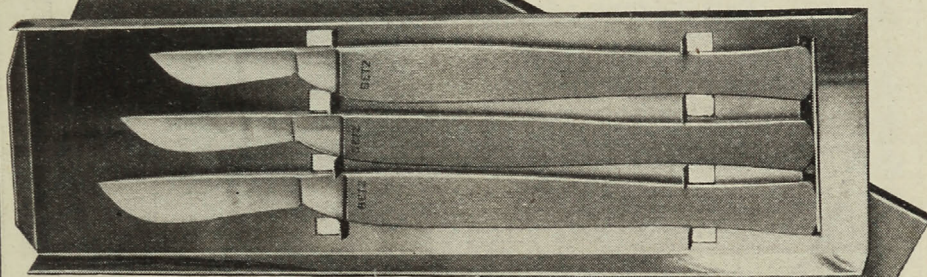
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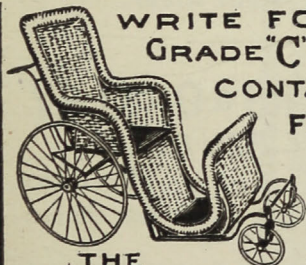


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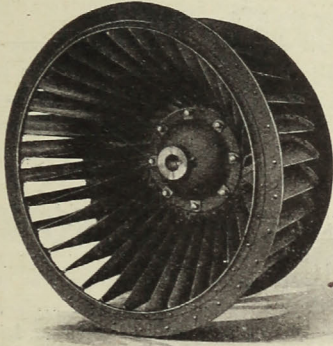
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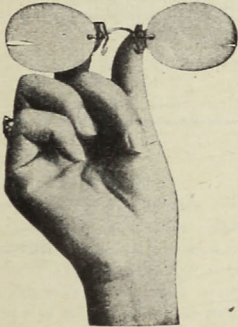
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# The Hospital World

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## Editorials

### HOSPITALS AND HARD TIMES

ECONOMY does not mean parsimony; and what, at first glance, may seem extravagance, may be economy.

The economic pendulum is liable to swing either way too far.

A lack of necessary food or equipment in a hospital is a false economy, if the patient suffers, *i.e.*, if his recovery is delayed or made impossible by such lack.

For many years the people of this continent have borne the reputation of being very extravagant, and we believe deservedly so.

But with the advent of the present world-wide war and more particularly since the date the Americans participated in it, there has been a tendency among hospitals, and allied institutions, not only to prevent waste, but also to restrict expenditure. While this is all very laudable, there is a tendency to over-economize along this line.

The best modern antiseptics and best medicaments in general, in the long run, are the cheapest. X-ray apparatus are a *sine qua non* in every hospital of any consequence. Sterilizers—high-pressure—are, in our opinion, an absolute necessity if perfect surgical work is to be done. And so on in regard to articles of hospital equipment. Hospitals must not stop buying.

And every institution must do its share in creating an optimistic spirit—not only in respect to the good day coming, but also for the good day *now*. *Carpe diem*. Faith, confidence, enterprise, cheerfulness, and boldness will win the day. Nothing succeeds like success.

The hospital is no place for downheartedness, passivity, fear, distrust, lack of initiative. So if, after due consideration, a determination is arrived at to give an efficient service, no matter what the cost, the wherewithal will be provided.

So, in spite of the presence of the shadow of war, let us buy the necessary best for the proper carrying on of our great work of assisting in the restoration of the sick and wounded to high health. And by so doing we shall be practising the best economy. Let us remember the proverb with reference to the blessedness of the man who scattereth compared with him who withholdeth. The liberal soul shall be made fat.

## Canadian Hospitals

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### A MONTREALER ON HIS VISIT TO THE MOUNTAIN SANATORIUM

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"WE are proud of our Mount Royal," a Montrealer writes, after a visit to Hamilton, "but yours has one royal distinction that ours has not achieved—a crown.

"We send our own people up to the mountain when they are dead, and bury them in the crater of a burnt-out volcano. You send your people up the mountain to find new life, and to come back and enjoy it. Climb our mountain, and you find a cemetery. Climb yours, and you find a sanatorium. That is your mountain's crown of glory.

"What I noticed up there first, after the charming scenery and magnificent air, was the spirit of cheerfulness and hope among the patients.

"Of course, it is well known that tuberculosis often has a deceiving effect on its victims, making them feel better than they really are. And that is a great danger.

"Take the soldiers, particularly. They naturally want to get back to their families, and to work, as soon as possible. So they are tempted to quit the sanatorium before they ought, and to undertake more strenuous work than is safe for them. Even when a man is cured—that is, when the germs of the disease have been conquered and apparently paralyzed—the lungs are not so powerful as before they were attacked. If the body is overtaxed, the germs may awake from their torpor and make another attack.

#### FORTIFYING AGAINST A COUNTER-ATTACK.

"The Military Hospitals Commission evidently realizes this, and does all it possibly can to see that every one of the tuberculous soldiers under its care takes the full treatment required by his particular case, and also to fortify him by knowledge against the very grave, though unseen, dangers that will surround him on his return to civil life.

“Just as the soldiers after enlistment not only have their bodies trained by exercise for the hardships of a campaign, but also have their minds instructed in the arts of modern war—so these men attacked by the ‘white plague’ not only have their bodies freed from its fatal grip, but their minds instructed and fore-armed, with all the knowledge requisite to prevent another attack, as well as to avoid the possible infection of others by their unconscious acts.

“And the cheerfulness evident in your Mountain Sanatorium is based on solid grounds of hope, not on any delusion.

#### MUST COMBINE REST AND WORK.

“One of the most hopeful signs I notice is that the men have got something to do. Rest is essential, but it must be rest of mind as well as body. In fact, except in cases of extreme weakness, lying still in bed for long periods without any occupation creates unrest of mind, and largely destroys the good effect of rest of body.

“We smile at the idea of embroidery as an occupation for men—as we smiled at the idea of plowing as an occupation for women. But the war has cleared our mental vision and upset many of our old ideas. I have just seen a moving picture of English women engaged in a plowing competition—with walking plows, too. Women who have exchanged the needle for the plow are all the better for it; and these men in your Mountain Sanatorium, forced to give up the plow and other weighty implements, are all the better for taking to the needle.

#### GIVE CIVILIANS THE SAME CHANCE.

“More than 800 men of the Canadian Expeditionary Force, in a total of 7,000 invalids now being cared for by the Military Hospitals Commission, are being treated for tuberculosis. This doubtless got a first lodgment in them during childhood. It has been stimulated to activity by the unaccustomed conditions of military life; but it would very likely have become active in any case, sooner or later, in civilian life. In such a case, it would have had less chance of prompt discovery, and certainly much less chance of thorough and successful treatment.

“With this effective organization of treatment for military consumptives before our eyes, it will be absolutely inexcusable

if the country fails to organize an equally efficient campaign against the 'white plague' among our people as a whole.

"The gain in health and wealth to the country would be simply enormous,' as Lord Shaughnessy was quoted as saying a few weeks ago. 'As many Canadians have been killed at home by tuberculosis since the war began as have been killed by the war itself. Yet it is an entirely preventable disease. If we stop its ravages we shall more than make up for the ravages of the war.'

