

THE OFFICIAL ORGAN OF

The Canadian Hospital Association
The Alberta Hospital Association
The British Columbia Hospital Association

\$3.00
PER
ANNUM



50¢
PER
COPY

THE HOSPITAL WORLD

Vol. XXIV

Toronto, August, 1923

No. 2

CONTENTS

EDITORIAL

	Page
Massachusetts in the Van	37
Deep X-ray Therapy	39
On Writing	41
Acute Suppurative Otitis	42
Co-operation in Sickness	43
Mental Nursing	44

ORIGINAL CONTRIBUTION

The Hospital Nutrition Clinic, by Miss Maude A. Perry, B.S.	46
--	----

**RETARDED CONVALESCENCE
PRE-TUBERCULOSIS
NEURASTHENIA
RELAPSE**

can often be avoided through the judicious use of
a building and vitalizing factor.

FELLOWS' SYRUP OF HYPOPHOSPHITES

*has been acknowledged for over Sixty Years as the
Standard Preparation of its kind.*

HAVE YOU TRIED IT?

Samples and literature on request

FELLOWS MEDICAL MANUFACTURING CO., Inc.
26 Christopher Street, New York, N. Y., U.S.A.



3 100 263 670 5

HALITOSIS

(AS DEFINED IN THE CENTURY DICTIONARY)

(Hal-i-to-sis) N. N. L.

(L. Halitus—Breath ∴. Osis—Offensive)

Offensive breath, whether arising from diseased or neglected condition of the teeth, mouth or nose or caused by disorders of digestion, respiration, the excessive use of tobacco, etc., may be readily overcome by the deodorizing properties of—

LISTERINE

Listerine is strictly antizymotic, it inhibits alike the acid fermentation of carbohydrates and the alkaline putrefactive processes of mixtures of meat and saliva, retained as debris about the teeth; hence, Listerine is antagonistic to the activating enzymes of fermentation while supplanting disagreeable odors with the fragrance of eucalyptus, thyme, mentha, etc.

Many dental practitioners who advise their patients to use Listerine daily as a mouth-wash, also keep Listerine in an atomizer on the dental bracket readily available for use prior to operations, in self defense against pronounced cases of

HALITOSIS

Lambert Pharmacal Company

263-265 Adelaide Street West,

Toronto



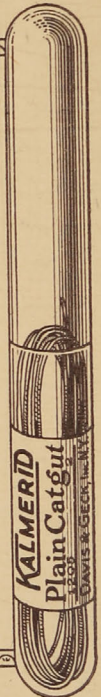
This is what
Elbert Hubbard
wrote about
D & G Sutures

"They have raised suture making
to a science—a science valuable
beyond compute"

Have you received your copy of
Elbert Hubbard's last Little Journey?

DAVIS & GECK, Inc.
Surgical Sutures Exclusively

211-221 Duffield Street—Brooklyn, N.Y., U.S.A.



UNGUENTUM ASEPTICO

A scientifically prepared antiseptic healing ointment

A compound of **Boric Acid**, **Eucalyptol**, and **Zinc Oxide** in a special ointment base.

Aseptico is particularly indicated in burns, cuts, scalds, suppurative tumors, and ulcers.

As a base for incorporating other ingredients, **Aseptico** has no equal.

The J. F. HARTZ CO., Limited

Pharmaceutical Manufacturers

TORONTO

CANADA

Signal Systems For Hospitals

Complete nurse's silent calling systems; doctor's calling systems; interior telephones.

District Representatives

Timberlake & Bourne
New Birks Building - Montreal, Quebec

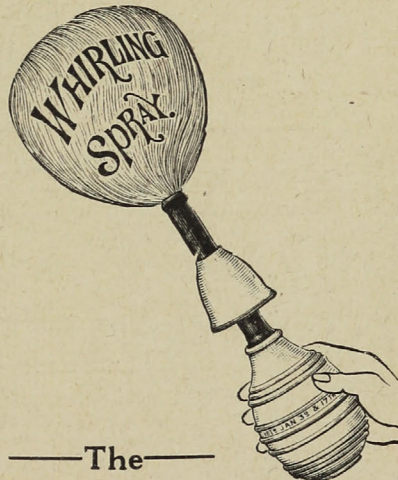
Pierce Electric Company
104 Richmond St., W. - Toronto, Ontario

Cochrane, Stephenson & Co., Ltd.
850 Hastings St. - Winnipeg, Manitoba

Cochrane, Stephenson & Co., Ltd.
901 Credit Forcier Bldg. - Vancouver, B. C.

CONNECTICUT TELEPHONE & ELECTRIC COMPANY

Used the World over—



—The—
**Marvel Whirling Spray
Syringe**

MARVEL COMPANY
25 West 45th Street - New York

Canadian Distributors: Messrs. MacLean, Benn & Nelson, Ltd. 489 St. Paul St. W. Montreal, Can.

Powerful Antisymphilitic

More active and better tolerated than 606 and neo-606 (914)

GALYL

Adopted by the Civil and Military Hospitals of the Allied Countries

MEDICATION: Intravenous or intramuscular Injections.

FRACTIONATED DOSES: 20 to 30 centigr. every 4 days. (12 to 14 Injections for a course).

MEDIUM DOSES: 30 to 60 centigr. every 6 or 8 days. (8 to 10 Injections for a course).

READING MATTER AND SAMPLES: Lab^o NALINE, Villeneuve-la-Garenne (France).

SOLE AGENTS FOR CANADA: ROUGIER Frères, 216 Lemoine St., MONTRÉAL.

Electrically
Lighted Surgical
Instruments

For Accurate Diagnosis

Not only were we the pioneers in developing electrically lighted surgical instruments, but for twenty-five years we have been continually bringing out new instruments constructed in accordance with the designs of eminent physicians and surgeons, which for the protection of the medical profession we mark "E. S. I. Co."

Urethroscopes—Young, Swinburne, Gordon, MacGowan, Ballenger, Koch.

Cystoscopes—Braasch, Young.

Rectal Instruments—Tuttle, Lynch, Buit, Beach, Axtell, Bassler.

Transilluminators—Sullivan.

Nasopharyngoscope—Holmes.

Bronchoscopic and Laryngeal Instruments—Jackson, Lynch.

Illuminated Eye Spud, Nasal Snare, Mouth (Gag, Tongue Depressor, Auriscopes, Illuminators, Vaginal and Rectal Specula, Socket Current Controllers, Cautery Transformers, Batteries.

These instruments, and others, are described in the Ninth Edition of our Catalogue, just published, which will be mailed upon request:

Electro Surgical Instrument Co., Rochester, N. Y.

Hygienic Paper Specialties

We are manufacturers of the following items and would be pleased to send you samples on request.

SPUTUM CUP REFILLS
POCKET SPUTUM CUPS
PAPER NAPKINS
PAPER DRINKING CUPS

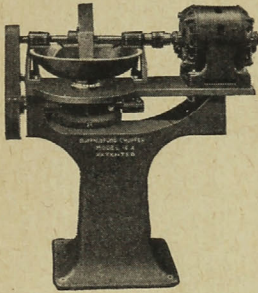
PAPER CUSPIDORS
PAPER TOWELS
PAPER TABLECLOTHS
TONGUE DEPRESSORS

Stone & Forsyth Co.

67 Kingston St.

Boston, Mass., U.S.A.

NEWEST MODEL



"BUFFALO" MEAT, FOOD AND VEGETABLE CHOPPER
with improved pedestal base

THE "BUFFALO" Chopper is the King of all kitchen machines—most wonderful time, food and labor saving device ever installed in a kitchen.

Only machine that will chop any kind of food fine without mashing or squeezing out all the juices.

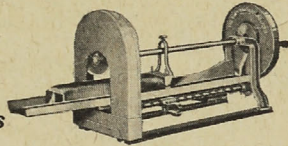
Meats chopped in a "BUFFALO" are free from lumps and cords; turns out tender, juicy Hamburg steak, sausage meat, etc., even from tough meats; enables you to use up odds and ends and cheaper cuts of meat, affording wonderful savings.

Thousands of users throughout the U. S. A. and Canada.

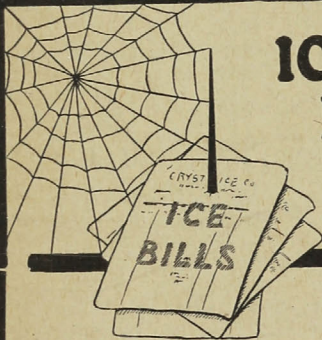
"BUFFALO" BREAD SLICER

(World's Greatest Time, Labor and Bread Saver.)

Write your Hotel Supply House for prices



JOHN E. SMITH'S SONS, CO., Patentees and Manufacturers
50 BROADWAY, BUFFALO, N. Y., U. S. A.



ICE BILLS are RELICS of the PAST

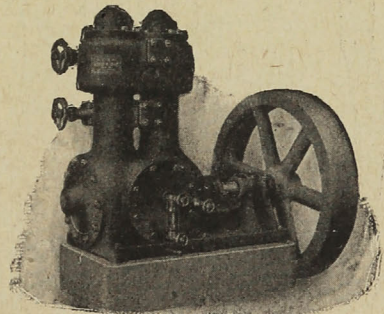
TO USERS OF *York* Mechanical Refrigeration

ice bills and the worries that go with the iced refrigerator are soon forgotten by the Hospital Staff whose refrigeration is produced by a York Mechanical Refrigerating System.

The constant, low temperature produced by Mechanical Refrigeration preserves the foodstuffs placed in the refrigerator in prime condition. York Machines also manufacture economically, the necessary ice for institutional use.

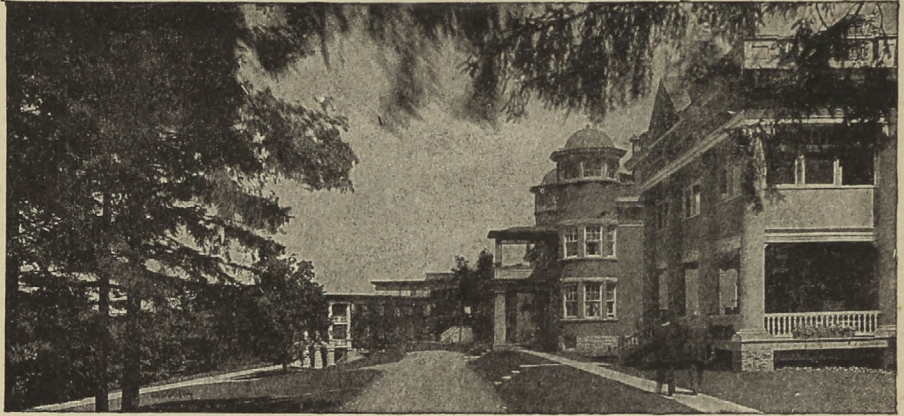
Write us for information and prices

CANADIAN ICE MACHINE COMPANY, LTD.
TORONTO MONTREAL WINNIPEG VANCOUVER



HOMEWOOD SANITARIUM

GUELPH, ONTARIO



A private neuropsychiatric hospital with special facilities for the study of early cases to establish diagnosis and determine prophylactic or treatment indications.

75 acres of woods and lawns with ample provision for out and in-door employments and diversions.

Guelph, reputed as one of the healthiest cities of Canada, is conveniently accessible from Toronto, Montreal, Buffalo and Detroit. Address: Dr. C. B. Farrar, Medical Superintendent, Guelph, Ontario.

MACQUEEN WILLIAM N. MACQUEEN

CASH'S
WOVEN NAMES

Save Laundry Losses

Sew them into everything
that washes

Prices

3 doz. \$1.50	6 doz. \$2.00
9 doz. 2.50	12 doz. 3.00

Write for styles and samples

J. & J. Cash Inc.
12-A Expositor Building
Brantford, Ont.

MACQUEEN WILLIAM N. MACQUEEN

Hospital authorities will appreciate McClary's co-operation

Our expert knowledge is at the disposal of any Hospital authorities who are desirous of improving their Kitchen Service or extending their present quarters. Technical information of this nature is valuable and has been appreciated and acknowledged by many buyers whose foresight has prompted them to consult with us.

Our experience covers Kitchen installations from coast to coast. Blue Prints and Layouts submitted for approval without obligation.

Write us—

McClary's

Kitchen Equipment Dept.
LONDON ONT.

Or one of our Branches—

Toronto,	Montreal,	Winnipeg,
Vancouver,	St. John, N.B.,	Hamilton,
Calgary,	Saskatoon,	Edmonton.

'OVALTINE'

AND PHOSPHORUS ADMINISTRATION

IT IS GENERALLY AGREED THAT THE MOST SATISFACTORY MEANS OF EXHIBITING PHOSPHORUS IS BY NATURAL FOODS RICH IN PHOSPHATIDES.

"Ovaltine," the Tonic Food Beverage, is made from ripe barley malt, creamy milk and fresh eggs—all rich in assimilable organic phosphorus bodies—by a special process of extraction and concentration which presents these principles in undiminished activity and in a form which ensures prompt and complete absorption.

"Ovaltine" is a great help in those cases where it is essential to arrest tissue waste and to counterbalance excessive loss of phosphorus such as certain neurasthenic and general debilitated conditions, pulmonary tuberculosis, etc. "Ovaltine" is characterised by being of definite therapeutic value, by being convenient and palatable, and by being reasonable in price.

SUPPLIED BY ALL DRUGGISTS. SPECIALLY LOW PRICES ARE QUOTED TO HOSPITALS AND KINDRED INSTITUTIONS ON DIRECT APPLICATION TO TORONTO OFFICE.

A. WANDER LIMITED, LONDON, Eng.

Works: Kings Langley, Eng.

TORONTO: 455 KING ST. WEST

(ADELAIDE 2194F)

CM 6



MAXIMUM NUTRITIONAL VALUE

MINIMUM DIGESTIVE STRAIN

GOLDMEDAL

COCAINE-FREE LOCAL ANAESTHETIC

NOVOCAIN

ORIGINAL MAKE

Six to Seven Times less Toxic than Cocaine.

