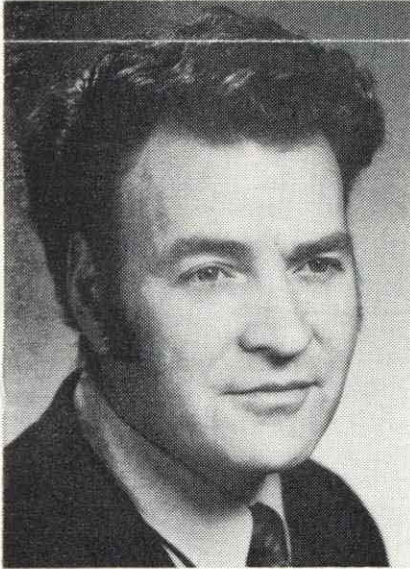




CLINICAL DIRECTOR



F. D. BARAGAR, MD, FRCP

Dr. Fletcher D. Baragar, who has been appointed clinical director of the University of Manitoba Rheumatic Disease Unit, is a native Winnipegger with a winsome manner and some 15 years of experience in the fields of internal medicine and rheumatology.

He holds a B.A. and Honors B.A. from the former United College and University of Manitoba respectively, and graduated in medicine from the University of Manitoba in 1955.

From 1955 to 1957 Dr. Baragar was a resident in medicine and pathology at the Deer Lodge Hospital, and in the following year he served as a resident in medicine and chief resident at the St. Boniface General Hospital. In 1958, as a Fellow of the Canadian Arthritis and Rheumatism Society, he took 18 months of post-graduate study at the Rheumatic Disease Unit of Northern General Hospital in Edinburgh. He became a Fellow of the Royal College of Physicians of Canada in 1962, and this year he joined the geographic full-time staff of the University of Manitoba Faculty of Medicine.

Prior to joining the active medical staffs of the Manitoba Rehabilitation Hospital and St. Boniface General Hospital nine years ago, Dr. Baragar served for two years as medical director of the Manitoba Division of the Canadian Arthritis and Rheumatism Society. He is now a consultant to CARS, as well as a member of its Board of Directors, and a consultant in rheumatology to the Winnipeg General Hospital, the Children's Hospital of Winnipeg, and Municipal Hospitals.

Dr. Baragar has been engaged in several research projects related to

(Continued on Page 3)

Manitoba Gets New Rheumatic Disease Unit

A Rheumatic Disease Unit that closely combines teaching, research and high quality patient care was opened in Winnipeg this month.

The unit—which hopefully will benefit thousands of people in the province who suffer various forms of arthritis—has been established as part of the University of Manitoba Department of Medicine. It is supported by the Canadian Arthritis and Rheumatism Society, and located in the Manitoba Rehabilitation Hospital - D. A. Stewart Centre.

Dr. Fletcher Drury Baragar, a native Manitoban who has been a consultant in internal medicine and rheumatology at the MRH-DASC for the past nine years, has been appointed clinical director of the unit.

The Manitoba unit is the tenth to be organized in Canada, and in effect it will expand, develop and give university status to our hospital's existing rheumatology service.

At present the Manitoba Rehabilitation Hospital - D. A. Stewart Centre has approximately 50 beds for in-patients with rheumatic diseases, as well as a large clinical out-patient service. Beginning this month, 20 of the beds will become teaching beds in the Rheumatic Disease Unit; the others have been set aside for arthritis patients who are under the care of accredited physicians.

According to Dr. J. P. Gemmill, professor and head of the University of Manitoba Department of Medicine, the Rheumatic Disease Unit has three major purposes:

Patient Care: The initial goal is the improvement and further development of care for patients with various forms of systemic arthritis. Under the direction of Dr. Baragar, this is provided by a co-ordinated group of physicians and consultants in major medical specialties, by nurses, physiotherapists, occupational therapists, social workers and other professionals skilled in the management and rehabilitation of arthritis patients.

In addition, the unit proposes to conduct an intensive follow-up of patients over a period of years. This

will involve the employment of a senior physiotherapist and/or occupational therapist who will act as a clinical assistant to the physician, with considerable responsibility for the supervision of the on-going health of patients.

Education: The unit's program is geared towards teaching undergraduate and graduate medical students and paramedical personnel, and it will assist in the continuing education of practising physicians.

Research: Current research in rheumatic diseases is being continued and expanded in co-operation with other university departments undertaking related investigations. This includes a long-term study of people with early polyarthritis, which has been conducted under Dr. Baragar's supervision for the past several years and aims to clarify the natural history of polyarthritis and the factors that may influence a patient's prognosis.