"We must never forget that these soldier patients at the Mountain Sanatorium, and in the eighteen other sanatoria used by the Military Hospitals Commission, will themselves be civilians again in a few weeks or months. Instead of being a source of infection and danger, as they would have been without the treatment they are now receiving, their return to civil life will be an actual gain to the community; for, by preaching what they have practised, they can do much to rouse us from our lethargy and start a vigorous offensive against this ravaging foe."

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### SANATORIA FOR RETURNED SOLDIERS

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A CONFERENCE of medical officers in charge of sanatoria in which returned soldiers are undergoing treatment took place at Ottawa a few weeks ago. The meeting was presided over by Dr. F. J. Shepherd, of Montreal, and among those present were Sir James Loughheed, President of the Military Hospitals Commission, and Lieutenant-Colonel Thompson, M.P., chief medical officer of the Commission.

The conference was of particular interest in that a number of points came up for consideration concerning the methods of administration and treatment in vogue in the different institutions. A series of questions upon these subjects had previously been submitted to the officers in charge of the various sanatoria by Lieutenant-Colonel Thompson and these, with the replies, formed the basis of discussion. It was adopted some time ago as the policy of the Hospitals Commission that treatment should be given in the sanatoria under its direction to all tuberculous



soldiers, whether they had been overseas or not, and a large percentage of the cases treated have not been across the water. It was stated that about 1,200 patients had already passed through the institutions and that about 800 were at the time undergoing treatment.

An advisory committee was appointed to assist the Military Hospitals Commission in its work in connection with tuberculous soldiers. The members of this committee are Captain J. D. Byers, of Ste. Agathe; Dr. C. D. Parfitt, of Calydor Sanitarium, Gravenhurst, and Dr. J. H. Elliott, of Toronto.

A good deal of attention was given to a discussion of some of the difficulties encountered in enforcing discipline. It was decided that in cases where a soldier had refused treatment and had signed a form releasing the Government of responsibility towards him, but later had returned and requested treatment, he should be allowed to reattest and should receive the usual pay and allowances. It was considered inadvisable to send men who had refused treatment and been granted total disability pensions to civilian sanatoria at the expense of the Commission—a practice that had been followed in one or two cases—since the total disability pension amounted to more than the pay, and were this known to the men many of them would probably take advantage of it. It has been found that, as a rule, difficulties arise when officers and men are treated together, and it was recommended, therefore, that a special sanatorium for officers should be provided. It was also recommended that a central institution should be established for chronic cases of tuberculosis, as they filled up the sanatoria and occupied space that should be available for curable patients. In the case of incorrigibles, it was thought that the best way to deal with them was to send them to a detention sanatorium where discipline could be enforced more strictly.

Some discussion arose as to the number of patients that could be treated by one medical officer. It was agreed that no doctor should be expected to attend to more than fifty patients, and that every additional forty patients, or less, necessitated the services of another medical officer. This suggestion was made, however, on the assumption that the physician would be responsible for the medical treatment only and that efficient persons would be appointed to look after other departments.

It has been customary for the medical boards at Quebec to recommend tuberculous soldiers for six months' sanatorium treatment. This has led the men to expect to be cured at the end of the time stated, and in many cases it has been difficult to control them and to make them understand that they are not sufficiently cured to return to their homes. It would be better, therefore, if no definite time were mentioned. Another point which led to discussion was whether or not a tuberculous soldier should be permitted to go home for a short furlough before entering a sanatorium. The general opinion was that he should be allowed to visit his people as, in the majority of cases, treatment had already been given in England and the disease was probably quiescent and the danger of spreading infection not great. Moreover, if the permission was not given, the man became restive and discontented, and would probably refuse to go to the sanatorium at all. As to the question of holiday leave, it was deemed advisable to grant leave, but not at festive seasons. At such times the patients were tempted to eat and drink too much, and at one institution where leave had been granted at Christmas time every one of the patients suffered a relapse. If the reasons for not granting leave at holiday time were carefully explained to the men, Captain Byers thought there would be no difficulty. Last year he allowed his patients to go home between December 5th and 20th instead of at Christmas. A resolution was moved by Captain Byers, and adopted unanimously by the conference, that it be made a penal offence for any one to supply a tuberculous soldier with intoxicating drink.

The value of occupation was emphasized particularly. Captain Byers said that since vocational training had been instituted at Ste. Agathe, the men had been happier and more amenable to discipline and had made more rapid improvement. They ceased to brood over their troubles when they had something to do, and even those who could not sit up were able to do fancy work. They got up little exhibitions of their work when friends came to see them, and became so interested that they forgot everything else.

Other recommendations made at the Conference were, that X-ray equipment be installed in sanatoria whenever possible, that the number of beds in one institution be limited to 150 or 200, and that a specialist in diseases of the lungs be appointed to all medical boards.

## SOCIAL SERVICE AT THE TORONTO GENERAL HOSPITAL

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A NEW conception of service to mankind is nowhere more strikingly evidenced than in a hospital. Here medical science not only cures human ills but, with its new arm of social service, seeks to solve community problems by making an intensive study of those evils that are the underlying causes of disease and untimely death.

What are the community problems that are brought to a hospital to be solved? Those of the insane, the feeble-minded, those suffering from venereal diseases, occupational diseases, industrial accidents, the unmarried mothers and other social cankers. How many of all these ills might be prevented if we had an enlightened public and a social conscience? Eventually state medicine will take up these problems energetically, but in the meantime the hospital, in its private capacity, is doing its best to awaken public interest and create a broader knowledge.

In three years at the Psychiatric Clinic over 2,498 people have been examined, 491 of whom were insane and 1,835 feeble-minded. Only 255 of these have been placed in institutions. Many of the remainder figure continually in Juvenile Court, Police Court, the Jail Farm, the Mercer, the Haven, the rescue homes, the hospitals and sanatoria, to the detriment of these institutions and to their own hurt. A farm colony suited to their needs could soon be self-supporting, and we would be doing them the greatest service by guarding these individuals from the results of their anti-social acts.

In two and a half years there have been 351 babies illegitimately born in the Burnside Hospital. What is there in store for these children? What duty does the city owe to these moral and mentally defective mothers? What about the moral fibre of the unknown fathers, with their evaded responsibilities? When will we have laws that will protect the weaker ones among us?

Finally, there is the problem of venereal disease. In the Out-patient Department since December, 1916, there have been treated in the special treatment clinic for syphilis 593 patients

suffering from this disease alone, and the dangers from gonorrhoea are as great, if not greater.

These specified problems form a vicious circle. The insane, the feeble-minded and the moral imbecile create venereal disease and illegitimacy, and they in turn produce feeble-mindedness and insanity. With this knowledge given to the public by the hospital, through its social service department, all social agencies will be capable of more intelligent action. The clergy must have a better understanding of their people, the teachers of their pupils in the school, the lawyers and the judges of their clients, the merchants and manufacturers of their employees, the social workers and the settlement workers of the unfit in their midst. When all these appreciate more fully the underlying causes of poverty and crime, as does the hospital social worker, then the propaganda for social betterment will not lack support.

Our conception of social service is not merely that of curing diseases or giving relief in poverty, but rather educating the normal to a higher sense of responsibility to himself and his neighbor, and protecting the abnormal against himself and the unmoral and immoral forces that surround him. In Canada, with its boundless opportunities, its open spaces, there should be little sickness, and people should be taught that all preventable disease is little less than a crime against society.