In hypodermic tablets, for **Minor Surgical Operations** in general practice.

Also in powder, for **Major Operations, Abdominal Surgery**, etc., in Hospital practice, by Infiltration or the "Block" methods.

Dental "E" Tablets, for Dental Extractions and Dental Surgery.

LITERATURE ON REQUEST

The SACCHARIN CORPORATION Ltd.

Pharmaceutical Department

LONDON, ENGLAND

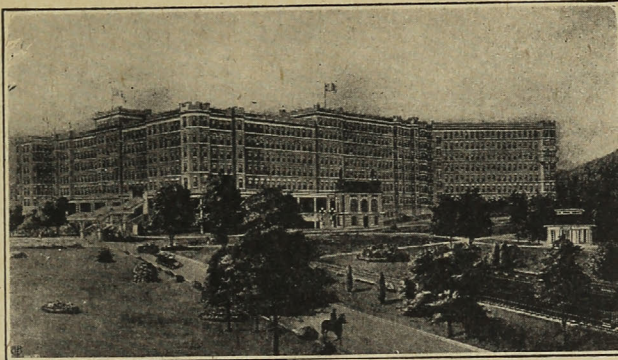
Canadian Agents: W. Lloyd Wood, Ltd.
64-66 Gerrard St. E., - Toronto

Contractors to:

WAR OFFICE.
INDIA OFFICE.
CROWN AGENTS
for the COLONIES.

CANADIAN GOVERNMENT.
FRENCH GOVERNMENT.
BELGIAN GOVERNMENT.
ITALIAN GOVERNMENT.
ETC. ETC.

BRITISH RED
CROSS SOCIETY.
FRENCH RED
CROSS SOCIETY.



DANIEL BOONE and the hardy adventurers of his day were familiar with the health-giving springs in Southern Indiana. On his numerous expeditions out of Kentucky into what is now Illinois, Indiana and Ohio, we doubt not that he drank from the springs which have since given to the world

PLUTO WATER

Boone was aware that to beat the Indians at their own game, he must remain in perfect health, for there were no nearby physicians to consult and he had to depend on nature's gifts. Of these PLUTO is one of the most precious. Its use for constipation and disorders of the kidneys, bladder and gastro-intestinal tract is, in Indian parlance,

GOOD MEDICINE

Sample and literature to the medical profession on request to the

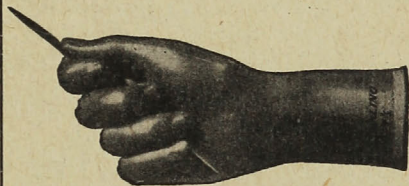
FRENCH LICK SPRINGS HOTEL COMPANY, French Lick, Indiana

**Naumkeag
Steam Cotton Co.
Salem, Mass.**



**Standard for Homes, Hospitals
and Institutions**

**Selling Agents:
PARKER, WILDER & CO.
Boston and New York**



Sterling

Surgeons' Gloves have merited the approval of most of the hospitals in Canada and many prominent ones in other British Dominions.

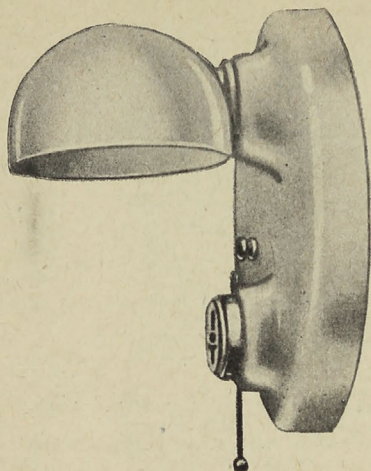
Insist on Gloves branded **STERLING** and insure complete satisfaction as well as utmost economy.

The **STERLING** trademark on Rubber Goods guarantees all that the name implies.

Pioneers and the largest producers of

SEAMLESS RUBBER GLOVES
in the British Empire

**Sterling Rubber Company, Limited
GUELPH, CANADA**



AGLITE

ALL GLASS

AGLITE is unequalled for wards, corridors or bathroom illumination. Its all-glass construction makes it sanitary and easily cleaned. Its white finish is quite in keeping with hospital surroundings.

NOSHADOWLITE

FOR OPERATING ROOMS

This light was designed in conjunction with several well-known surgeons. It enables the surgeon to work speedily and accurately. Noshadowlite is used in such well-known institutions as the Mayo Brothers Clinic at Rochester, Minn., and the Toronto General Hospital.

We will be glad to send descriptive folder showing lighting tests and designs.

Tallman Brass & Metal Limited
HAMILTON, ONT.

*The Medical Profession
should note that*

The Isabella Private Hospital and Rest Home

94 ISABELLA ST. - TORONTO

is now open for patients. A Graduate Nurse is in charge. Every facility is given Physicians for the treatment of cases. Every room is bright and cheerful and the rates are moderate.

Telephone North 1961



Hospitals and Institutions THE WORLD OVER

Realize the virtue of Keating's for the destruction of bugs, flies, cockroaches and all forms of insect life. Its generous use ensures perfect immunity from insect pests in all seasons of the year.

Made by THOMAS KEATING, London, Eng.
Established 1788

Sole Agents for Canada

The Harold F. Ritchie Co. Limited
18-20 McCaul St., Toronto

AN EFFECTIVE CLEANSER

The attention of Hospitals is called to

Puligrina

as one of the most effective cleansers on the market. It will

- a. Remove stains from sinks, basins, toilets, etc.
- b. Thoroughly cleanse and deodorize pus basins, bedpans, and Hospital enamel ware.

Puligrina can be supplied in quarts or in bulk from the manufacturers.

The Toronto Puligrina Fluid Co.

1556 Queen Street West
Toronto

Telephone Parkdale 4900 - w.



What Better Food
for sickroom diet, for convalescents and for infant feeding, than Junket made with milk, offering all the food value of milk, pre-coagulated by

Junket
REG. U.S. PAT. OFF.
TABLETS

the main digestive difficulty of raw milk removed. Eaten with a spoon, taken slowly, and attractive to the taste—it recommends itself to your consideration frequently.

Chr. Hanson's Laboratory, Inc.,
LITTLE FALLS, N.Y.
CANADIAN FACTORY, TORONTO, ONT.

Junket Preparations put up in tablets or powder. Latter already sweetened and flavored for quicker and easier use.

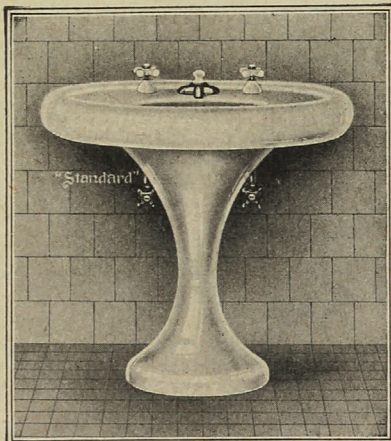


"Standard"

**PLUMBING
FIXTURES**

For
Hospitals, Offices, Schools
Residences, Hotels, etc., etc.

Made in Canada
by



Standard Sanitary Mfg. Co.

LIMITED

General Offices and Factory: TORONTO

Branches:

MONTREAL

HAMILTON

WINNIPEG

CALGARY

VANCOUVER

For Eye Dressings Cellucotton makes a cool, comfort- able pad.

This is one more kind of a dressing in which Cellucotton can be used with splendid results.

Cut a piece of Cellucotton 1-8" thick, in elliptical shape, with long dimension approximately 4 inches, and short dimension 3 inches.

Cover with one layer of 20x12 (Curity 3A) gauze, fold over the edges, and press flat.

Have you figured what your savings would be in a year, if you used Cellucotton for every practicable purpose?

CELLUCOTTON

Manufactured by Kimberly, Clark Co., Neenah, Wis.

A "recipe book" showing many specific uses for Cellucotton has been prepared. May we send you one?

Exclusive Selling Agents

Lewis Manufacturing Company Walpole, Mass.

Selling Agents: Western Canada, Gibson-Paterson, Winnipeg.
Ontario, (Excepting Pt. Arthur and Ft. William) and Quebec,
H. L. Brown, Toronto.
Maritime Provinces, R. H. Paterson, St. John.

ECONOMICAL

It takes very little "Poliflor" to give floors a brilliant and lasting polish, and it dries quickly. It contains no benzine or gasoline. Wherever "Poliflor" is used there is an appearance of brightness and cleanliness. Specially packed in 5 lb. pails for use in hospitals and similar institutions.

Poliflor
FLOOR and
FURNITURE
WAX

Write for samples and prices.



Made and guaranteed by the Nugget Polish Company, Limited

SIGNAL SYSTEMS, LIMITED

11 Wellington St., E. - Toronto

Will equip your hospital with
the most up-to-date

- SILENT NURSE CALL SYSTEMS
- DOCTORS PAGING SYSTEMS
- "IN" and "OUT" ANNUNCIATOR SYSTEMS
- FIRE ALARM SYSTEMS
- ELECTRIC CLOCK SYSTEMS
- INTERIOR TELEPHONE SYSTEMS

Send for special Bulletin or
have our representative call

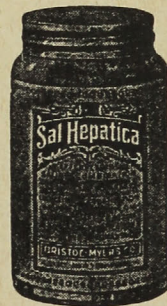
Telephone Main 4630

Sal Hepatica

THE
STANDARD SALINE
LAXATIVE

Samples on request

Bristol-Myers Co.
NEW YORK





The CHASE HOSPITAL DOLL is over five feet tall, made of finely woven stockinet. Is durable, waterproof and sanitary. It has copper reservoir which has three tubes leading in'o it, corresponding in location and size to the urethral, vaginal and rectal passages.

Superintendents now using the adult size, as illustrated above, will be glad to know that we make several small models corresponding to a two-month, four-month, one-year and four-year-old baby.

The **CHASE HOSPITAL DOLL**

M. J. CHASE
60 Park Place
PAWTUCKET, R.I.

“Build for Service”

The CHASE HOSPITAL DOLL and *The CHASE HOSPITAL BABY*, demonstration manikins for teaching the care of children, the sick and injured, are made with infinite care and thought to each detail. “Build for Service”, is the policy behind all CHASE PRODUCTS.

Nothing but the sturdiest material goes into these products; cloth and cotton batting that have been molded into the human form, hard, raised features, flexible joints, naturally formed bodies, heads, arms and legs, that conform to standard measurements. They are covered with durable, waterproof paint. The larger models are equipped with openings, connected with water-tight reservoirs, representing the meatus, auditorius, nasal, urethral, vaginal, and rectal passages.

The CHASE HOSPITAL DOLL and *The CHASE HOSPITAL BABY* because of their inherent durability and because they permit such great flexibility and wide latitude in the demonstrations and practise of medical, surgical, and hygienic principles, are in daily use all over the world in Hospitals, Nurses' Training Schools, Home Nursing Classes, Baby Clinics, Mothers' Classes, and by Visiting Nurses and Baby-Welfare Workers. They are standard and necessary equipment.

Let us send you our latest catalogue.

Phillips' Milk of Magnesia

“THE PERFECT ANTACID”

For correcting Hyperacid conditions—Local or Systemic. Vehicle for Salicylates, Iodides, Balsams, etc. Of advantage in neutralizing the acid of cows' milk.

PHILLIPS' Phospho-Muriate of Quinine

COMPOUND

NON-ALCOHOLIC TONIC AND RECONSTRUCTIVE

With marked beneficial action upon the nervous system. To be relied upon where a deficiency of the Phosphates is evident.

The Chas. H. Phillips Chemical Co.

LONDON - - NEW YORK

Canadian Agents:

THE WINGATE CHEMICAL CO., LTD.

468 St. Paul St. West,

MONTREAL

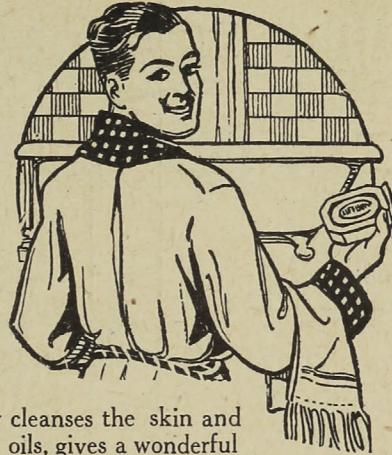
Who will be pleased to send samples on request.

Invaluable to Both Hospital Staff and Patients

LIFEBUOY HEALTH SOAP

With its cleanly odour,—its pure velvety lather, Lifebuoy Soap is a necessity that gives the pleasure of a luxury.

It performs a double duty:—It thoroughly cleanses the skin and with the aid of its antiseptic and vegetable oils, gives a wonderful healing and tonic effect to the body. For washing all garments that touch the skin, the rich creamy lather from Lifebuoy Soap will produce the most satisfying results.



Grocery stores everywhere sell it

Lever Brothers Limited
Toronto

MERCUROSAL SUBJECTED TO PHYSIOLOGICAL TEST

AFTER every practicable chemical test has shown Mercurosal,* the new anti-syphilitic mercury compound, to be satisfactory, this product is subjected to a test for toxicity on rabbits of standard weight, these animals having been found to yield more definite data than others.

Mercurosal in solution is introduced into the marginal vein of the rabbit's ear at a carefully controlled rate—very slowly depending on the size of the animal. The optimum rate of injection has been determined by numerous experiments, and is an important item in the test.

Our investigators will not pass



any batch of Mercurosal that will prove fatal to a 2- to 4-kilo rabbit in a dose of less than 40 to 80 milligrams. The standard is a minimum of 20 to 30 milligrams per kilo.

The margin of safety is impressive. Calculated on the basis of weight alone a toxic dose of Mercurosal for a man weighing 65 kilos (150 lbs.) would be 1.3 gms. or 13 times the recommended intravenous dose.

By means of the chemical tests we determine the purity of Mercurosal, and from that might be judged its relative freedom from toxicity; nevertheless the physiologic toxicity test is invariably performed as an added precaution.