With respect to both research and patient care, the unit will collaborate closely with the university's departments of orthopaedic surgery and radiology. Two physicians who will be particularly involved in the program, are Dr. Frank Gunston, who has achieved international fame for developing the Gunston Knee (arthroplasty of the knee), and Dr. Jack Snarr, who has returned to the Department of Radiology after spending a year at the University of Michigan Medical Centre in Ann Arbor, studying under Dr. William Martel, world-renowned radiologist in rheumatic diseases.

Dr. Gunston has also recently returned to Winnipeg after six months of teaching, study and research in Switzerland, and six months of study under Dr. Kauko Vainio, orthopaedic surgeon-in-chief of the internationally known Rheumatism Foundation Hospital in Heinola, Finland.

The clinical director of the Rheumatic Disease Unit, along with the resident and other staff members, will also co-ordinate and participate in out-patient clinics, consultations and teaching at the Winnipeg General Hospital, the Children's Hospital of Winnipeg and St. Boniface General Hospital.



Through education, research and province-wide preventive programs, your Christmas Seal contribution works year 'round to fight the rising threat of breath-robbing diseases.

**CHRISTMAS SEALS A
MATTER OF PRESERVING . . .
IMPROVING . . . THE BREATH
OF LIFE**

18th REHABILITATION NURSING COURSE

Manitoba
Rehabilitation Hospital
April 17 - May 5, 1972

This intensive course is designed to teach registered nurses the special skills and philosophy involved in the rehabilitation of the physically disabled.

Direct inquiries to Mrs. D. Setter,
Director of Nursing, Manitoba
Rehabilitation Hospital, 800 Sher-
brook Street, Winnipeg R3A 1M4

Address all communications to:

THE EDITOR, SBM NEWS BULLETIN
800 Sherbrook Street, Winnipeg, Manitoba R3A 1M4
Second Class Mail Registration Number 0324.

Winnipeg A.C.T. Close To Fulfilling \$100,000 Pledge

The Associated Canadian Travellers, Winnipeg Club, are now only \$6,000 away from completing a pledge — made nine years ago — to contribute \$100,000 to the Equipment Fund of the Manitoba Rehabilitation Hospital - D. A. Stewart Centre.

At a luncheon meeting at the Empress Lanes on December 6, A.C.T. Projects Chairman Stan Hamilton presented a cheque for \$10,600 to Sanatorium Board Chairman Harold L. McKay . . . bringing the total amount donated thus far to over \$94,000.

In accepting the cheque, Mr. McKay noted that the Winnipeg A.C.T. and the Associated Canadian Travellers of Brandon have contributed over one-half million dollars to the preventive and rehabilitation programs of the Sanatorium Board during the past 25 years.

The money donated by the Winni-



While Gordon Fyfe, Winnipeg ACT Club president and member of the Sanatorium Board looks on, A.C.T. Major Projects Chairman Stan Hamilton (right) presents a cheque for \$10,600 to Harold L. McKay, chairman of the Sanatorium Board. (Photo by Dave Portigal)

Mrs. Vogel Resigns Post As Speech Clinician

Mrs. Marijke Vogel, who has made many fine contributions to the development of speech therapy at the Manitoba Rehabilitation Hospital, resigned from her post as speech clinician in mid-December.

Born in Rotterdam, The Netherlands, Mrs. Vogel received her training at the School for Speech Therapists in Amsterdam. She has nearly 20 years of experience as a speech clinician in Holland and in Canada; and she began part-time work at our hospital's Department of Communication Disorders in 1962.

Since then Mrs. Vogel has contributed greatly to the rehabilitation of patients with speech problems (from many parts of Manitoba), and among other things, she has been instrumental in setting up a special program for adults who stutter, and a Lost Chord Club for laryngectomies. At present she also serves as president of the Manitoba Speech and Hearing Association.

Mrs. Vogel will be missed very much . . . and we wish her success and happiness in all her future endeavours.

neg Club since the opening of the Manitoba Rehabilitation Hospital in 1952 has been used to provide patient facilities that would not otherwise have been possible, Mr. McKay said.

This includes electromyography equipment for the diagnosis and assessment of neuromuscular disorders, audiologic equipment for the hospital's

hearing assessment and rehabilitation service, and apparatus for the paraplegia program as well as the x-ray and laboratory departments.

The Associated Canadian Travellers is composed of salesmen who work hard to raise funds for these special health projects. The Sanatorium Board is grateful for their enthusiastic support.

A.C.T. Auxiliary Donates Equipment

The Sanatorium Board expresses its gratitude to the Ladies' Auxiliary of the Associated Canadian Travellers, Winnipeg Club, who at their monthly meeting at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre on January 5 donated \$300 to our hospital equipment fund.