The Social Service Department of the Toronto General Hospital, with its knowledge and statistics, stands with helping hands outstretched in the propaganda for the social betterment of humanity.

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### CORNER-STONE LAID OF WOMEN'S COLLEGE HOSPITAL, TORONTO

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WITH the foundation of the new wing as a platform for the speakers, and a green lawn for the accommodation of the audience, a ceremony of considerable significance took place at the Women's College Hospital, 125 Rusholme Road, Toronto, on September 19th, when Lady Eaton laid the corner-stone of a new wing which is looked upon as merely a nucleus for much larger developments.

Mrs. A. O. Rutherford, President of the Hospital Board, presided. She read very kind and encouraging letters from Lady Hendrie and Mayor Church, and also gave a short outline of the history of the hospital and dispensary since the vision of its possibilities first came to a woman medical student, now Dr. E. L. Skinner Gordon. Only two years ago in July the present hospital was opened. In two months it was full to the doors, and now it is full all the time and the superintendent has given up trying to count those who have to be turned away.

The campaign fund for extending the hospital, inaugurated in May, 1916, is still open, Mrs. Rutherford said, and the total amount promised and given is \$45,396.35. Of this, \$13,951.00 has been paid out on the mortgage, for alterations to the present hospital, furnishings, etc. The cost of the wing now under construction is estimated at \$20,000.00.

Dr. Minerva Reid told of the hospital's vision of a building to cost \$200,000, a building which should be a monument to the untiring and unselfish efforts of the Chief of Pediatrics, Dr. Skinner Gordon.

Dr. Helen MacMurchy also spoke very encouragingly of the future of this work of women for women.

Mrs. A. M. Huestis then deposited in the corner-stone a box containing a short history of the work of the hospital and dispensary from 1896 to 1917, the current issues of Toronto's six daily papers, a Confederation stamp, coins of 1917, etc.

Dr. Skinner Gordon presented Lady Eaton with a silver trowel, the gift of Ryrie Brothers, referring as she did so to the loss many present felt in the death of Mr. Harry Ryrie.

"What strikes me so forcibly about this work," said Lady Eaton, "is that it has been a work of faith. We are told that he who has faith as a grain of mustard seed can remove mountains, and Dr. Skinner Gordon has much more faith than that. We are told, too, that faith without works is dead, and Dr. Gordon is certainly a worker, too."

Lady Eaton also read a letter from Miss McCormick's trustees, enclosing a gift of \$1,000, and she announced another promise of \$5,000.

Then, with the presentation trowel, she spread the mortar, with a mallet hammered the stone down, and declared: "In the

faith of Jesus Christ I lay this corner-stone, and I pronounce it well and truly laid."

Archdeacon Cody completed the ceremony by reading the prayer for the occasion.

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## QUEBEC RECEIVES HER FIRST HOSPITAL SHIP

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THE great Discharge Depot of the Military Hospitals Commission at Quebec, where accommodation has been arranged for 2,000 disabled men and soldiers sit down in groups of 600 to eat, received its first hospital transport direct from England recently.

For several months it has been caring for men who came from Halifax by train to be discharged and distributed to the various convalescent homes and hospitals of the Commission across the country, but this was the first ship which landed at her own wharf.

The whole organization works like a clock under the management of Col. Guy Mariott, the officer commanding, and is undoubtedly unsurpassed for efficiency by any institution in the country. Every possible provision is made for the soldier's care and comfort and the praise of the men sent on their way across the country from this centre has met Capt. T. W. Jones, the Y.M.C.A. officer, at every turn in his tour through the West in connection with the M.H.C. moving pictures which are now being taken.

All the men landed here are medically boarded and each man's vocational history recorded. The men from the West are attended to first, so that they may get on their way, but all are cleared in ten days. These are full of interest and entertainment for the men, and even though they are eager to get home to their families, there is no dissatisfaction expressed at being held.

There are sports, concerts, drives and picnics every day. The English-speaking people of the city of Quebec cannot give them enough of their hospitality. There have been as many as 22 concerts given in one week, and always there are 14, one up town and one at the depot every night.

A military canteen, run by a canteen committee, extends credit to the men to the amount of \$4, and arranges for credit to be given for stamps, tailoring and even car tickets, the amount to be taken from their pay at the close of their stay.

The street railway company provides two special cars every night to take the men uptown, and private motor tours as well as those arranged by the Quebec Auto Club, give every man a chance to see the quaint old city.

The tuberculous cases have a ward of their own, a roof garden, and a special recreation hall where a pathoscope movie provides entertainment for them. A large movie machine is installed in the big recreation hall of the building, and plays a big part in the entertainment of the men.

One night during their stay is called "Depot Night" and moving pictures are shown to the assembled men of the work of the Military Hospitals Commission for them. They see just where they are going to be treated and how they will fare, what arrangements are being made to help them back into civil life again, and what their chances are.

It is a night of intense interest to every man, and hundreds of questions are asked and answered following the film. Seventy-five per cent. of these are questions about the outlook in the district from which a man comes. There is little evidence of a desire to settle in a new place.

When they leave, the bed cases in the hospital coach attached to the train, they are all given cards of introduction to the secretary of the Soldiers' Aid Commission or the Military Hospitals Commission, and tickets of membership for six months in the Y.M.C.A.

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## NEW MILITARY HOSPITAL AT VANCOUVER, B.C.

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THE Military Hospital Annex to the Vancouver General Hospital, which has just been opened, and declared by Lieut.-Gov. F. S. Barnard, of British Columbia, to be the most perfectly equipped on Vancouver Island, is the first military hospital to be specially erected in the province for the express purpose of caring for returned soldiers.

It comes as a gift from the people of Vancouver, who subscribed \$60,000 for its building as evidence of their patriotism and enduring interest in the man who comes back. This includes a sum exceeding \$25,000 which the women of Vancouver raised for its furnishing, and \$36,000 which the business men's committee raised.

"I have been right down the line," declared Major General Leckie, senior returned soldier of the district, who followed the Lieutenant-Governor on the programme of the opening ceremonies, "through the whole system from the field dressing station to the convalescent home in England, and I know how necessary and acceptable such a hospital as this is."

Accommodations are provided for 320 men in the new hospital, but at present there are only 63 patients, all of whom are doing well and will ultimately return to full health in the bright wards which have been equipped with every necessity to make the men's lives happy during the period of their convalescence.

The entire annex was furnished as well as built by popular subscription with the exception of the beds and bedding which were supplied by the Military Hospitals Commission, and being presented without expense to the Government for the treatment of disabled soldiers, it represents one of the finest patriotic works in Canada.

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### KEEP T.B. SUSPECTS FROM DRAFTED ARMY

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A SPECIAL conference of the medical officers of the Military Hospitals Commission, in charge of tuberculous soldiers in the west, brought many prominent western men into consultation at the M.H.C. headquarters in Ottawa, Sept. 27th, and important questions relative to the care of the tuberculosis cases were discussed.

Prominent among these men were: Capt. Olson, Balfour Sanatorium, British Columbia; Capt. J. B. Ritchie, Frank Sanatorium, Alberta; Dr. L. G. Houle, Earl Grey Sanatorium, Moose Jaw; Dr. D. A. Stewart, Ninette Sanatorium, Manitoba; Dr. C. H. Vrooman, Tranquille Sanatorium, Kamloops; Major John L. Todd, of the Pensions Board.