*Disodiumhydroxymercurisalicloxyacetate. Contains about 43.5% of mercury in organic combination. Relatively non-toxic and non-irritating. Adapted for intravenous and intramuscular administration in the treatment of syphilis.

PARKE, DAVIS & COMPANY

**Ingram
&
Bell
LIMITED
TORONTO**



Our Sundry Catalog
awaits your request

Hospital Supplies

Sole Agents for
BRAMHALL DEANE
HIGH PRESSURE STERILIZERS
WAPPLER TRANSFORMERS
and
HIGH FREQUENCY APPARATUS

Our Specialties:

Manufacturers of
HYPODERMIC TABLETS
COMPRESSED TABLETS
ELIXIRS, OINTMENTS, Etc.
FULL LINE OF DRUGS

A postal requesting quotations
will receive immediate attention

A Modern Milk Plant

It is a generally admitted fact that modern machinery means a better product. With a view in this direction

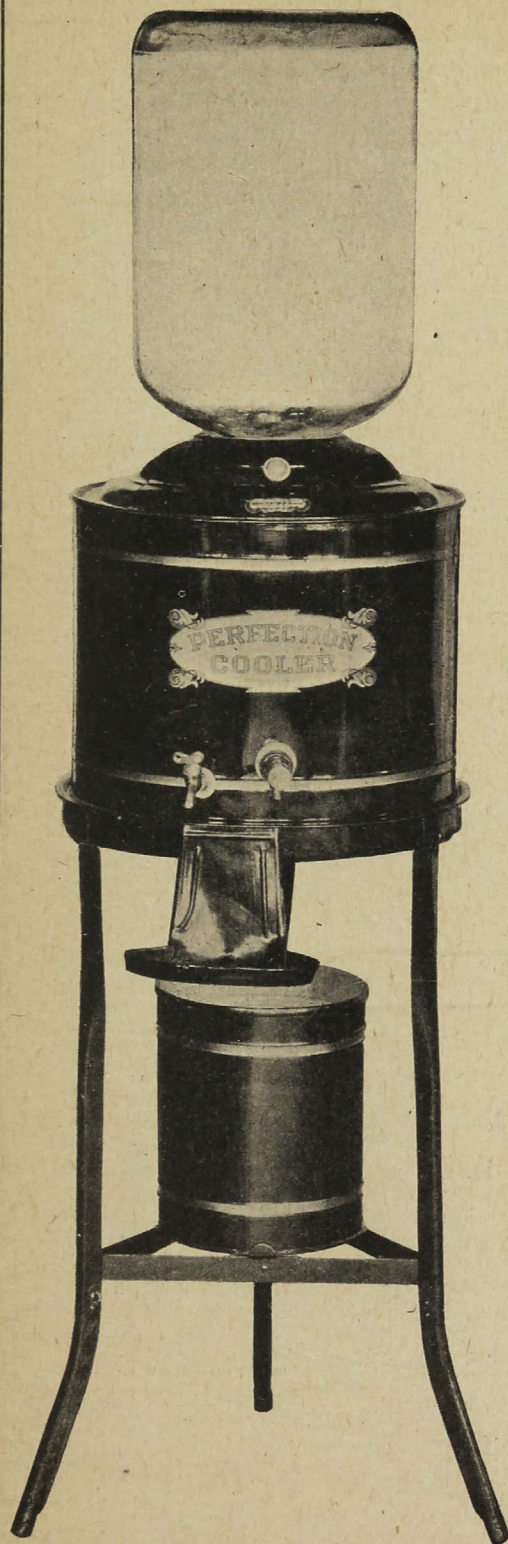
THE ACME DAIRY
13-29 Essex Avenue
TORONTO

recently installed some of the most up-to-date machinery, in order that they may turn out a milk *second to none*. The new plant includes a filtering machine, a pasteurizing and a cooling equipment that cannot be excelled. ACME MILK is the *purest and cleanest* obtainable and has a *fat content that exceeds the average*.

These statements are of immediate interest to physicians, whose support we desire to have.



Our phone number is "Hillcrest 152"



An Introduction!

**THE NEW "W" STYLE
PERFECTION
WATER-COOLER**

Specially adapted for use in
hospitals and institutions.

***EFFICIENT
ECONOMICAL
SANITARY***

Made in Canada

Catalogues, Prices and
Discounts on request.

G. H. WOOD & CO.

Head Office :
28 Wellington Street E.
TORONTO, CANADA

Branches at
MONTREAL, OTTAWA

Also
Manufacturers and Distri-
butors of

PAPER DRINKING CUPS

LIQUID TOILET SOAPS

SOAP DISPENSERS

LINSEED SOFT SOAP

DISINFECTANTS

PAPER TOWELS

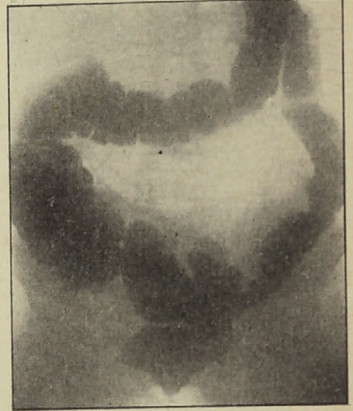
AIR PURIFIERS

Samples on Request

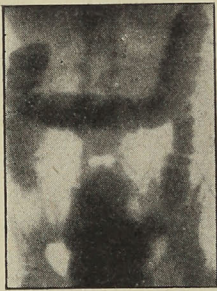
Indicated in adhesions

Adhesions are most likely to occur in the lower part of the colon. They are found present in cases of extremely obstinate constipation. A foremost roentgenologist and alimentary specialist states that in these conditions the lubricating action of liquid petrolatum is certainly indicated.

NUJOL is scientifically adapted by both viscosity and specific gravity to the physiology of the human intestines. In determining a viscosity best adapted to general requirements, the makers of Nujol tried consistencies ranging from a water-like fluid to a jelly. The viscosity of Nujol was fixed upon after exhaustive clinical test and research and is in accord with the highest medical opinion.



Adhesions of Pelvic Colon
in Constipation



Normal Colon

The unmatched resources of the manufacturers, the perfection of their technical equipment and an expert personnel place Nujol upon a basis of unique superiority.

Sample and authoritative literature dealing with the general and special uses of Nujol will be sent gratis upon request to Nujol Laboratories, Standard Oil Co. (New Jersey), 44 Beaver Street, New York.

Nujol

TRADE MARK

A Lubricant; not a Laxative

Guaranteed by Standard Oil Co. (New Jersey)

The Hospital World

TORONTO, CANADA

A Journal published in the interests of Hospitals, Sanatoria, Asylums and
Public Charitable Institutions throughout the British Empire.

Vol. XXIV

TORONTO, AUGUST, 1923

No. 2

Editorial

Massachusetts in the Van

The most important gathering of health workers ever held in New England took place in Springfield, Mass., recently. The *Transcript* says the conference brought to the surface the latest thoughts on the betterment of health, and that these ran in three principal currents: co-operation, prevention, and care of children. Whether the topic was mental hygiene, the new dentistry sanitation or therapy—the three dominant thoughts were there.

Dr. D. H. Thom drew attention to the two revolutions in medical thought: (1) the conservation of mental health and the preventive methods of mental ill health (in place of institutional care); (2) the care of the child instead of its neglect, as was the case formerly, when the child was left much to itself or even sacrificed to industry or economy.

Dr. H. D. Cross maintained that preventive treatment of the teeth of children must be accomplished before the age of six. The old idea was that the function of the dentist was merely to fill and repair teeth.

About ninety-five per cent. of American children show one or more defects of the teeth. Per contra: about the same per cent. of immigrant children from Southern Italy have sound teeth. The teeth of the immigrant children had (as a rule) never known a tooth brush. Further, the teeth of these foreigners after five or ten years in the United States showed the quality pretty well maintained, even in mouths that had little claim to be sanitary.

It would appear that the chief value in the use of the brush is the washing the mouth gets in the process. The brush, however, has much educational value in establishing health habits.

Prevention begins none too soon when consideration is given to the food of the infant—that which goes to form the tooth tissue.

As to the mental health of the child, the family must be “treated” before the child is approached at all. Facilities for treatment and prevention of mental ill-health are rare. More and greater facilities must be found and thus stem the fearful tide of lunacy.

Another problem discussed at this epochal meeting was: Is the health of the child a school problem? A second: is it just a fad, and not worth the

money it is likely to cost? The astonishingly low point of the average community health answers the second question. Community interest is necessary to bring the individual man (who may be responsible for the spread of ill health) into touch with other men for the betterment of the whole. Many folks do not know enough to protect themselves from communicable diseases. It is most important, therefore, that children (our future citizens) should be taught whatever is important to their well-being.

Schools afford two important lines of work: First, to do what can be done for the child; second, to teach the child what he can do for himself. This is the foundation of the proper health education of the people: It underlies that which must support all public health movements: a good, sound, well-grounded public opinion.

A health agency must make the people understand that its work is helpful. If it does this, there will be no difficulty about the funds with which to support the work.

Deep X-ray Therapy

Reginald Morton, M.D., C.M., who visited Canada last fall, and gave a paper on the above subject in Toronto, makes a contribution to a recent number of the *Lancet* in collaboration with Dr. Harrie B. Lee.

They give brief histories of a number of patients treated "when conditions were favorable." What constitutes "favorable conditions," they admit they do not know; for cases that one would expect to do well did not do well and others in which treatment was given as a placebo at the urgent request of patients and relatives, did surprisingly well. The authors conclude from this anomalous state of affairs that technique is still faulty; but they hope with improvement of technique results correspondingly better will be secured.

The authors followed the line of treatment—prescribed by Wintz, of Erlanger—of attacking deep-seated growths by multiple ports of entry.

They emphasize, too, the importance of administering treatment in large airy rooms, seeing that patients are exposed to an air considerably vitiated.

If the patient has a red blood count of less than 4 million, a preliminary course of intramuscular injections of iron and arsenic is given. In the severer secondary anemias ultra-violet radiation is administered before raying is attempted.

In some breast cases which have been repeatedly irradiated a collapse of underlying lung takes place.

Morton and Lee sum up by saying that the deep X-ray treatment of growths has now fairly established itself as a method of dealing with cases when nothing else can be done. The results in all cases make treatment worth while, and in "a few cases border on the miraculous."

On Writing

Dr. John Brown, of Edinburgh, says in one of his essays (all well worth reading) that their medical writers in those days, with a few signal exceptions, wrote ill—being slovenly, diffuse, often obscure, and curiously involved. He attributes this to the enormous amount of merely professional knowledge a man was expected to master before he wrote on any subject, and the absorbing nature of the new methods; as a consequence, the ignorance of general literature, and the much less association by men of medicine with men of letters than formerly.

Our author contends that Arbuthnot was not the worse physician, and all the better writer, from his being the companion of the famous wits whose good genius and doctor he was. Currie, Aikin, Gregory, Heberden, Cullen, Ferriar and Gooch were all the more powerful, and all the more permanent as medical authorities, from their having learned, by practice and example, to write forcibly, clearly, compactly, and with dignity and grace.

Says Brown: "The turbid, careless style, constipated or the reverse, by which much of our medical literature is characterized, is a disgrace to our age, and to the intelligence, good taste, and good breeding of our profession, and mars inconceivably the good that lies concealed and bungled within it.

"Let no one despise style. If thought is the gold, style is the stamp which makes it current, and

says under what king it was used. There is much in what Buffon says—"Style is the man himself."

To get a good style, Dr. Brown recommends us to keep good company and do our best, and "you will write and speak and act like a gentleman, because you think and feel and live with gentlemen."

Acute Suppurative Otitis

A writer in the *Lancet* states that as soon as earache occurs, the meatus should be cleansed. One in sixty carbolic solution may be used. Every four hours the meatus should be filled with a warm solution of carbolic in glycerine (twenty-five grains to the ounce), retained three minutes. A pad of cotton should then be applied and over it, a hot water bottle.

The drum should be incised under a general anesthetic if there is bulging or a bright velvety-red appearance, or when severe earache persists for twenty-four hours without improvement. A gauze drain should be placed in the meatus and a large pad of wool applied. The pad is changed when wet; the drain, by the doctor; If personal attention is impossible, the gauze drain may be removed at the end of twenty-four hours and the carbolic and glycerine drops used.

Pain usually ceases in a few hours after free discharge is established and the temperature becomes normal in two days.

If pain and temperature persist without improvement for more than three days—especially if mastoid tenderness be present or if discharge has ceased—the antrum and mastoid cells must be opened without further delay, unless the perforation has closed, when paracentesis should be repeated.

Should a child come first under attention with discharge a week old, with pain, fever and mastoid tenderness, hot fomentations and three-hourly syringing with hot one in sixty carbolic lotion will often bring about a cure.

Co-operation in Sickness

The workers in old Madrid, Spain, have maintained, since 1904, a health department in the co-operative society. It provides complete medical service for \$8.00 a year for each member. There are seven clinic hospitals in different parts of the city, each equipped with about ten beds, an up-to-date operating room, a dental clinic, consulting rooms, an immaculate tiled kitchen, and a garden for convalescents. Each has a staff of physicians, surgeons and nurses. The drug store connected with each hospital furnishes medicines, free of charge, to the members, and sells to non-members at the current price. The co-operative society supplies the hospitals with provisions. Each member pays sixty-six cents a month to the society. For

this, besides the benefits of membership, he receives free medical service, major operations and advice at any time.

In New York City a similar experiment is being made by the Manhattan Health Society.

Mr. Richard Bradley, of Boston, has been advocating this plan for some years. It sounds sensible.

Mental Nursing

“It is practically impossible to find a nurse in this community who is willing (perhaps anxious) to look after a mental case in private.”

Such is the statement of Dr. Mathers, Director of the psychopathic clinic in Winnipeg. This was due (he added), to the feeling nurses had that mental cases were hard to look after, and that the work was arduous, which was absolutely incorrect.

Nurses from the General Hospital, Winnipeg, go to the psychopathic clinic for two months' training. Dr. Mathers thought that was not long enough. He would like to make it possible for the nurses from any hospital to take the training—at least, those who would choose to train there. It was important that nurses should receive instruction in disorders of this most important part of the individual, in order that they may go out and help to spread the new doctrine regarding mental disease.