A resolution was passed urging the most careful examination of recruits for the drafted army, that no men with tendencies toward tuberculosis should be taken to become a burden to the country. It was pointed out that the care of tuberculous men was a great expense to the nation, and that the cost of an examination for T.B. which would eliminate all this expense, would be infinitesimal in comparison.

It was decided to allow the men in the military sanatoria to have a vacation in which to return to their homes either before or after the holiday season, and to keep them at the sanatorium during Christmas week. While this may seem a hardship to the men who would naturally like to be with their families on Christmas, it is regarded as wisest by the physicians. Parties and entertainments for the soldiers will undoubtedly be a big part of the festivities in every community, and the temptation of the men to overdo must be guarded against. A few days of such good times may so overtax a man as to set his recovery back many weeks.

Every effort will be made to make Christmas a happy season at the sanatoria. There will be decorations, visitors, parties in proportion to their strength, and all the Christmas menu trimmings. The move is in the best interest of the men, and it is felt that they will see it that way.

In the June conference of the eastern and central medical officers of the Commission treating tuberculosis cases, it was recommended that specialists in T.B. be appointed in connection with every medical board for the examination of men suffering from tuberculosis, for the purpose of regulating pensions, etc. This has been found impossible since there are not a sufficient number of specialists, except in the large centres, to carry on such a work. In view of this fact, Col. Alfred Thompson, Medical Superintendent of the Commission suggested that some social service, the St. John Ambulance Association, the I.O.D.E. or the Victorian Order of Nurses be asked to take over the work of keeping in touch with the men for the first six months following their discharge. Such an order could do a great work in watching a man's progress and condition and directing him to the dispensary where the proper treatment would be given him in case he should need attention. It would be the visitor's duty

to see that the men live under the proper conditions, that they know where to go, and go, in case they need medical attention.

Capt. J. R. Byers reported upon the suggestions made by Major R. Tait MacKenzie on exercise for T.B. patients; fumigating plants for the sanatorium were discussed, and many other points of management arranged.

Dr. F. J. Shepherd, of Montreal, President of the Association of Medical Officers Caring for T.B. Soldiers, presided.

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### A MASSAGE SCHOOL OPENED IN TORONTO

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WOMEN from all parts of Canada have answered the call for masseurs and enrolled in the big training school opened by the Military Hospitals Commission at Hart House, Toronto, for the purpose of qualifying women as trained workers.

The first class on the opening day numbered 82, and the entrants varied from young college girls to mature women of 40, all eager to make themselves proficient in the work, that they might help mend the soldiers who have returned incapacitated, and needing such treatment to make them fit again.

Many are from the big cities, a large number from Toronto, but others came from little towns in Saskatchewan, and villages in the Maritime Provinces.

The course is under the direction of Sergt.-Majors Kendall and Holmes, who have been carrying on a similar course in Whitby Convalescent Hospital and Barraca Hall since February, and turned out 52 trained masseurs in their first class, 17 of whom were returned soldiers.

In the Hart House school, in addition to training in massage the young women will be given instruction in orthopedic movement, and medical electricity, and in a few months time, it is hoped, that a course in therapeutics will be added.

Through the kindness of several University professors and lecturers the new classes will be taken over, Capt. Pepperdene offering his services for the lectures in electro-therapeutics, Mr. J. Blatz in physical, and Professors McMurrich and Loudon in anatomy and dynamics.

The graduates will be sent to the various military hospitals throughout the country to treat cases of nerve injury, paralysis of the muscles and stiffened joints, which by massage and such treatment as the course includes, have been cured in scores of cases thought at first to be hopeless.

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### CONVALESCENTS HAVE ST. JOHN ARMOURIES

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So few active treatment cases have been returned to Canada up to the present time in comparison to the number which were expected, that the armouries at St. John, N.B., prepared on the advice of the Imperial authorities for bed cases, has been converted into a convalescent home by the Military Hospitals Commission and made a centre of activity in the new "K" Unit. One hundred convalescent men are now being cared for in the institution and every branch of work for the disabled soldiers, including physical and vocational training, is being carried on. The wards which were made from the old drill hall will accommodate 450 men, and all the company rooms have been made into rooms for special treatment, and administration offices. The kitchen, which was added, is of the most complete type, equipped with all the steam and electric apparatus of the best hotel, and run by a skilled dietitian and her staff.

The armouries offer splendid quarters for convalescent men during the winter season, and the men are in fine spirits.

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### SHELL SHOCK VICTIMS CURED IN WORKSHOP

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AN exhibition of the work done by the convalescent soldiers in Esquimalt Military Hospital in their vocational training classes drew great crowds, but the point of particular interest, which only those who are familiar with the problems of the Military Hospitals Commission appreciate, has been missed in admiration for the craftsmanship of the men.

Many of these men, who have never had a tool in their hands, have executed remarkable pieces of work under the direc-

tion of Sergt.-Major Dawson, the instructor in the woodworking branch of the vocational training department, but some of the less attractive pieces from the point of view of craftsmanship have stories behind them which attach to them an importance which perfection in workmanship could never make so interesting.

These pieces are made by men suffering from shell shock or nerve centre injuries which have affected their powers of concentration. The work has been the means of restoring their normal mental keenness through persevering effort to focus thought on the matter in hand. Thus in addition to completing the piece they have been gradually improving their condition and will ultimately entirely overcome their difficulty.

The vocational classes in connection with the Military Hospital work have been established, of course, with the view of putting every returned man incapacitated for his former occupation in possession of a trade at which he can earn a good living, but the work has its therapeutic value as well, and very often veritable miracles have been worked.

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### **SOLDIERS' HOSPITAL (ORILLIA), DEBENTURE BY-LAW**

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A BY-LAW to issue debentures for \$25,000 for a Soldiers' Memorial Hospital at Orillia was carried on September 30th by seventy majority. The vote was small. Sixty thousand dollars has been raised by popular subscription for the erection of the building, and the town debentures will be used toward maintenance of returned Orillia soldiers. The debentures will be for forty years, and will be placed in the hands of a trust which will deliver one debenture to the Hospital Treasurer each year. Any returned Orillia soldier will be entitled to three months' free treatment each year during his lifetime. The building will be erected immediately after the close of the war.

## MAJOR R. TAIT MCKENZIE NOW WITH THE MILITARY HOSPITALS COMMISSION

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MAJOR R. TAIT MCKENZIE, R.A.M.C., who has been appointed by the Military Hospitals Commission to make a survey of its institutions, with a view to developing physical therapy on extensive lines, returns to Canada, where he gained his first prominence as medical director of the physical training in McGill University, credited with one of the greatest works in the British army, the creation of 16 Command Depots in England where the incapacitated are cured through remedial exercise and physical therapy, new armies are made from old, and the margin of war wastage cut to the minimum.

At Hart House, in Toronto, where Dr. Edward A. Bott has already done brilliant work in physical re-education, restoring men crippled by injuries to physical fitness, he will go over the apparatus invented by Dr. Bott and his assistants, and have patterns made from them so that duplicates can be placed in all the hospitals throughout the country. He will also try to establish training courses at several centres, similar to the school for masseuses opened lately in Hart House, to supply the demand for such treatment.

Major McKenzie was born in Almonte, Ont., and took both his Arts and Medical degrees at McGill.

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## GIFT OF MATERNITY HOSPITAL TO OSHAWA

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ANNOUNCEMENT was made on September 20th by Mr. J. D. Storie, Chairman of the Oshawa Hospital Board, of the handing over by Mr. R. S. McLaughlin of his residence and grounds in East Oshawa for use as a maternity hospital. Mr. Storie states that the property is worth about \$25,000 and is in every way suited to the purpose for which it has been donated.

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THE annex to the Spadina Military Hospital has been ordered closed and instructions to vacate premises have been issued from the Military Hospitals Commission.

## Hospital Items

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ACCORDING to an official list just issued an increase in the bed accommodation of Canadian military hospitals in England, has been authorized to the undermentioned extent: At Basingstoke, 2,500 beds; at Kirkdale, 1,300 beds; at Shorncliffe, 1,040 beds; at Brighton, 1,040 beds; at Moore Barracks, 1,040 beds; at Bramshott, 1,040 beds; at Hastings, 520 beds; at Hospital, Eastbourne, 520 beds; at Duchess of Connaught's Red Cross, Taplow, 1,040 beds; and Ontario, Orpington, 2,080 beds.

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THE Government House at Charlottetown, P. E. I., has been offered by Lieutenant-Governor MacDonald to the Military Hospitals Commission as a Convalescent Hospital for returned soldiers.

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OFFICIAL announcement is made that the Military Hospitals Commission will erect a six-hundred convalescent hospital on property adjacent to the MacDonald College site, St. Anne de Bellevue, Que. McGill University will be associated with the Commission in the project.

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THE Canadian Y.M.C.A. has secured the Strand site, where stood the famous Tivoli Music Hall, erecting at a cost of \$75,000 a rest centre for Canadians to be served by a staff of 200 Canadian ladies in England. Two hundred and fifty soldiers on leave in London are able to be accommodated.

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IT is the intention to establish at Halifax, N.S., an institution for the education and training of blind soldiers. The work will be organized on the lines of that done at the St. Dunstan's Home in London, by Sir Frederick Fraser, who has been so successful in building up the Halifax School for the Blind.

THE sum of one thousand dollars has been advanced by the Municipal Council of Westmoreland, N.B., to the Moncton Hospital, in view of the increased cost of maintenance.

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THE Brandon, Man., Hospital for the Insane is to be enlarged. It is probable that patients at present in the Asylum who are not actually insane will be removed to Selkirk, while insane patients now at Selkirk will be taken to Brandon.

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DURING the past twelve months, 1,451 patients have been treated in the Royal Columbian Hospital at New Westminster, B.C., at an average cost of \$1.73 a day for each patient. The number of hospital days was 28,920. The financial statement for the year showed a deficit of \$3,401.27.

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SEVERAL business matters were discussed at a meeting of the Board of Directors of the Vancouver General Hospital on Aug. 2nd. Outstanding accounts to the amount of \$75,000 are now on the books of the hospital and every effort to collect these accounts has been unsuccessful. It was decided, therefore, to place all overdue accounts up to December 31st, 1916, in the hands of a solicitor for collection. The members of the Board thought that Dr. McEachern, the medical superintendent, ought to be relieved of some of the business responsibility and, accordingly, it was decided that a clause should be added to the by-laws to provide that business matters should be placed entirely under the direction of the managing secretary, whose approval must be obtained in connection with all matters involving the expenditure or collection of money.

## War Hospitals

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### ORPINGTON HOSPITAL

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THE new wing to this splendid institution, erected by the Ontario Government, is now completely filled, the last convoy of wounded soldiers reaching the hospital direct from Abbeville, via Boulogne. There have been several recent changes in the staff at Orpington. Major McKay has left to join No. 1 General Hospital at Etaples. Capt. Clark recently suffered from an attack of antrum disease and got three months' leave. Capt. Gunn also left recently on six weeks' leave. Capt. Greenwood, who had been away for ten weeks on sick leave, recently arrived in Canada, crossing the Atlantic on transport duty. Maj. Harley Smith, Maj. Crawford, Capt. Hilker, Capt. Parr, with Lieut. Lucas and Capt. Armstrong, are now the only remaining members of the original staff who left Toronto and crossed the Atlantic on the *Olympic* in April, 1916. Col. Thomas McCrae is now in charge of Medicine, with Col. Malloch, whom we are told is recently "looking as fine as silk," in charge of Surgery.

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### KITCHENER MILITARY HOSPITAL

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THE following officers are on the staff of the Kitchener Military Hospital, at Brighton, England, which is the only Imperial Hospital that is staffed exclusively by Canadians: Lt.-Col. A. T. Shillington, C.A.M.C., of Ottawa, officer-in-command; Lt.-Col. W. McKeown, of Toronto, second-in-command and head of the surgical department; Maj. Philip Burnett, D.S.O., of Montreal; Maj. D. A. Whitton, Maj. W. H. Macdonald; Capt. G. C. Hale, of Toronto, head of the medical department; Capt. Fleming, adutant; Capt. J. H. Slater, Capt. N. T. Beeman, Capt. C. D. Rilance, Capt. C. A. Thrush, Capt. R. N. W. Shillington, Capt. A. J. B. Herbert, Capt. K. C. W. Dean, Capt. O. Morris,



Capt. W. N. Cochran, Capt. J. T. W. Boyd, Capt. G. W. Leach, Capt. C. A. Temple, Capt. D. M. Lineham, Capt. T. A. Watter-son, Capt. O. S. Waugh, Capt. W. F. Hale; Capts. J. O. Watts and C. R. Spencer, chaplains; Capt. J. J. Thompson, registrar; Capt. E. T. Curran, Capt. W. H. Brown, Capt. F. C. Camp-  
bell, Capt. H. A. Sims, Capt. J. L. Walker, Capt. S. G. Mills, Capt. R. Kirkpatrick, quartermaster; Capt. J. Lewin, assistant quartermaster; Capt. H. A. McComb, paymaster; Capt. E. C. Cosstick, assistant paymaster, and Capt. C. H. Fowler, C.A.-D.C., dental officer.

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Col. Herbert Bruce recently attended a conference of Con-  
sultants with the Director-General of Medical Services at Head-  
quarters, as a result of which he has spent the past few weeks  
at No. 4 Casualty Clearing Station, France, where he arrived  
on July 29th last. Since his arrival there, he has been exceed-  
ingly busy operating, in addition to which he has been making  
the rounds of thirteen clearing stations and hospitals in France.  
At No. 64 C.C.S., he had oversight over one thousand patients.  
Dr. Bruce speaks of the work of the stretcher-bearers, in col-  
lecting the wounded and bringing them in, as beyond all praise.  
The work of these bearers has been recently carried out at great  
personal risk, as they are constantly exposed to the enemy's  
fire, and not being armed, they lack the moral support and  
advantage which the possession of arms gives to any combatant.  
Colonel Bruce has also been in close touch with some additional  
hospital accommodation at Trouville, where the British have  
erected a building for no less than thirty thousand beds.