The Hospital World

(Incorporating The Journal of Preventive Medicine and Sociology)

Toronto, Canada

The official organ of The Canadian Hospital Association, The Alberta Hospital Association and The British Columbia Hospital Association.

Editors:

ALEXANDER MacKAY, M.D., Inspector of Hospitals, Province of Ontario.

JOHN N. E. BROWN, M.B. (Tor.), Ex-Sec'y American and Canadian Hospital Associations, Former Supt. Toronto General and Detroit General Hospitals.

M. T. MacEACHERN, M.D., Director-General, Victorian Order of Nurses, Ottawa.
W. A. YOUNG, M.D., L.R.C.P. (London, Eng.), Toronto, Ont., Consultant, Toronto Hospital for Incurables.
MAUDE A. PERRY, B.S., Supervising Dietitian, Montreal General Hospital

Associate Editors:

Ontario

C. J. C. O. HASTINGS, M.D., Medical Health Officer, City of Toronto.

N. A. POWELL, M.D., C.M., late Senior Assistant Surgeon-in-charge, Shields Emergency Hospital, Toronto.

P. H. BRYCE, M.D., late Medical Officer, Federal Dept. of Immigration, Ottawa.

HERBERT A. BRUCE, M.D., F.R.C.S., Founder of Wellesley Hospital, Toronto.

J. H. HOLBROOK, M.B., Physician-in-Chief, Mountain Sanatorium, Hamilton.

C. K. CLARKE, M.D., LL.D., Medical Director of the Canadian National Committee for Mental Hygiene, Toronto.

HELEN MacMURCHY, B.A., M.D., Late Asst. Inspector of Hospitals of Ontario, Toronto.

Quebec

H. E. WEBSTER, Esq., Superintendent, The Royal Victoria Hospital, Montreal.

A. K. HAYWOOD, M.D., Superintendent, Montreal General Hospital, Montreal.

J. R. BYERS, M.D., Superintendent, Laurantian Sanitarium, Ste. Agathe des Monts.

Nova Scotia

W. H. HATTIE, Provincial Health Officer, Department of Public Health, Nova Scotia, Halifax.

Manitoba

DAVID A. STEWART, M.D., Medical Superintendent, Manitoba Sanatorium for Consumptives, Ninette.

Alberta

T. H. WHITELOW, B.A., M.B., University of Toronto, Medical Officer of Health, Edmonton.

A. FISHER, M.D., Superintendent, Calgary General Hospital, Calgary.

Saskatchewan

J. G. WRIGHT, M.D., C.M., Regina.

M. R. BOW, M.D., Superintendent, Regina General Hospital, Regina.

J. W. S. McCULLOUGH, M.D., Chief Officer of Health for the Province of Ontario, Toronto.

J. H. ELLIOTT, M.D., Asst. Medicine and Clinical Medicine, University of Toronto.

H. A. BOYCE, M.D., Kingston, Ex-Secretary Canadian Hospital Association.

GEORGE D. PORTER, M.D., Toronto, Ex-Secretary Canadian Association for the Prevention of Tuberculosis.

G. MURRAY FLOCK, M.B., Physician-in-charge, Essex County Sanatorium, Union-on-the-Lake, Kingsville.

C. M. HINCKS, B.A., M.B., Assistant Medical Director of the Canadian National Committee for Mental Hygiene, Toronto.

British Columbia

ARTHUR G. PRICE, M.D., Medical Health Officer, City of Victoria, Victoria.

M. T. MacEACHERN, M.D., Superintendent, Vancouver General Hospital, Vancouver.

H. C. WRINCH, M.D., Superintendent, Hazelton Hospital, Hazelton.

Great Britain

CONRAD THIES, Esq., late Secretary, Royal Free Hospital, London, England.

DONALD J. MACKINTOSH, M.D., M.V.O., Medical Superintendent, Western Infirmary, Glasgow, Scotland.

United States

CHRISTIAN R. HOLMES, M.D., Cincinnati, Ohio.

MISS MARGARET CONROY, Boston, Mass.

DR. FRANK CLARE ENGLISH, General Secretary, Protestant Hospital Association, St. Luke's Hospital, Cleveland, Ohio.

THOMAS BEATH, M.D. (late Superintendent, Victoria Hospital, Winnipeg), Raleigh, N.C.

All Communications, Correspondence, and Matter regarding Subscriptions and Advertisements TO BE ADDRESSED TO "THE HOSPITAL WORLD," 145 COLLEGE ST., TORONTO, CANADA.

Reprints, including Half-tones, etc., Supplied Authors at Net Cost.

Original Contribution

THE HOSPITAL NUTRITION CLINIC

MISS MAUDE A. PERRY, B.S., SUPERVISING DIETITIAN,
MONTREAL GENERAL HOSPITAL.

The alarming prevalence of malnutrition of growing children has awakened the interest of hospitals as well as of schools in the problem of alleviation of this condition. This interest is another indication of the increasing realization of thinking people, that an ounce of prevention in this direction is worth more than a pound of cure. In connection with large hospitals in Boston, New York, Chicago, and other large cities, clinics for these children are being conducted with the purpose of discovering and correcting the faults responsible for the retardation of children in school, and for serious defects of nervous and physical defects in adult life.

Physicians of to-day concede that malnutrition, when not accompanying serious illness, has been overlooked and neglected in the past, as few realized the handicap under which the under-nourished child has labored. Dr. Wm. R. P. Emerson of Boston, who is perhaps our leading authority in nutritional work says "one child in every three is under weight," and that these children are stunted mentally as well as physically and that unless corrective measures are instituted at the proper time, "these children will remain so throughout life." In every case of malnutrition of children, free from organic disease, the cause is remediable if taken in time. Physicians experience great difficulty in obtaining access to these cases unless the child is really ill. One physician remarked that he makes twenty calls to correct illnesses caused by dietary indiscretions, to each call where he is given an opportunity to do preventive work. There are many reasons why this is so. Many malnourished children have round faces and

look well when dressed, because the easily distinguishable signs of malnutrition, winged shoulder blades, protuberant abdomen and flabby muscles, are hidden by the clothing.

Children between the ages of two years and sixteen years suffer most from undernourishment. This is usually not discovered until some undue strain reveals the unsuspected weakness. Children who are run down, frail, delicate, thin, anemic, small for their age, always tired, easily upset, irritable over trifles, restless, nervous, difficult to manage, finicky about foods, and backward in school are usually malnourished.

In January, 1921, we decided to start a small nutrition class at the Montreal General Hospital, in connection with our out-patient department, with Dr. A. B. Chandler as examining physician and myself as class leader. The plan of the clinic was, and still is, to accept as members of the class, children whose weight was more than seven per cent. below normal, and to instruct both parents and children in proper food and health habits; for malnutrition in the majority of cases is due more to ignorance than to poverty. We have no age limit for admission of children. Some clinics work with children of school age only, but I think that the period from two years to six is as important, if not more so sometimes, for the correction of bad food and health habits. We have even taken infants who were straight feeding, not medical cases, and have obtained good results by education of the mother. We have one baby nine months of age, who looked like an almost hopeless proposition at six weeks of age. She is fine now, gaining weight every week and as bright and happy a baby as anyone could wish to see.

The children are admitted to the clinic by request of the Out-Patients' Children's Clinic, The Victorian Order of Nurses, The Patriotic Fund, City Schools, or other social agencies. Children of any race or religion are taken. Every Saturday forenoon all children are undressed and weighed in muslin gowns made for this purpose, to avoid variation of weight occasioned by change of clothing. The weight is charted and the child who heads the class by the greatest gain is given a prize in addition to the gold star which is placed on his record. The charts are hung upon the wall so that each

child may follow his or her own progress from week to week. Each child upon admission is given a thorough medical examination and if at any time his progress is not satisfactory or he does not seem well, he is given further medical attention as seems necessary. Any defects such as enlarged tonsils, adenoids, decayed teeth or poor eyesight are remedied as soon as possible. We have also been fortunate enough to detect disease that might have gone unnoticed for some time, had the child not had the benefit of this clinic. One case of incipient hip disease was discovered at a very early stage. Neglected, this child might have been a cripple for life. She was sent to a specialist who put her into a cast and cared for her and to-day she is normal. Another child developed tuberculosis following influenza and pneumonia. She was sent to a sanitarium where she was given the proper treatment under ideal conditions and to-day she is six pounds above normal in weight and the infection is arrested, probably for her lifetime.

By class method an effort is made to teach the importance of correct food and health habits to both parents and children. I do this by means of charts, stories, games, discussions, or in any other way that seems advisable. In order to get good results it is necessary to have parental co-operation and in this we have been wonderfully successful. It is often necessary to do individual work and in cases where special instruction seems essential, one can accomplish much more if the mother understands and follows by actual observation the progress of the clinic. So the mothers come with the children and the child's chart records this with a colored star. This also minimizes the necessity of home visiting in many cases. However, we do have the invaluable aid of one of our hospital social workers. She investigates the financial and home conditions surrounding each child. In instances where she finds that the family is not able to provide at least a pint of milk daily for undernourished children, she provides this from a fund donated to the social service department by the Junior League young women who have charge of a lunch counter in the out-patient department of the hospital.

Contributing causes of malnutrition, other than poverty and physical defects, are rapid eating, improper foods, irregularity of meals, refusal of breakfast, overactivity, late hours, undue excitement, poor sleeping conditions, long hours at school, lack of fresh air, and absence of home control. Correction of even one of these has yielded great improvement in a child. It seems to me, however, that one who expects only rapid chartable results may make a great mistake in nutritional work. These are sometimes most elusive and if the circumstances surrounding each child were not known, it would be easy to come to the false conclusion that our work was not obtaining results. From experience, I know that though many cases of very slow improvement cannot be charted at all satisfactorily, there is a real improvement in the children long before the chart lines show any appreciable rise. They are learning truths which will affect the tenor of adult life, although family financial stringency may prevent them from obtaining full benefit of these at present time. We have some children with serious physical defects who come to us for instruction so that right living will strengthen their vitality and build a stronger resistance to disease for which they are receiving medical attention in other clinics. We plan in this work, to raise the weight of every child up to or slightly above normal, for his age and height, and in this way to improve his mental, nervous and physical faculties. When we read statistics of infant and child mortality in some localities, we find food for very earnest thought, and we cannot fail to realize that some part of this could have been avoided by broader and more widespread education of parents and children. Canada needs people who will be strong to develop her wonderful resources and to direct her future destiny, so she cannot afford to neglect the children who are her potential population.



Selected Articles



PUBLIC HEALTH NURSING

The first laws on the subject of public health nursing were passed by Massachusetts and Pennsylvania in 1911. Massachusetts appropriated \$2,000 for a district nurse, afterwards amended by striking out the limit in amount of money, and Pennsylvania permitted school boards to employ nurses. Fifteen States are to-day without specific laws on public health nursing, Maine and Rhode Island being the New England representatives in the group. Only two States, New York and Kentucky, expressly provide for the nurses, the laws of the other States being permissive. There are some curious features in the laws, for example: in Connecticut one law authorizes school authorities to appoint public health nurses, and another permits cities and towns to employ visiting nurses without specification of the department that is to employ them.

Five States may employ nurses direct, about twenty States have provision for their employment by the county, fifteen States permit cities to employ them and fourteen States, not all of them the same, extend the permission to towns and villages. General public health nursing is authorized in some nineteen States, school nurses in sixteen States and tuberculosis nurses in ten States. Indiana provides for nurses in mental hygiene, Montana for child welfare, Delaware for midwives and Idaho and Wisconsin for social work nurses. The health authorities direct the nursing work in twelve States, educational officers have the authority in twelve States, county commissioners have the management of the nurses in four States, private agencies with the help of State funds administer the work in three States, and in seven States there are laws which do not specify the precise official body which is to manage the nursing work.

In Alabama full-time county health officers have charge of public health work with authority to employ physicians, nurses, etc. In California, cities, towns and counties through their governing boards are permitted to employ properly qualified nurses. A later act specifies that nurses shall be registered. Connecticut has already been spoken of with reference to its double lines of control. In Delaware boards of education may employ school nurses and the State board of health is authorized to expend \$2,000 for a full-time, registered, trained nurse to educate and supervise the midwives. The Georgia law permits boards of health to employ visiting nurses for the examination of school children. Idaho authorizes county commissioners to employ graduate, trained nurses for schools, for the poor of the county, to give instruction of a preventive character with reference to tuberculosis, to be visiting nurses and to act with juvenile courts.

Indiana requires medical inspection in the schools of cities of 100,000 of population and nurses may be here employed. Hospitals for the insane are authorized to employ visiting nurses and in cities a limited amount of the tax levy may be given to voluntary public health nursing associations for their work. In Iowa boards of supervisors, city and town councils and school boards are empowered to employ public health nurses and may co-operate for the purpose. Kansas authorizes the first and second class cities to finance to a limited extent the work of nursing associations.

Kentucky established in 1920 a bureau of public health education at the University of Louisville, also a bureau of public health nursing to co-operate with official and voluntary agencies in the State. The State of Kansas will subsidize any county, district or tuberculosis association not operated for profit, for the employment of a registered nurse. Maryland leaves the whole matter for nurses in the hands of its State board of health. In Massachusetts towns and cities may employ nurses. School committees may appoint nurses but where school medical inspection is vested in the board of health, the latter shall appoint them.