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Lt.-Col. F. W. E. Wilson, St. Catharines, Ont., has, in the  
opinion of many, been treated in a most unfair manner from a  
military standpoint, the result of some criticisms made a year  
or so ago in reference to the C.A.M.C. General Jones, as soon  
as he was reinstated, punished Lt.-Col. Wilson by sending him  
to France, degrading him in rank and attaching him to a field  
ambulance. Later on he was sent as medical officer with a  
battalion into the trenches, a position which he filled for about

two months. Such a position is usually filled by a man of the lowest rank in the service, namely, a Captain. Lt.-Col. Wilson was afterwards transferred to a C.C.S., to which he was attached without duty. A little later he was sent as medical officer to a Forestry Battalion on the frontier of Switzerland, which position he held up till a few weeks ago. It seems exceedingly unfair and almost indecent that a man holding a commission as Lieutenant-Colonel should be degraded from the highest position in the service in England just because he dared to speak the truth. Such autocracy in the medical service is almost worse than any which existed in Russia prior to the fall of the Czar.

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COL. R. M. SIMPSON, Winnipeg, is appointed to command No. 1 Canadian General Hospital in France. During the operations which resulted in the capture of Vimy Ridge, Col. Simpson was attached to the Canadian corps, and assisted where the strain was the greatest, acting as Assistant Director of the Medicals, also as Medical Officer with the field ambulance and regiment. In the actual great assault he conducted an advance dressing station, following after the advancing troops and always under terrific fire. Col. Simpson formerly was second in command, and returns to this hospital at the request of the British authorities.

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CAPTAIN W. B. SHAW has been appointed to take charge of Fairmount (Langara) Military Hospital, British Columbia. He was acting major in France, and in command of the 37th Battery of the Canadian Artillery; was wounded nearly a year ago, and while nearly recovered from the direct effects of his wounds, has not regained his health sufficiently to resume active service for several months.

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CAPTAIN WITHEROW, who for forty days was commanding officer at Newmarket Military Hospital, has been transferred to Toronto, and Dr. Dougherty, from Vancouver, B.C., succeeded him.

## Military Hospital Notes

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CAPT. W. B. McDERMOTT, C.A.M.C., is on duty with the Anglo-Russian Red Cross Hospital.

LT.-COL. J. R. SPIER, C.A.M.C., is in command of the Canadian Convalescent Hospital at Bromley, England.

DR. L. DE L. HARWOOD, Superintendent of the Notre Dame Hospital, Montreal, has left Canada to join the staff of the Laval General Hospital.

DR. R. G. FERGUSON, of Winnipeg, has been appointed Medical Superintendent of the Qu'Appelle Sanitarium pending the return of Dr. Hart, who is on active service.

LT.-COL. S. HANFORD MCKEE, C.A.M.C., of Montreal, is in temporary command of the Westcliffe Hospital, England, during the absence of Col. J. D. Courtenay, C.A.M.C., who is on leave.

CAPT. J. W. SMUCK, A.M.C., has been taken on the strength of the Base Hospital on part time duty from July 21 to August 12, and is now admitted to full time duty with effect from August 13.

CAPT. E. RYAN, chief medical officer of "D" unit, M.H.C., is once more back at his desk at No. 1 Queen's Park. The captain had been away for several days on leave because of the serious illness of his wife.

THE ten large Canadian hospitals in England—both the purely military and those under the Canadian Red Cross—will henceforth be known, not by their names, such as Duchess of Connaught's, etc., but by numbers. Each will be designated General Hospital No. so-and-so. This has long been the very general practice among the British hospitals.

SINCE the first of October there has been but one penitentiary physician at Kingston. Dr. (Lieut.-Col.) W. T. Connell has resigned as consulting physician, and Dr. Robert Harley has assumed all duties, receiving \$1,360 a year salary.

## MAGNIFICENT RECORD OF THE UNIVERSITY OF TORONTO IN THE PRESENT WAR

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JUST how splendid have been the achievements of the men from the University of Toronto in the present war can only be realized by reading the record completed recently by the Registrar's office.

Of the 4,052 'Varsity men who have been on active service 205 have won honors, while 112 were mentioned in despatches. Those who have made the supreme sacrifice number 255. There are 29 either prisoners of war or missing and 385 have been wounded.

The 2,194 graduates and 1,319 undergraduates to go overseas made up a whole university in themselves, not to speak of the 279 who were at one time students at the University, but never completed their course, and the 133 members of the Faculty of Education. 127 members of the staff have also seen active service.

Of the University men Major Thane Wendell MacDowell, of Maitland, Ont., a Victoria College student, won the Victoria Cross.

The late Brigadier-General M. S. Mercer was the one 'Varsity man to be made a Commander of the Bath. There are 9 Commanders of St. Michael and St. George, including Lieut.-Col. J. C. Fotheringham, Lieut.-Col. G. C. Nasmith, and Brig.-Gen. C. H. Mitchell. 28 have been awarded the Distinguished Service Order.

The honor to be won by the greatest number is the Military Cross, and 112 University men have the right to attach M.C. to their names. 4 have received the bar in addition to the cross. 2 have won the Distinguished Service Cross with bar. One of these is Flight Captain Eric R. Grange, son of Principal Grange of the Veterinary College. One of three to be awarded the Distinguished Service Cross is Captain Douglas Hallam, son of ex-Ald. John Hallam.

One lady is included among those to win decorations. She is Miss E. B. Ridley, a graduate of Trinity College, who won the Royal Red Cross. This honor was conferred for Miss Rid-

ley's bravery in removing patients from a French hospital which was under fire. She is now the matron in charge of the Canadian Specialist Hospital, Ramsgate, England.

Major Clifford Bennett Nourse, of Picton, a graduate of the Ontario Agricultural College, is one of 7 to win the Distinguished Conduct Medal.

Six of the allied nations have conferred honors upon the 'Varsity men. Second Lieut. Nestore Cacciapuoti is one to win Italian honors.

Capt. J. J. Creelman, D.S.O., of Montreal, was awarded the Orders of St. Stanislaus and St. George by the Russian Government. The third Russian order was won by the late C. P. Cotton.

Fourteen French honors were given, and Brig.-Gen. C. H. Mitchell won the Order of Leopold, the only Belgian honor to be conferred on a 'Varsity man. Col. George Gow and Capt. H. J. Shields won the two Serbian decorations, while the Montenegrin Government saw fit to confer one of its honors on a U. of T. graduate.

In a list recently published of Canadians brought to the notice of the Secretary for War for valuable service rendered, the names of the following medical graduates of the University of Toronto occur: Lieut.-Col. J. A. Amyot, C.A.M.C.; Lieut. Col. P. G. Goldsmith, C.A.M.C.; Capt. T. F. Graham, C.A.M.C.; Capt. H. C. Hall, C.A.M.C.; Major S. H. McCoy, C.A.M.C.; Lieut.-Col. R. Raikes, C.A.M.C.; Col. R. D. Rudolf, C.A.M.C.; Lieut.-Col. C. L. Starr, C.A.M.C.; Major R. E. Wodehouse, C.A.M.C.

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COL. C. S. McVICAR has returned home after an absence of two years and four months. The colonel has been with the University Base Hospital at Saloniki, and is home on two months' leave. His residence is at 300 Roncesvalles Avenue. He will report for duty again at the end of two months.