Michigan permits the inhabitants of any town or towns jointly, to grant money for a public health nurse. She is prohibited from making diagnoses or prescribing drugs or treat-

ment. No person who objects, or minor whose parents object, shall be subjected to physical examination. Sex hygiene shall not be taught by nurses in the public schools. In Minnesota city, town, village or county authorities may employ public health nurses registered in the State. "Expenses" is held to include offices with furnishings and supplies, transportation, travelling expenses, telephone, and clerical help incidentals. In Missouri on the request of an anti-tuberculosis association the city or county authorities may employ a tuberculosis nurse. On petition of 250 taxpayers the city council or county court shall be bound to provide such nurse or nurses. In Montana school boards may employ registered nurses. In Nebraska the governing bodies of the communities may employ a visiting community nurse and for salary and expenses a tax of not more than five mills may be levied. The nurse may be given police power. Cities may employ nurses to be paid for out of the general fund. There is a referendum clause covering the expenses of the nurse. In New Hampshire the towns may subsidize visiting nurses' associations. In New Jersey the registered nurse shall be a tuberculosis nurse and her duties in connection with that disease. New York has a division of public health nursing in the State Health Department, with a good deal of special legislation on the duties of such nurses. North Carolina provides for a training school for nurses at the State Sanatorium. North Dakota gives county commissioners authority to approve bills and consider recommendations for service when presented by any town, county, district or State antituberculosis association. Physicians and registered nurses for schools may be employed by the county authorities. In Ohio the local board of health may appoint nurses. County commissioners may appoint nurses for tuberculosis. School nurses are also provided for. Oregon provides for public health nurses in tuberculosis work. Pennsylvania places little restriction on the employment of nurses for school, further than that they shall be graduates of reputable training schools.

South Carolina provides for school nurses for medical or dental examinations of school children. In South Dakota the county board of health files an application for one or more

nurses. The county commissioners will then consider the petition. They may appoint without the petition. The nurse must be termed "county nurse," and wear a uniform. When not needed by the county the nurse may be employed by cities, towns, associations or private individuals. The Utah law authorizes the State board of education to appoint a director of health education to supervise health education in the schools, subject to the consent of parents. School nurses are provided for in the general plan. In Vermont the medical inspector of the schools may be a physician or a nurse. Municipalities may appropriate money for a district nurse. Virginia appropriated in 1918 the sum of \$10,000, and in 1922 the sum of \$15,000 for 1923 and the same for 1924, for a unit of doctors and nurses to do tuberculosis work. In Washington the board of county commissioners is empowered to employ tuberculosis nurses. If there is a county hospital the nurses will be under the control of the hospital. In West Virginia boards of education may employ school nurses.—*Selected.*

CHRONIC MYOCARDITIS

Henry A. Christian (*Journal A.M.A.*, June 22nd, 1918) presents a clinical study of that form of cardiac disease which is characterized by the signs and symptoms of a failure of the heart to function efficiently and by the absence of valvular lesions. The symptoms are those of cardiac incompetency of greater or less severity. To this condition the name chronic myocarditis is given for want of a better. In a series of cardiac cases seen during a period of three years in general hospital wards there were 367 without organic valve lesion—that is, chronic myocarditis—and 359 with organic valve lesion. In a series of 107 consecutive autopsies on patients with cardiac disease who were over fifty years of age, mitral endocarditis was found in only two, confirming the rarity of organic mitral lesions in persons past middle life. Chronic myocarditis was found more frequently in males than in females, in the proportion of 240 males to 167 females and it was most frequent in the decade between fifty-one and sixty

and relatively uncommon below the age of forty. In respect of the etiology of the disease analysis showed that relatively few of the patients had suffered from rheumatic fever; the Wassermann reaction was positive in only thirty-five out of a total of 369 patients tested. Chronic alcoholism was present sufficiently often to suggest its having played some rôle, but analysis of the cases did not seem to point to its having been a factor of much etiological importance. Hypertension seemed to play a part in less than half of the patients and neither it nor nephritis seemed to have very great etiological significance, especially since these conditions might have been due to the same factor which caused the cardiac condition, or might have been purely secondary to the cardiac disease. Coronary sclerosis was a factor of importance in only about half of the cases. The commonest cardiac lesion was increased in the interstitial connective tissue, but this was absent from many of the cases which had presented typical clinical pictures. Clinically, besides the usual symptoms of cardiac weakness or loss of compensation, the heart was usually found to be enlarged, a systolic apical murmur was usually present, and about half of the cases showed auricular fibrillation or flutter, or some disturbance in the conduction system as shown in the electrocardiogram. Digitalis was of great value in the earlier breaks in compensation, but of little help in the later.

PRACTICAL POINTS FOR PUBLIC HEALTH NURSES

Miss Frances V. Brink, Superintendent of Nurses for the Minnesota State Board of Health, in an article in *The Public Health Nurse*, outlines the following ten points which she suggests every county public health nurse should keep in mind:

1. Do not *diagnose*. Do not use curative methods without a physician's orders and a parent's permission. Do not take children to clinics without parent's permission.

2. Do not confide your difficulties and criticisms to the teachers and town people. Take them to your nursing committee.

3. Do not make of your office a reception room for teachers or friends. Keep your office private, for patients, old and young.

4. Attend as many nurses' district, state and national meetings, conventions and institutes as possible.

5. Do not fail to demonstrate public health nursing through necessary bedside nursing, whenever possible.

6. Gain your teacher's confidence and give information as to how she may assist in bettering the physical condition of pupils.

7. Remember that one hour of home calling is worth more than four hours in the office.

8. Do have a plan of work most definitely mapped out. System accomplishes much.

9. Do not give up your work in the community in a short time after entering because it seems discouraging. This is pioneer work.

10. In case of a reported epidemic of contagious diseases in any part of your country, be ready and willing to offer assistance to the Health Officer of the district where the epidemic exists. If the Health Officer makes a request for your assistance, drop the routine work and answer this request.

Canadian Hospitals

EARLY HOSPITAL DAYS

With happy reminiscence and the renewal of former student friendships, the Alumnae Association of the Western Hospital Training School for Nurses celebrated the twenty-fifth anniversary of the institution at a reception and at home held in the hospital assembly-room on May 25th.

Preceding the programme the members, several of whom had come from as far as Prince Rupert on the west and Halifax on the east for the occasion, gladly availed themselves of the opportunity of chatting with the classmates, supervisors and superintendents who had helped to make their particular

three years of training a memorable experience. In the receiving line were Miss Jessie Cooper, president of the Alumnae, and the three past presidents, Mrs. Gilroy, Mrs. Heuston and Mrs. McConnell.

Mrs. Yorke, one of the first three graduates of the school, and first president of the Alumnae, presided over the gathering in the assembly hall. A message of welcome was brought by the Hon. Thomas Crawford, who has been chairman of the Board of Governors for the past eighteen years.

Some twenty-seven years ago the Western Hospital began its career as a modest dispensary on Euclid Avenue, according to Dr. E. A. McCullough, first medical superintendent of the hospital, who briefly traced the growth of the institution. Recognizing the need for hospital facilities in the western part of the city, several medical men joined their forces and were able to obtain a double house on Manning Avenue. In a very short time, however, this was found inadequate, and the south wing of the present building on Bathurst Street was erected.

From the first pupil nurse, Mrs. McConnell, came a vivid picture of the old days. In April, 1896, she entered the hospital, then on Manning Avenue, as a pupil nurse, and helped to care for the fourteen patients. Her course extended over only two years, and during that period she and the second student were presented by the governors with a handsome bicycle to be used on "half-days off."

Of the first class of five, three were present last night. There were now more than 300 graduates, and special pride was felt for those of that number who had offered for service overseas. One, Miss Lena Davis, had made the supreme sacrifice, and another, Miss Drysdale, had been decorated with the British Red Cross and the French Medal d'Honneur.

Flowers were presented to Miss McKee, present superintendent, and to four of the former superintendents who were present. Mrs. Skeans (Miss Hutson), Mrs. Shaw (Miss Smedley), Mrs. Keddie (Miss Bell), and Miss Ellis. Bouquets were also received by Dr. Stowe-Gullen and Miss Cooper.

Dr. Stowe-Gullen invested eight members of the Alumnae with life memberships, the first in the name of the late Miss

Lena Davis, going to her mother. Dr. John Ferguson read a message from Superintendent Tomlin. Refreshments were served at the close.

COMPLETE PLANS FOR HOSPITAL EXTENSION

Plans are already being prepared for the erection of a new wing to St. Michael's Hospital, on the Victoria Street property, recently purchased by the hospital authorities.

Though these plans have not as yet received the final endorsement of the hospital authorities it seems unlikely that they will be materially altered and the extent and nature of the additional building is clearly indicated by them.

The new wing is to be of very considerable extent, a five storey building, with a frontage of 200 feet on Victoria Street, and 100 feet on its northern side, whilst a large semi-circular courtyard will open to the south, providing light to the interior rooms of the building.

There will be a basement and five storeys in all and their uses are as follows: Basement, a morgue and necessary caretakers' and other offices; first and second floors, a modern X-ray department, waiting and examining rooms, third and fourth floors, wards, and fifth floor surgeons' quarters, bath rooms and general lavatory accommodation.

The large courtyard is to face south with an entrance from the northwest corner of the building. It will be partly above and partly on the ground floor level; skylights and windows opening upon it to provide illumination for the X-ray, ground floor, and basement apartments.

The actual date of commencement of building operations has not as yet been determined, though it may be looked for in the not far-distant future.

WELLESLEY NURSES GET DIPLOMAS

Eighteen nurses graduated on June 21st, from the Wellesley Hospital Training School, Toronto, the exercises being held on the tree-shaded lawns, with Sir William Mulock, President of the Hospital Board, in the chair. Rev. Stuart C.

Parker gave the opening prayer, and the diplomas and pins were presented by Mrs. H. D. Warren. Mrs. Sidney Small addressed the graduating class.

The nurses graduating are: Eleanor Hinch, Grace Savage, Miriam Smith, Dorothy Denike, Eileen Harrison, Helen Cunningham, Ruth Teeter, Reina Sparrow, Fern Johnston, Winnifred Snelgrove, Evelyn Cole, Ruth Jackson, Florence McKee, Elsie Hanna, Josephine Hayden, Marguerite McConnell, Margaret Stiles, Elizabeth Crozier.

The scholarships have been awarded as follows: General proficiency, 1st, Miss Eileen Harrison; 2nd, Miss Ruth Jackson.

The Herbert A. Bruce Scholarship for proficiency in operating room technique, to Miss Eleanor Hinch.

Intermediate year: Sir John Eaton Scholarship for general proficiency: 1st, Miss Estelle Follis; 2nd, Miss Mary McClinchy.

Junior year: Sir William Mulock scholarship for general proficiency: 1st, Miss Laura Lamb; 2nd, Miss Isobel Fraser.

DEATH OF HENRY C. TOMLIN

Suddenly collapsing as he was entering the dining room of Western Hospital, Toronto, on the morning of June 18th, Henry Charles Tomlin, 312 Russell Hill Rd., superintendent of the hospital for the past twelve years, succumbed to a heart seizure, before staff doctors could reach his side.

Deceased had enjoyed but fair health for some time. Two years ago he underwent an operation and only recently with the arrival of warmer weather and the knowledge that needed extensions at the hospital which he had striven for were begun, had he seemed to really pick up.

The late H. C. Tomlin was born in Surrey, England. He came with his parents to Canada and settled in Toronto at the age of fifteen. He was first associated with his father in the bakery business and himself conducted a bakery for twenty-two years. He had been connected with the hospital indirectly and upon selling out his business twelve years ago took over the active management of the hospital.

His activities in that field are well known. The present hospital as it stands with additions under erection, lives as a tribute to his work. His whole heart was in his work and to enlarge the building to keep abreast of the growing need for more accommodation was his one desire, aside from the welfare of the patients who entered the hospital.

Possessing a kindly disposition he was respected by all. His business training and desire to help suffering resulted in many changes following his acceptance of the management. His foresight saved the hospital thousands of dollars.

ROCKEFELLER GIVES LARGE SUM TO CANADIAN AND U. S. HOSPITALS

A gift of \$150,000, to be distributed among fifteen hospitals in Canada and the United States, to promote the use of insulin in the treatment of diabetes, was announced on June 20th, by John D. Rockefeller, junior.

The purpose of the gifts, Mr. Rockefeller said, would be to increase the number of free-ward patients who could be treated with insulin, and to teach physicians, in general practice, the proper methods of employing insulin in the treatment of diabetes.

The period during which the sums should be expended was not specified, but was left to the discretion of the hospital authorities. The Canadian hospitals which were selected by the committee headed by Dr. Simon Flexner, were named as follows: Montreal, Royal Victoria Hospital; Toronto, Hospital for Sick Children, Toronto General Hospital and University of Toronto Banting-Best fund.

With the exception of the Presbyterian Hospital in New York, which will receive \$15,000, and the University of Toronto Banting-Best Fund, which will receive \$5,000, the gifts were of \$10,000 each.

HOSPITAL'S WORK GROWS

At the annual meeting of the Board of Trustees of the Hospital for Sick Children, the principal business was the election of the officers, as follows: Sir Edmund B. Osler,

honorary chairman; H. H. Williams, re-elected chairman of the Board of Trustees; Irving E. Robertson, re-elected vice-chairman of the Board of Trustees; executive committee: R. A. Laidlaw, Thos. H. Wood, Wilmot L. Matthews, with the chairman and vice-chairman ex-officio members; Watson Swaine was re-appointed superintendent and secretary-treasurer; Miss Kathleen Panton was re-appointed superintendent of nurses; the members of the medical and surgical staffs, as detailed in the annual report, were re-appointed for the ensuing year.

The board also appointed the Medical Advisory Board as follows: Dr. W. E. Gallie, chairman of the board; Dr. I. H. Erb, secretary; Dr. Alan Brown, Dr. W. H. Lowry, Dr. Edmund Boyd. Messrs. Clarkson, Gordon and Dilworth were re-appointed auditors.

The meeting recognized the great service rendered by Mr. L. Solman to the Hospital and the Lakeside Home and a hearty vote of thanks was recorded.

The meeting also recorded the thanks of the Hospital authorities for the services rendered by the John Ross Robertson Lodge in the transportation of the patients to and from the Lakeside Home.

The meeting closed with a resolution thanking the staffs, both medical and surgical—consultant and active—for their loyalty, and for the valuable services they have rendered during the year.

Statistics were tabled showing a continued increase in the hospital work, the first eight months of the current year having exceeded all records for a similar period, with 58,110 patient days, as compared with 56,842 of the previous year.