## IMPRESSIONS OF LIFE AT THE FRONT

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PERSONAL impressions and experiences of men at the front always make interesting reading to us in Canada. It is a remarkable fact that some of the most interesting accounts of the life there have been furnished by medical men. Such records are more than interesting; they give us valuable information because they come from men who write from close observation and who study facts carefully before setting down their conclusions.

It is for this reason that attention is drawn to an article entitled "The First Canadians in France," recently published from the pen of Major F. McKelvey Bell, a well-known Canadian physician, who is now serving with the Overseas Forces. The article contains the following passage:—

"To the boys at the front the cigarette is the panacea for all ills. I have seen men die with a cigarette between their lips, the last favor they had requested on earth. If the soldier is in pain, he smokes for comfort; if he is restless, he smokes for solace; when he receives good news, he smokes for joy; if the news is bad, he smokes for consolation; if he is well, he smokes; when he is ill, he smokes. But good news or bad, sick or well, he always smokes."

These are impressive words, which go far to explain the popularity of the cigarette, both at home and abroad. Nor is it only amongst the Allied forces that the cigarette is so much appreciated, for on the other side of the line the evidence is equally strong. A medical journal publishes the testimony of a German army surgeon of high rank, who had charge of troops on the war front.

"In the fever-ridden lowlands and marshes," he writes, "I noticed that our soldiers remained well even under the worst weather conditions so long as they smoked cigarettes. Whenever our tobacco supply gave out the cases of typhoid and malaria became numerous. I made similar observations in unhealthy marshes. Other physicians with whom I discussed the result of my investigations assured me that they also had observed the immunizing effects of tobacco."

It is evident that to many men the cigarette is a pleasure, a benefit and a necessity, all rolled together.

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## Book Reviews

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*The Fundus Oculi of Birds, especially as viewed by the Ophthalmoscope. A study in comparative Anatomy and Physiology.* By CASEY ALBERT WOOD. Chicago: The Lakeside Press; 1917.

This atlas is illustrated by 145 drawings in the text; likewise by 61 colored paintings, prepared by Arthur W. Head, F.Z.S., London.

Publisher: H. A. Fox of West Madison St., Chicago, Ill.

The price of this beautiful atlas is \$15.00, and will be much valued by ophthalmologists and zoologists who have occasion to study the eyegrounds of the aves, reptilia or of mammals.

Some very interesting conclusions have been arrived at by Dr. Wood. Such studies as his throw much light on the function of sight. These researches are made preferably on the living eye. The concavity of the posterior half of the avian eye is observable, showing the pecten, the optic nerve entrance, areas of acute vision, fundal blood vessels and opaque nerve fibres. The different species have fundi peculiar to themselves, and these fundi exhibit a great variety of distinct vision, corresponding closely to the habits and habitats of such species. The author has been unable to reproduce (ophthalmoscopic) appearances of fundi by photography. Domestication or prolonged captivity brings about abnormal changes. Ophthalmoscopy throws light on the origin of birds, or at least on their relation to their sauropsidian ancestry.

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*A Text-Book of First Aid and Emergency Treatment.* By A. C. BURNHAM, M.D., Medical Corps, U.S.R. Instructor in Surgery in the Polyclinic Hospital, New York City; Attending Surgeon, Department of Surgery, Vanderbilt Clinic, College of Physicians and Surgeons, New York City. Illustrated with 160 engravings and 2 plates. Philadelphia and New York. Lea & Febiger. 1917.

Among the numerous books for neophytes in medicine and nursing, for scouts and camp girls and others interested in first aid and minor surgery comes Dr. Burnham's 300-page volume, which in addition to the usual discussion of anatomy, physiology, bandaging, simple nursing technique, has some new pointers on the handling of medical and surgical emergency—poisoning, suffocation, regional and general injuries. Apropos to war-time, a chapter is devoted to transportation. It is gratifying to note the increase in the publication of such volumes as this for the semi-medical and nursing folk; for the wider spread of such knowledge the better for everybody.



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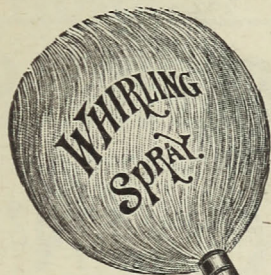
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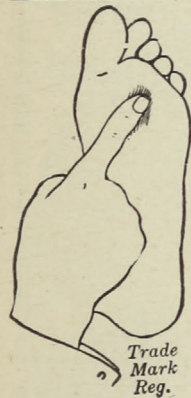
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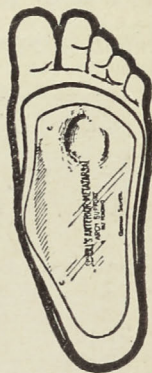
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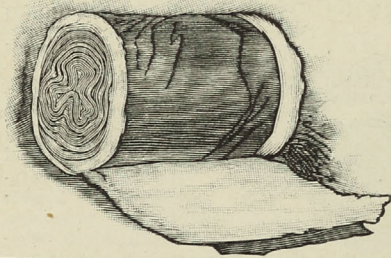
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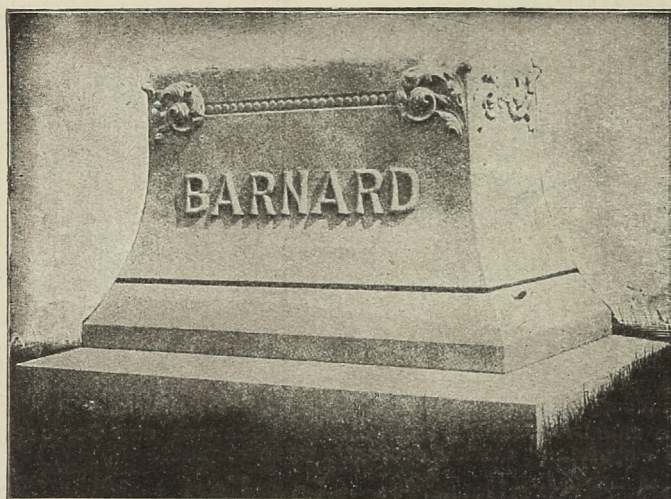
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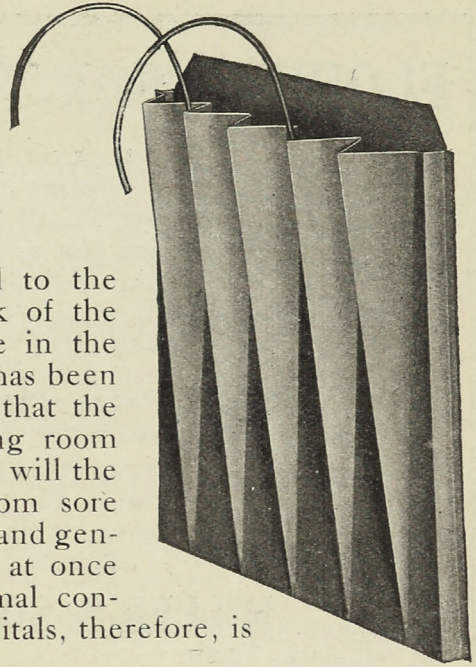