The out-patient department continues to show increased activity, a greater interest by parents, and more treatments than in the history of the hospital. The treatments to the month of May were 40,731, an increase of 661 over the highest comparative period on record.

The hospital has recently received a gift of \$10,000 from John D. Rockefeller, Jr., specifically earmarked for the purchase of insulin and treatment of diabetics.

Dr. F. G. Banting, the discoverer of insulin, has been appointed physician to the diabetic patients in this hospital.

MISS M. A. STEWART APPOINTED SUPERINTENDENT OF LARGE HOSPITAL

Miss M. A. Stewart, who has been lady superintendent of the Guelph General Hospital for the past three years, has tendered her resignation to the board, having accepted a similar position in connection with the Children's Memorial Hospital in Chicago, which had 50,000 patients last year and enjoys a voluntary income of \$300,000 annually. She will there have an administrative staff of eighteen, of which she will be head, and will receive a salary double that she is receiving here. The Hospital Board at its monthly meeting, in accepting the resignation, passed a resolution complimenting her on the great work she had done for the Guelph General Hospital, and expressing regret at her leaving.

DIABETIC HOSPITAL IN TORONTO?

The entire second floor of the private pavilion of the Toronto General Hospital is to be given over to diabetic patients who are being treated with insulin. Heretofore, the work which was conducted in the nature of a research clinic, and all fees coming from patients receiving treatment, went to pay for the upkeep of the clinic.

Now that there is sufficient insulin, and the potency of it has about become standardized, and it is available for use by the doctors who have taken a short course on its administration, private practitioners may take their patients to the hospital as they would other patients suffering from other troubles.

It is something in the nature of an experiment, in that by a year from now it is hoped to be established just what the requirements are for diabetic treatments. Whether many practitioners from outside places will send their patients to Toronto is not yet known.

If a hospital were established for that purpose here, it would mean that Toronto would become a great centre for the treatment of diabetics.

NEED OF 8-HOUR DAY FOR STUDENT NURSES

Eighty-four young women, in smart, workmanlike uniforms, stepped up to the platform in Convocation Hall on May 31st, and, flushed and smiling with the joy of attainment after three strenuous years, returned with the diploma entitling them to the standing of graduate nurse. For every one of the eighty-four newly fledged nurses who last night left their alma mater, the Toronto General Hospital Training School, for new and varied fields of activity, the occasion was indeed memorable. The large hall was filled to capacity, four of the upper galleries being occupied by fellow-students and the remainder overflowing with admiring friends and relatives.

C. S. Blackwell, Chairman of the Board of Trustees, presided. Following the invocation by Rev. John MacNeill, the report of the Superintendent of Nurses was read by Miss Jean I. Gunn, who was given an ovation by the class of graduates facing the platform.

During the year, Miss Gunn stated, 983 applications had been received and of this number ninety had been accepted on probation. There had been a good deal of illness among the nurses during the year, continued the report, due, no doubt, to the strain of long hours and little time for necessary recreation. "If the Provincial Government would establish an eight-hour working day for student nurses, it would have a very beneficial effect as a preventive health measure and as a protection for the nurses," said Miss Gunn. Students could exist without the hospital, but no hospital could possibly carry on without the student nurse, and it was to be deplored that so frequently she appeared to be the last consideration.

Many and ingenious were the schemes evolved for the raising of \$500, the sum allotted to the Toronto General Hospital nurses as their share in the Canadian nurses' war memorial. Beds were made on weekly contract; hairdressing and manicuring became money-making occupations; shoes were shined for a consideration, and even a dressmaking establishment came into existence.

Miss Gunn referred to the fact that the two graduates who, by reason of their class standing, should have received the public health scholarships, were prevented from accepting. They were Miss Grace Margaret Hogg, of Chefoo, China, and Miss Edith Marion Ross, of Dundas, Ont.

ANOTHER SPLENDID ROCKEFELLER GIFT

Through the benevolence of Mr. John D. Rockefeller, Jr., Toronto General Hospital and the Hospital for Sick Children are each to receive \$10,000, and the University of Toronto the sum of \$5,000; the money to be devoted to research in insulin, to be conducted by Dr. Banting. Mr. Rockefeller has apparently been watching with keen interest the development of the insulin treatment of diabetes and a few weeks ago announced that he would support the work by giving the sums above mentioned to be used in the furtherance of the treatment of diabetes among the indigent.

In making this donation to Toronto, Mr. Rockefeller is desirous of recognizing especially the home of the discoverer of insulin and the place where insulin has been first developed. While, strictly speaking, the purpose of the gift is to make possible the treatment of a larger number of indigent diabetic sufferers, and to assist the teaching of physicians in general practice in the proper method of employing insulin in the treatment of this disease, the disposition of the monies received is left to the discretion of the Governing Board of each recipient Institution, to be used in the manner in which it can best further the treatment of the disease. The gift of \$5,000 to the University, is, it is understood, to be added to the Banting-Best Fund recently established by the Legislature and is to be placed at the disposal of Dr. Banting in furthering research work.

OSHAWA HOSPITAL TRAINING SCHOOL FOR NURSES

Oshawa citizens of all classes turned out en masse on June 28th, to attend the commencement exercises of Oshawa Hospital Training School for Nurses, held in King Street Methodist Church. This was the tenth graduation class.

Those who graduated this year were: Miss Lucy Wilson, Picton; Miss Addie McLaren, Port Perry; Miss Lillian Stokes, Uxbridge, and Miss Nettie Johnson, Cordover Mines. J. D. Storie, President of the Hospital Board of Directors, presided.

The speaker of the evening was Dr. G. F. W. Ross, Toronto, who addressed the graduation class, referring to the duties of the profession and the ideals to which nurses should adhere.

Prizes and diplomas were presented to the graduates. The James F. W. Ross scholarship for general proficiency was presented by Dr. Ross to Miss Lucy Wilson; the pin for neatness, given by Mrs. Charles Robson, was presented by Mrs. A. M. Irwin, to Miss Addie McLaren; the superintendent's prize for bandaging was presented by Major Frank Chappell to Miss Lucy Wilson; the prize for the highest standing in intermediate year was awarded to Miss Lillian Stokes. This latter prize was donated by Mrs. Frank Robson, and was presented by Major Chappell. Miss Stokes was also awarded the prize for the highest standing in surgical technique, which was donated and presented by Dr. F. J. Rundle. Miss Johnson was awarded the prize for the highest standing in dietetics, which prize was presented by Major Chappell and donated by Mrs. Robert Williams. The prize for the highest standing in practical nursing was presented by Major Chappell to Miss Johnson, the prize being given by Mrs. J. D. Storie. Miss Stokes was awarded the prize given by Dr. T. W. G. McKay for the highest standing in obstetrical work. This prize was presented by Dr. F. L. Henry.

The auditorium was taxed to capacity with citizens who witnessed the exercises with intense interest. The musical programme was of a high order, H. C. Trenner, organist, and

choirmaster of King Street Church, presiding at the piano. The class was somewhat smaller this year than usual, but it is expected that a large number will graduate next year. Following the exercises a reception was held for the nurses, when they received the congratulations of their friends.

HOSPITAL DAMAGED

Damage to the extent of about \$1,000 was done to the Niagara Falls General Hospital on June 27th by fire and water. None of the patients were in danger.

DR. A. E. ROSS, M.P., RESIGNS

Dr. A. E. Ross, M.P., for Kingston, who has been superintendent of the Kingston General Hospital for several years, has resigned that position in order to take up private practice. Dr. Ross tendered his resignation both before and after his election, but the Governors prevailed on him to stay.

FORTY-FOUR NURSES QUALIFY FOR PUBLIC HEALTH DIPLOMAS

Examination results of the Department of Public Health Nursing were announced on May 11th. The following candidates are eligible for the diploma in public health nursing:

Miss A. G. Armstrong, Mrs. M. Aspinall, Misses H. P. Barnett, B. A. Bloy, M. H. Barnett, E. A. Cale, M. M. Campbell, E. M. Christie, E. M. Glendenning, Mrs. J. F. Clissold, Misses M. D. Coatsworth, I. Coyle, L. L. Douglas, M. Duffield, L. J. Dyer, E. Ecclestone, J. Elliott, E. E. Fraser, E. Fry, H. B. Gardner, C. E. Greenwood, M. Grieves, M. E. Haszard, Mrs. A. H. Haygarth, Misses H. M. Long, E. A. Luxon, M. L. McCrohan, M. M. MacMillan, M. E. Mullen, S. E. Murphy, M. S. Proctor, M. I. Ririe, R. E. Sanders, M. Shackleton, V. R. Shipman, M. V. N. Sinclair, E. Sutton, F. Taylor, M. A. Twiddy, K. M. Van Allen, E. J. Walker, M. G. Wilson, M. L. Wilson, D. M. Wright.

FIRE AT ST. ANN HOSPITAL FOR THE INSANE

Acting like soldiers on parade, and offering not the least trouble, some 250 male inmates of the St. Ann hospital for the insane at Baie St. Paul, Que., were marched out of the building at two o'clock on May 11th when the north wing of the institution in which they were located was completely destroyed by fire involving a material loss of \$150,000.

The destroyed building, which was of brick construction, five storeys high, was erected three years ago.

It was operated by Les Petites Soeurs Franciscanes de Marie.

The fire was discovered by one of the inmates, who, in raising the alarm shouted at the top of his voice: "I am burning, sister, I am burning."

The sixteen sisters who have charge of the wing rushed into their clothing and proceeded to release the patients and muster them out. The flames spread rapidly and the menace of being hemmed in and cut off was great, but not one of the patients gave trouble. The fire seemed to breed in them a spirit of docility that helped the sisters in clearing the building. Some of the patients seemed to develop remarkable intuitive qualities and performed heroic acts of rescue.

The patients were marched downstairs to the first floor, given clothing and immediately afterwards were conducted outside and into other sections of the hospital not affected by the fire.

Though the patients were all mental defectives and ranged in age from three years to seventy-five, not a single casualty occurred.

This was attributed as much to the fine behavior of the vast majority of the patients as to the heroic efforts of the sisters.

TORONTO EAST GENERAL HOSPITAL ASSOCIATION

General feeling on the part of residents of East Toronto that hospital facilities more commensurate with its population should be provided in that section of the city, found ex-

pression on May 10th at a public meeting in Riverdale Collegiate Institute. Upon the motion of Isaac Pimblett and L. W. Trull, a resolution was adopted calling for the organization of a body to be known as the Toronto East General Hospital Association.

The resolution further authorized the appointment of a board of trustees to assume the responsibility for the administration of the funds secured and the details involved in the erection of the hospital. It also recommended the holding of a tag day for campaign purposes.

Dr. S. W. Plewes quoted statistics to show that Toronto did not compare favorably with other cities of Ontario, in the matter of hospital accommodation. In the number of beds in hospitals per thousand of population, he gave the following comparison: Kingston, 19.4; London, 14.8; Guelph, 9.9; Hamilton, 7.3; Toronto, 4.6. Hospital accommodation was the same now, he said, as in 1913, though the population had increased by 83,000 in that time.

Dr. E. A. McDonald said that there were not sufficient emergency beds in the Toronto hospitals to cope with a sudden epidemic or catastrophe. Many lives in the east end had been lost during the influenza epidemic of 1918, he said, because they could not be admitted to the hospitals in time. Of the 2,283 hospital beds in Toronto, 2,105 were filled as a general rule. He believed that the sum of \$100,000, left for such a purpose by the late William Hill would serve as the nucleus for the fund toward a new hospital.

Rev. Father M. Cline commented upon the population east of the Don, approaching 150,000, and said that a city of that size lacking a hospital would be considered behind the times. Frank Johnston, while in favor of a hospital, thought that it should be built by the city at large and the City Council be approached in the matter.

Riverdale Salvation Army Band was in attendance. Controller W. W. Hiltz presided.

MANY NURSES GRADUATE FROM ST. MICHAEL'S HOSPITAL

Thirty-one nurses received their diplomas at the recent graduation exercises of St. Michael's Hospital, Toronto, held at the Nurses' Residence. Dr. Gideon Silverthorn presided, and the speakers were: Dr. Magner, Dr. Harris McPhedran, Rev. Dr. O'Leary and Rev. Father Cline. Miss Dorothy James, Ottawa, was awarded the scholarship presented by the Hospital Women's Auxiliary for the highest standing in final year examinations, which provides for a post-graduate public health course at the University of Toronto.

The list of graduates is as follows: Hazel Ogilvie, Toronto; Christina Claremont, Gravenhurst; Mary Nealon, Toronto; Roselle Grogan, Toronto; Audrey Kearns, Toronto; Frances McVean, Malton; Mary Brown, Toronto; Edna Overend, Orillia; Irene McGurk, Toronto; Irene LeBlanc, Richibucto, N.B.; Marie Barry, Regina; Marion Harrison, Toronto; Elizabeth Crowley, Stratford; Elizabeth Seeney, Dublin, Ont.; Anna Creede, Owen Sound; Frances Hughes, Toronto; Maud Szammers, Toronto; Dorothy James, Ottawa; Mary Hanley, Kitchener; Maud Lawlor, Hawkestone; Maisie Young, Sudbury; Irene LeGree, Toronto; Marie Melody, Hamilton; Helen McGeough, Toronto; Edna Dias, Sydney, N.B.; Edna Rosar, Toronto; Mary McQuillen, Toronto; Pauline Burns, Lindsay; Helen O'Meara, Ottawa; Esther Collins, Peterboro'; Mary Hawkins, Tweed.

NEW MEASLES HOSPITAL

At its regular meeting on May 10th the Board of Health of Toronto decided to recommend to City Council that the city architect be instructed to prepare plans for a new measles hospital, to be erected adjacent to the Isolation Hospital, just east of the Don, north of Gerrard street. Council will also be informed that, owing to its delay in dealing with this matter the last time the board made a somewhat similar recommendation, it has become necessary to sign another lease on the private house on Selby Street, which is now being used as a measles hospital.

Items

KING LAUDS FINE GIFT TO MEDICAL SCIENCE

King George and Queen Mary, surrounded by British medical scientists in academic robes, on May 31st, laid the corner-stones of the hospital building being added to the University College Hospital and London University groups, as a result of the £1,250,000 gift from the Rockefeller Foundation.

The improvements are expected to make London hospitals among the finest equipped in the world, and allow the inauguration of an important experiment in the "unit" system of medical education, whereby the different wards are assigned to directors, who are not allowed to have private practices, but must devote their whole time to their students.

The "magnificent generosity" which makes this possible was warmly commended by the King in his speech today.

"It has been said that science knows no frontiers," he said, "and indeed the declared purpose of the trustees is to promote the well-being of mankind throughout the world. That they should have selected the University of London to receive this princely endowment is not merely a high and well-deserved compliment, and the creation of yet another tie of sympathy and friendship which links us with the United States, but it is also evidence and declaration of their conviction that the progress of science and the welfare of mankind is not delimited by national or racial boundaries, and that the work done here in London for the relief of human suffering, the improvement of medical education and the advance of science, is of service to the whole world."

DIETETIC NEWS

The sixth annual convention of the American Dietetic Association will be held in Indianapolis, Indiana, at Hotel Claypool, on October 15th, 16th, and 17th, 1923. The Canadian members of this association are:—

Caroline Burns, Toronto General Hospital, Toronto; Dorothy Chown, Sunnyside Hospital, Kingston; Olive Cruikshank,

MacDonald Institute, Guelph; Elsie Fearman, 332 Caroline St., Hamilton; Frances Hansford, 1175 Haro St., Vancouver, B.C.; Evelyn Hickman, 157 Bloor St. W., Toronto, Ont.; Margaret Hopper, General Hospital, Hamilton; Edith W. Jenkins, Montreal General Hospital, Montreal; Esther Kinney, General Hospital, Vancouver, B.C.; Annie L. Laird, Toronto University, Toronto, Ont. Aleda Lamminaw, Provincial School of Agriculture, Olds, Alberta; Robena Montgomery, Sherbrooke Hospital, Sherbrooke, Que.; Minnie Nickell, Ontario Military Hospital, Kingston; Mabel Parkin, Winnipeg General Hospital, Winnipeg; Maude A. Perry, Montreal General Hospital, Montreal; Y. M. Rebbeck, Calydon Sanitarium Ltd., Gravenhurst, Ont.; Violet Ryley, Bethany, Ont.; Elizabeth Sherwood, Daly Building, Ottawa, Ont.; Jennie Sparling, Brandon General Hospital, Brandon, Man.

Hospitals in Canada training pupil dietitians are:

General Public, St. John, N.B., Two; Montreal General, Montreal, P.Q., Two; Hamilton General, Hamilton, Ont., One; Sick Children's Hospital, Toronto, Ont., Two; Toronto General, Toronto, Ont.; Winnipeg General, Winnipeg, Manitoba, Two; Calgary General, Calgary, Alberta, Two; Vancouver General, Vancouver, B.C., Two.

Book Reviews

Environment and Resistance in Tuberculosis. A Presentation of the Nature of Environment and Resistance and their relation to the Pathology, Diagnosis, Symptoms and Treatment of Tuberculosis, by Allen K. Krause. Baltimore: The Williams & Wilkins Co. Price \$1.50 in the United States, Canada, Mexico and Cuba; \$1.60 in all other countries.

Discusses the protective reaction by which the tissues seek to hem in and wall off the first tubercle bacilli that enter the body; also the local conditions through which the body resists the development of tuberculosis.

Constitutional symptoms are the best indicator and guide of activity, and generally illumine the indefinite and shadowy line between the actual and potential patient.

Patients suffering incipiently from marked constitutional symptoms often feel better after bacilli appear in the sputum—nature having applied the prime surgical procedure of more or less evacuating the disease.

The tubercle formation and the lymphatic system are the barriers of defence. Then also, the way the tissues react determines in no small measure fibrosis, caseation and repair, e.g., resistance.

The Medical Clinics of North America. Published bi-monthly
W. B. Saunders Company: Philadelphia and London.

Of great interest is Engelbach's well-illustrated article on Endocrine Adiposity, in the July issue; Tierney's on Precocious Puberty. Soper's contribution on Dyspepsia will be of especial interest to the general practitioner, as well as Veeder's on Whole Buttermilk in Infant Feeding Over Long Periods. In the Ann Arbor number, (March), members of the staff of the Michigan State General Hospital shine; Newburg writes on High Fat Diet in Treating Diabetes Mellitus; Warfield on Hodgkin's Disease; Wile on Treatment of Syphilis Contraindicated; Cabort on Those Painful Women. Chorea, Chronic Pancreatitis, Endocarditis, Madelung's Deformities, and other timely topics are instructively dealt with.

Tachycardia, Protein Restriction in Bright's Disease, The Meltzer-Lyon Test in Gall-Bladder Disease, The Management of Diphtheria, Influence of Hydrogen-Ion Concentration on Digestion, Bacterial Asthma in Children, and Diet in Certain Intestinal Conditions, are a few of the attractive subjects dealt with authoritatively in this excellent magazine for September, 1922.

The Surgical Clinics of North America, February, 1923, Volume 3. Number 1. Philadelphia number. Published bi-monthly, W. B. Saunders Company, Philadelphia and London.

Deaver, Billings, Ashurst, Leslie Davis, Ebason, Frazier, Francis Grant, Houser, Jopson, Lipschutz, Muller, Ravdin, Skellern and Turner Thomas present an up-to-date programme on such subjects as Hernia, Pituitary Disorders, Surgery of the Stomach, Hip Disease, Effects of Morbid Tonsils, Cholecystitis, and the Use of Air in the Diagnosis of Intra-cranial Lesions. Fine number.

THE DANGERS OF PROPINQUITY

Dr. Alfred Eddowes recently contributed to the *Veterinary Journal*:

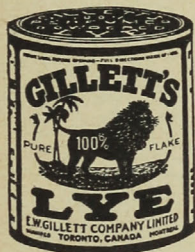
"Thirty years ago, when I was practising in the country, a young woman consulted me one evening for what was obviously ringworm on her cheek. A number of questions were put to her as to how she had caught it. She was a parlourmaid and 'had nothing to do with children, ponies, cats, or calves.' I begged her to look round on going home and send me word if she noticed anything like it. Next morning a man stepped into my consulting room. Seeing a ringworm on the centre of his forehead I merely asked his name and told him I could guess all the rest. He was cowman to Mr. C. of S—Park; that he had not been at the job long—was, in fact, quite a novice—otherwise he would have had a cap ready to wear while milking. Further, that he was in love with the pretty parlourmaid, and no wonder. 'Doctor, you know too-much, but it's all true,' was his reply, and I almost fancied myself a Sherlock Holmes!"

Hospital Superintendents

Should instruct their
Nurses and domestics to use

GILLETT'S PURE FLAKE LYE

for disinfecting sinks, closets and drains. It is also ideal for the cleansing of urinals and bed pans—in fact any vessel that requires disinfecting. Gillett's Flake Lye should always be used for scrubbing hospital bath tubs and operating room floors.



For cleansing and disinfecting, dissolve one tea-spoonful of Gillett's Lye in two gallons of water. The fine crystal flakes dissolve instantly in hot or cold water.

Beware of Imitations

Made only by

E. W. GILLETT CO., LIMITED

WINNIPEG TORONTO MONTREAL



Pure and Delicious

BAKER'S COCOA



Is a most satisfactory beverage. Fine flavor and aroma and it is healthful.

Well made cocoa contains nothing that is harmful and much that is beneficial.

It is practically all nutrition.

Choice Recipe Book Free.

Walter Baker & Co., Limited

DORCHESTER, MASS. Established 1780 MONTREAL, CAN

REGISTERED TRADE-MARK

THE ISABELLA PRIVATE HOSPITAL

Physicians will be interested to learn that a new, up-to-date Private Hospital has been opened at No. 94 Isabella Street, Toronto. The house is large, modern and solid-brick, beautifully furnished, every room having a most cheerful outlook. The street is quiet, being free from street cars, and therefore most suitable for convalescing patients. A graduate nurse is in charge and the rates are quite moderate.

BENGER'S FOOD—THE ADJUSTABLE DIET

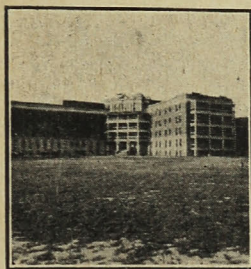
Benger's Food is prepared with fresh cow's milk. It forms a dainty cream which becomes the easier of digestion the longer it is allowed to stand after mixing, the process being capable of arrestment at any time by simply bringing the mixture to the boil.

Patients ordinarily unable to digest milk can take this mixture satisfactorily, as the Benger's Food so softens the casein that when under the influence of the gastric juice it forms into minute flocculæ instead of a heavy curd.

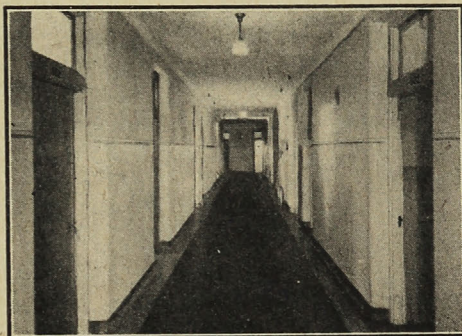
Benger's Food has a high nutrient value. The *Lancet* describes it as "Mr. Benger's admirable preparation."

THERAPEUTIC INDICATIONS OF BENZYL BENZOATE

Benzyl benzoate has marked vaso-dilator properties. It is therefore obviously indicated in spastic contraction of the arteries and just as obviously contra-indicated in arterio-sclerosis. In idiopathic or essential hypertension, high blood pressure without demonstrable renal involvement, the clinical results of benzyle benzoate medication are quite uniformly excellent. Even in the presence of nephritis the results have been gratifying; and repeated urinary examinations in such cases have failed to show any deleterious effects on the kidneys. Both systolic and diastolic b. p. readings show reduction, a purely symptomatic action according to Macht. When this has been accomplished by the use of full doses, the reduced pressure can be maintained by continuing the drug in small doses. Logically cases of arterio-sclerosis and of some renal affections must be eliminated since, in arterio-sclerosis, the calcified arteries are anatomically not capable of dilatation, and since in some cases of renal disease, reduction of the blood pressure may be harmful. Of this the physician will be the best judge as to the indication or contra-indication of this drug. Coincident with the lowered blood pressure there is an improvement in the patient's general condition; the precordial pain of hypertension is controlled; the anginal attacks, due as is generally supposed, to paroxysmal spasm of the coronary arteries, are materially relieved. One of the most convenient forms in which benzyl benzoate is obtainable is benzylets, soluble gelatin globules, each containing five (5) minims benzyl benzoate in its purest state—Benzylets are made by the well-known Drug House, Sharp & Dolme, of Baltimore and New York.



Exterior and Interior views of Royal Alexandra Hospital, Edmonton, Alta., floored with Dominion Battleship Linoleum.



A Floor Selected on Merit

Dominion Battleship Linoleum was installed in the Royal Alexandra Hospital, Edmonton, Alberta, because it possesses those qualities that are absolutely essential to the patients' welfare and the efficiency of the staff.

Its springy, resilient walking surface deadens all sound of footsteps; beds are easily moved over it and it is comfortable and restful to walk on. While highly germicidal and sanitary, Dominion Battleship Linoleum resists the heaviest traffic indefinitely, without showing signs of wear.

Dominion Battleship Linoleum

When properly applied with waterproof cement becomes a permanent floor, smooth and seamless. It cannot harbor dust or germs; it is easily kept clean and requires only an occasional waxing with a reliable floor wax to renew its original attractiveness.

Follow the lead of Canada's greatest hospitals, banks, schools, departmental stores, offices and public buildings by adopting it, thus enjoying the floor economy, health and comfort that Dominion Battleship Linoleum always brings. Made in four standard shades—brown, green, terra cotta and grey. Special colors on large contracts.

Folder showing Dominion Battleship in natural colors will be mailed on request. Samples sent institutions or individuals interested.



Dominion Oilcloth and Linoleum Co., Limited
Montreal

HORMOTONE

Hormotone is a combination of those hormones, or internal secretions, which co-operate in maintaining the dynamic force of the organism, that is, the asthenic condition. Hormotone has a marked stimulating effect on metabolism and oxidation and causes an increase in mental, nervous and muscular activity. It is a cell tonic of rare quality. Formula: Hormotone contains the hormones of the thyroid (1/10 gr.), pituitary (1/20), ovary and testis. Each constituent in Hormotone is in physiologic sympathy and therapeutic harmony with the others. Indications: Neurasthenia and all asthenic conditions; impotence, premature senility and the debilities of old age; menstrual disorders and climacteric disturbances; chronic cardiac cases with hypotension, circulatory stasis and cold extremities; convalescent and post-febrile weakness. Hormotone without post-pituitary should be used instead of the regular formula in high blood pressure and asthenic or vigorous conditions. Dosage: One or two tablets three times daily before meals. Hormotone is put up for physicians' prescriptions in bottles of 100, 500 and 1,000 two and a half grain tablets.

LEPTINOL.

Leptinol contains the desirable active principles of a species of *Leptotaenia*, and is unique in that, while it is a powerful therapeutic agent, it is practically non-toxic. The species of *Leptotaenia* from which Leptinol is produced, was first used in medicine during the epidemic of influenza in 1918 with remarkably good results. Since the first use, Leptinol has been tested by clinicians in private practice and in hospitals in the treatment of various pulmonary conditions and has been found most effective.

The therapeutic action of Leptinol is principally upon the mucous membranes of the respiratory tract, where it acts primarily as a stimulating expectorant. It is a reliable antispasmodic through its action on the vagus nerve. Its antiseptic action on the respiratory tract is prompt and it reduces and clears the sputum of bacterial flora, this bactericidal action having been repeatedly proven by microscopic examinations.