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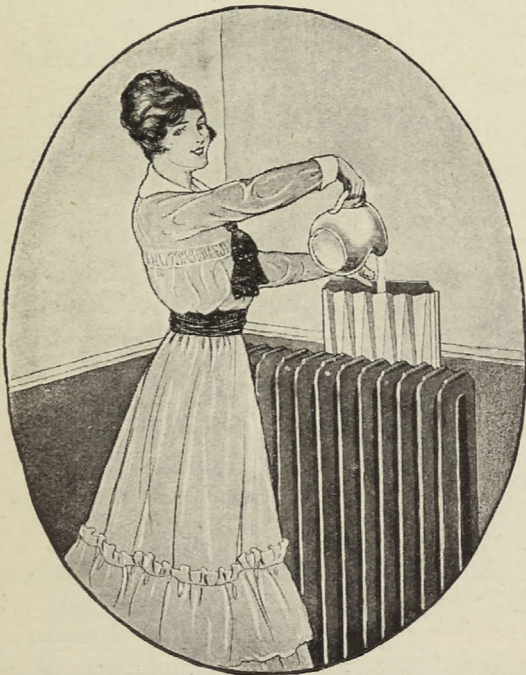
# Hospital Superintendents Know

that nothing is so detrimental to the health of patients as the lack of the normal percentage of moisture in the air they breathe. How often it has been demonstrated beyond question that the moment the air of the sleeping room becomes too dry, just so soon will the inmate of that room suffer from sore throat, headache, sleeplessness and general malaise, a condition that is at once changed on returning to normal conditions. The attention of Hospitals, therefore, is particularly called to



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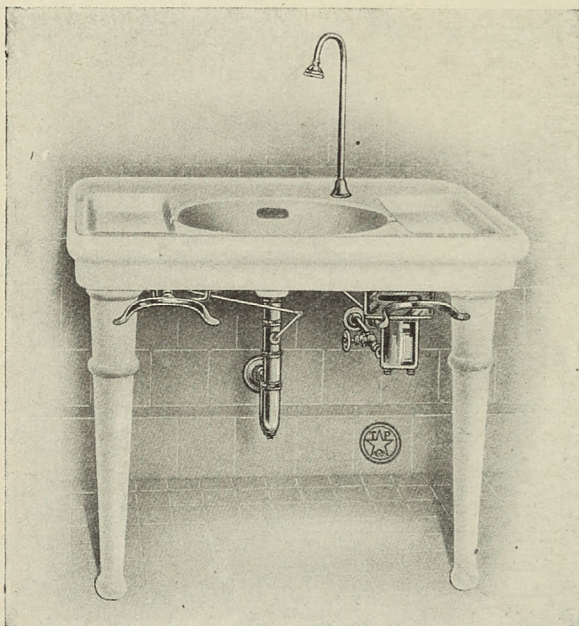
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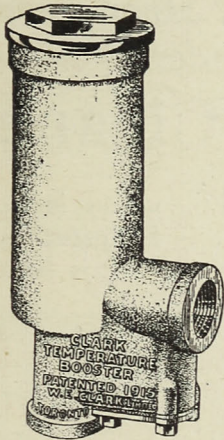


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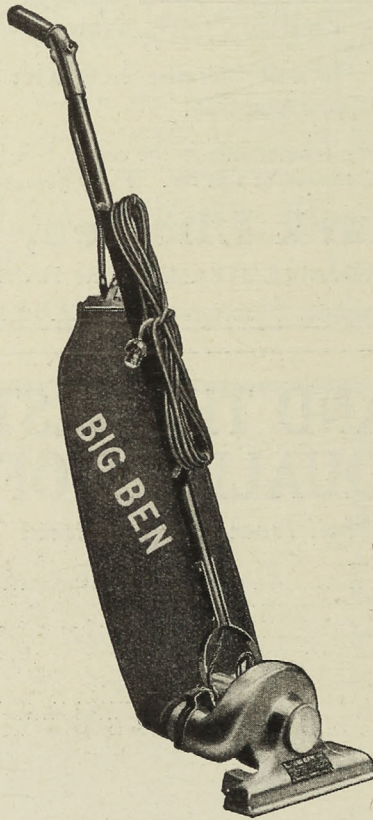
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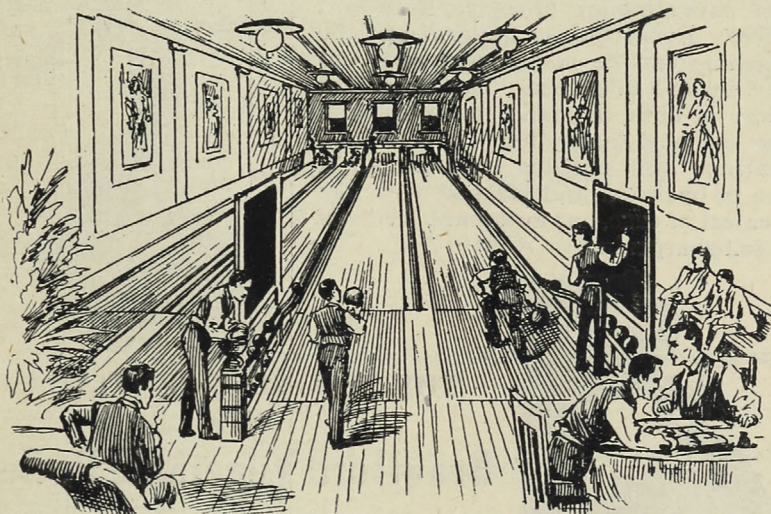
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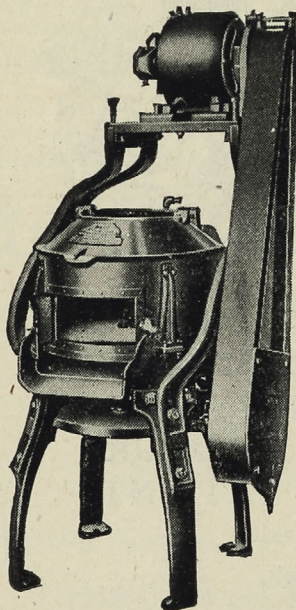
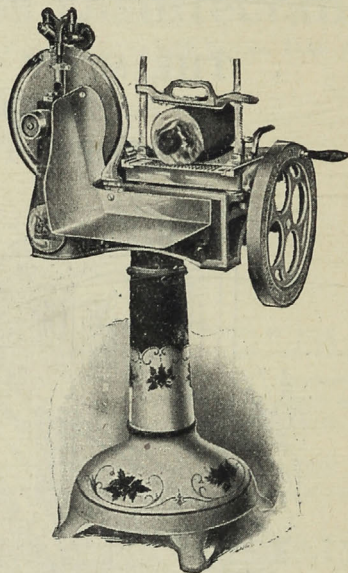
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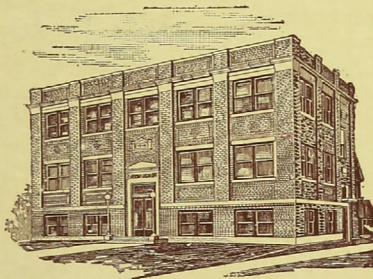
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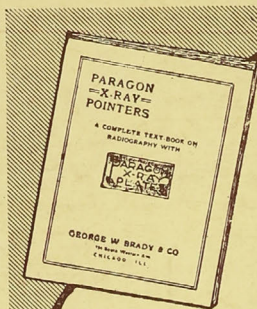
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