Leptinol is an effective cardiac tonic where the tone of the heart muscle is impaired. In acute pulmonary conditions it effectively improves the respiratory action and allays cerebral irritation. In these respects its action is much like that of camphor, as a stimulant and nerve sedative. It stimulates the excretion of acid by the skin and in fever it has a strongly disphoretic and antipyretic action without depressing the circulation or the central nervous system.

One **TELFER DIGESTIVE** Biscuit

equals 32 calories

A delicious biscuit, full of nutrition, about 62 biscuits to the pound. No institution should be without them.

Order to-day—refuse substitutes

TELFER BISCUIT CO. LTD.
Toronto - Ont.

Besides price—what?

The price of gauze is important, but not the sole Standard that governs intelligent and economical buying.

To secure 100% economy many experienced superintendents judge absorbent gauze from standpoints of quality:—absorbency, softness, whiteness, width, firm selvage, weight and straightness of weave.

Curity absorbent gauze stands high in all these points, and in addition is always competitive in price.

Doesn't your good judgment tell you that, given price, plus quality, plus prompt, careful service, you are choosing wisely when you buy Curity Supplies?

Thousands of hospitals are regular Curity users.

Curity
THE WATSON

Lewis Manufacturing Company, Walpole, Mass., U.S.A.

Selling Agents:

Western Canada, Gibson-Paterson, Winnipeg.
Ontario, (Excepting Pt. Arthur and Ft. William) and Quebec.
H. L. Brown, Toronto.
Maritime Provinces, R. H. Paterson, St. John.

A CURE FOR PRICKLY HEAT.

Tyree's Antiseptic Powder when used as an application in those tormenting cases of prickly heat, poison ivy, etc., which occur so frequently in the Summer and early Autumn, will be found most effective. The results obtained from this preparation are very rapid and frequently permanent. Tyree's Antiseptic Powder should be used in the proportion of one or two tablespoonfuls thoroughly dissolved in a basin of water, used as a wash. Its application is not only pleasant, but non-cauterizing. Tyree's Powder has been the accepted standard for personal hygiene for considerably over a quarter of a century.

THE ANEMIA OF INNUTRITION

The frequent observance of this in patients of all ages, is usually symptomatic of general devitalization. Fresh air, nourishing food and Gude's Pepto-Mangan constitute a reconstructive trinity of marked and certain value, the last named agent increasing the oxygen-carrying capacity of the blood stream, thus aiding directly in the absorption and appropriation of the increased food supply. Some physicians are, no doubt, unaware that Gude's Pepto-Mangan is now prepared in the form of cleanly and convenient tablets, two of which are equivalent in iron and manganese content to one tablespoonful of the liquid product. For the special convenience of business men and women, and ambulant patients generally, many physicians are accustomed to prescribe Gude's Pepto-Mangan, liquid, after meals at home, and the tablets for the midday dose, when bottle and spoon would be inconvenient. Samples and literature are obtainable from the manufacturers, M. J. Breitenbach Company, New York.

TOO MANY DIPHTHERIA PATIENTS DIE

Why should there be any diphtheria mortality at all? Antitoxin is to this disease what water is to fire. The answer to the question is, therefore, that the antitoxin is not given soon enough or in sufficient quantity. Fire does not spread more surely or more rapidly among combustible materials than diphtheria in the tissues of the child attacked. The one supreme necessity is to head it off—put it out. A dose of 5,000 units of antitoxin may or may not suffice. This dose should be the minimum; and it is far better to give 10,000 or 20,000 units in one dose than in two.

Nature is helpless in many of these cases; her defensive forces are simply overwhelmed by the poison of the disease. Give the patient a full dose, a liberal dose, of antitoxin, and as many as may be required; arrest the poisoning process; and then nature, relieved, rallies her phagocytic forces and destroys the invading bacilli.

The mortality of diphtheria in this country, according to the Parke, Davis & Co. is ten per cent. One patient out of ten dies. Save the tenth child!

*"Canada's
Most Famous
Dessert"*



*Institutional Size
makes one gallon*

AND it is so acknowledged, particularly since there has come to be such a general understanding of the value of a sane diet in the preservation of health.

Jell-O is a sweet but not an added burden to digestion. It exactly fills the need of the adults who have come to the point of taking a little better care of themselves, or of the family that does not care to serve food in which children cannot join the grown-ups.

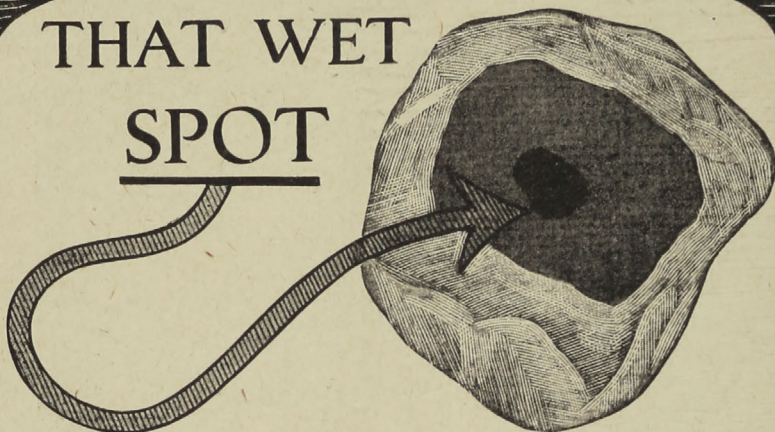
THE GENESEE PURE FOOD COMPANY of CANADA, Limited,

Two Factories

Bridgeburg, Ontario

Le Roy, New York

THAT WET SPOT



MEANS SOMETHING—

It is visible proof that Antiphlogistine has been operating scientifically and it occurs in obedience to a fixed law: OSMOSIS.

The Antiphlogistine Poultice, some hours after its application to an inflamed area, reveals (on removal) certain phenomena.

The center is moist, where exudate has been drawn from the congested tissues—while the periphery, covering normal surrounding tissues is virtually dry.

Liquids follow lines of least resistance. The skin acts as a porous membrane separating two fluids of different densities—Antiphlogistine and the blood. An interchange occurs between their fluid constituents, endosmotic or exosmotic according to the direction of least resistance.

THE DENVER CHEMICAL MFG. CO.
NEW YORK, U. S. A.



An Invitation To Physicians

Physicians in good standing are cordially invited to visit the Battle Creek Sanitarium and Hospital at any time for observation and study, or for rest and treatment.

Special clinics for visiting physicians are conducted in connection with the Hospital, Dispensary and various laboratories.

Physicians in good standing are always welcome as guests, and accommodations for those who desire to make a prolonged stay are furnished at a moderate rate. No charge is made to physicians for regular medical examination or treatment. Special rates for treatment and medical attention are also granted dependent members of the physician's family.

An illustrated booklet telling of the Origin, Purposes and Methods of the institution, a copy of the current *Medical Bulletin*, and announcements of clinics, will be sent free upon request.

THE BATTLE CREEK SANITARIUM

Battle Creek

Room 271

Michigan

KLEINERT'S SHEETING

The attention of Canadian Hospitals is called to

Kleinert's Double-Faced Super-Callendered Rubber Sheeting

It is guaranteed proof against water and acids. This Rubber Sheeting stands the test of time and service. It comes in rolls or handy squares measuring three-quarters of a yard, one yard, one yard and a quarter, and one yard and a half.

This Sheeting is soft, supple and easily handled, yet firm. It has a lovely linen-like surface and has no objectionable odor. It can be sterilized without injuring it and ordinary heat will not affect it at all.

When purchasing Sheeting, be sure to see that the name Kleinert's is in the selvage. That is your guarantee.

Kleinert's Double-Faced Rubber Sheeting is an absolute necessity in a Hospital or in a private home where there is illness, for mattress protection, or for children's cribs. Why not buy the best?

We are also manufacturers of pure gum rubber squares in the following sizes: 36x45; 36x36; 27x36; 24x30; 24x24 inches.

We would be pleased to give further information on application, as to prices, etc.

I. B. Kleinert Rubber Co.

84-86 Wellington St. West

Toronto

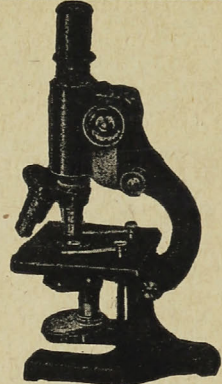
SPENCER SCIENTIFIC INSTRUMENTS

Whether

**Microscopes, Microtomes, Delineascopes,
Haemometers, Haemacytometers or
other Scientific Apparatus**

**MAKE AN INSTINCTIVE APPEAL
TO THE LABORATORY WORKER**

It isn't only their accuracy and utility. It's something in the finish, even more in the design, but additional to all these, it is those little things—clever little devices, which accomplish the same end, but in a better way—exactly the way that the laboratory worker wants them. These are the distinctive features of Spencer instruments, made distinctive because our designers, experienced laboratory workers, possess the laboratory viewpoint.



**SPENCER MICROSCOPE
No. 44H**

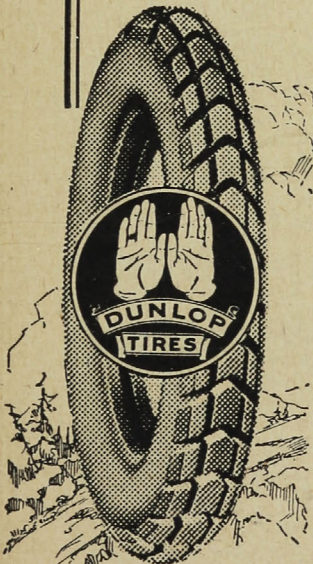
Fully equipped for medical work with two eyepieces, triple nose piece, three objectives, 16 m.m., 4 m.m. and 1.8 m.m. immersion, quick-screw substage, abbe condenser with iris diaphragm, complete in mahogany cabinet.

\$125.00



SPENCER LENS COMPANY

BUFFALO, N.Y.



In every part of Canada it's the same story:—"Dunlop is the 'boy' for Big Mileage!"

DUNLOP TIRES

CORD and FABRIC

Resilient, Rugged, Reliable

Say to your garage man:—"I want the Cord Tire all Motor-dom is talking about." He'll hand you a "DUNLOP."

Supreme

in those points which make for the utmost in quality and purity of bakery products.

You could travel the whole world over and nowhere would you find a bakery more scrupulously clean, more thoroughly and scientifically equipped than the Ideal bakery.

It has kept apace with science and invention. Improvements that add efficiency and further sanitation always find a place with us. The latest addition—the gas-fired travelling ovens—whereby bread is baked to a nicety without the touch of a human hand is the talk of the trade all over Canada.

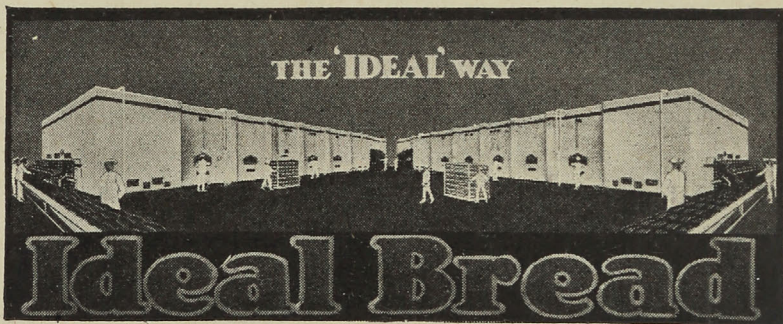
It is merely a further proof of the progressive ideals upon which the Ideal baking business has been based. The same high ideal of equipment as we have of quality; for Ideal Bread is made from the finest ingredients possible to be obtained.

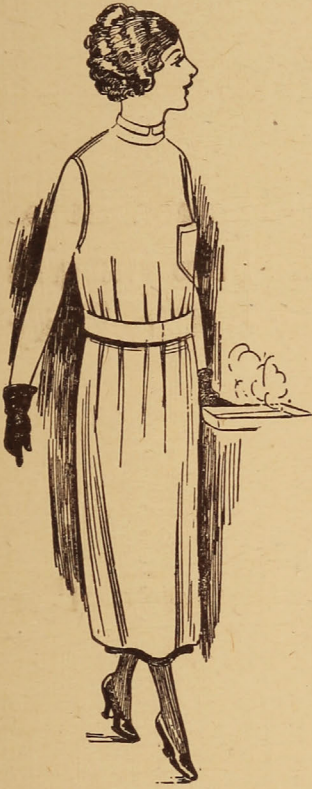
Knowing this, physicians can confidently recommend Ideal products to their patients.

Ideal Bread Company Limited

The most progressive baking firm in the Dominion

183-193 Dovercourt Rd., Toronto. Lakeside 4874





Nurse's Operating Gowns

Style No. 3200

Full-length, plain front, neat turn-over collar and full-length sleeves. Closes down back with tie tapes, and long belt stitched on front to tie at back. Made of best quality Indian Head bleached. Can be furnished with knitted cuffs which fit closely and easily into the rubber gloves.

Hospital Cotton Goods Direct from the Manufacturer

Buying Hospital Apparel direct from the Manufacturer means a substantial saving.

Corbett-Cowley garments are made from materials selected, tried and proven for the hard service they must undergo—designed by experts to ensure comfortable fit and stylish appearance—tailored by a staff of experienced operators working in a bright, clean, government-inspected factory.

Our immense output means the lowest possible cost on materials and of manufacture, and, by selling direct to the consumer, we are able to quote unusually attractive prices.

Write for samples of materials, illustrations and prices of Hospital Apparel and Bedding.

MADE IN CANADA

CORBETT-COWLEY
Limited

Successors
to **HUDSON-PARKER**
Limited

**DARLING BUILDING 96 SPADINA AVE.
TORONTO**



**The Mark
of Quality
and Service**

Nature, Science and Common Sense
work in harmony where boys and girls
grow strong and healthy on City Dairy
Milk.

We serve more homes than any other
Dairy in the British Empire.

We have a yellow wagon on every
street every morning.

City Dairy

TRINITY 2040