The cheque — presented by club president Mrs. H. K. (Olive) Kennedy to R. F. Marks, SBM assistant executive director — has been used to purchase a theromotic drainage pump and two thera-mist coldstream vaporizers for the Respiratory Disease Service in the D. A. Stewart Centre. Small plaques, in recognition of the club's donation, have been placed on the new equipment.

Over the years the Ladies' Auxiliary has contributed thousands of dollars to the Sanatorium Board's hospital and health services. At the Manitoba Rehabilitation Hospital-D. A. Stewart Centre, the members have equipped the activities of daily living section of the occupational therapy department and a two-bed ward for tuberculosis patients, purchased wheelchairs for patients and special equipment for the Department of Communication Disorders and inservice education programs.

Their enthusiastic interest and help are greatly cherished.

S.B.M. Upgrades Data Processing System

For many years, in order to improve the efficiency of its health and hospital operations, the Sanatorium Board of Manitoba has used a system of central data processing.

Beginning this month, this service will be upgraded with the installation of more sophisticated equipment to meet expanding "in-house" needs—and possible linkage with larger computerized networks, which inevitably will be the "way of the future" in health care.

The relatively simple unit record system established in the Board's central office 12 years ago has been used to the hilt to perform numerous and otherwise time-consuming jobs. It has handled all payroll and most accounting functions; processed x-ray, laboratory and pharmacy statistics; stored and issued maintenance inventories and schedules, medical statistics and tuberculin survey reports—and in a rather grand way, automated our annual Christmas Seal Campaign with respect to mailing

lists; addressing letters, recording donations and issuing receipts.

Perhaps most importantly, the Sanatorium Board became the first health institution in Canada to incorporate into its data processing machinery complete information on physiotherapy and occupational treatments, which it worked out on a precise statistical unit system. Through this unique arrangement, the Manitoba Rehabilitation Hospital and the Board had daily access to the volume and types of work performed in the department and the numbers of patients reporting for treatment. Billings for out-patient treatments have also been run off through this program, and work schedules issued to each therapist each morning.

In all, the old unit record system has served nobly—but in order to improve and develop our multifaceted "in-house" services, it must now be considered obsolete.

Consequently, an IBM System/3 is currently being installed — consisting primarily of a Multi-Function Card Unit, a Central Processing Unit that serves as a "command post" for all computer operations; a System/3 Printer that turns out reports at 200 lines per minute; a Disc Storage Drive to store information; and two data recorders and a sorter to do

preliminary card punching and sorting.

The new equipment is expected to more than double the speed of work turned out by the old system. It will also simplify the in-pit of data and handle a heavier workload. Among other things, more inventories can be added to the system, the Christmas Seal operations will be more fully automated, and now that the administration of the Central Tuberculosis Registry has been taken over by the Board, it is planned to "computerize" tuberculosis statistics and records on some 8,000 patients—including vital data related to the treatment and follow-up of out-patients throughout the province.

With the installation of this updated equipment, the Sanatorium Board is also looking to the future. According to T. A. J. Cunnings, executive director of the Board, our system is designed for hook-up with larger computers — especially that which will probably be installed some day in the Manitoba Medical Centre complex.

Studies indicate that in years to come there will be a substantial development in the speed and accuracy of transmitting the thousands of information items that take place in hospitals each day—from doctors' orders to administrative controls, Mr. Cunnings said.

Exploring the full potential of System/3 as new programs are gradually worked out will undoubtedly offer a wealth of adventure for our data processing staff.

(Continued on Page 3)

HONOR ROLL OF CONTRIBUTORS

The Sanatorium Board is grateful to the individuals and organizations who have recently donated to our health and hospital services. According to the wishes of the donors, these contributions are used to provide special services or equipment for patients, or to finance research into the means of preventing and treating disabling disease.

Mrs. Florence Westmore, Headingley	Wheelchair
Mrs. F. H. Atnikov, Winnipeg	Wheelchair
Mr. and Mrs. Menashe Mandel and family, Winnipeg	Wheelchair
Associated Canadian Travellers, Winnipeg Club	\$10,600.00
Ladies' Auxiliary, Associated Canadian Travellers, Winnipeg Club	\$ 300.00

Our appreciation is also expressed to the people who contributed to the Respiratory Disease Research and Education Fund in memory of the late Norman Tarzwell, of Grandview, George Harris of Winnipeg, and George Mowat of Portage la Prairie.

CHRISTMAS SEAL PROJECT

TB Skin Tests for Grade 8 Students

As an important part of this year's Christmas Seal program to combat tuberculosis, tuberculin skin tests will be administered to all grade eight students in metropolitan Winnipeg.

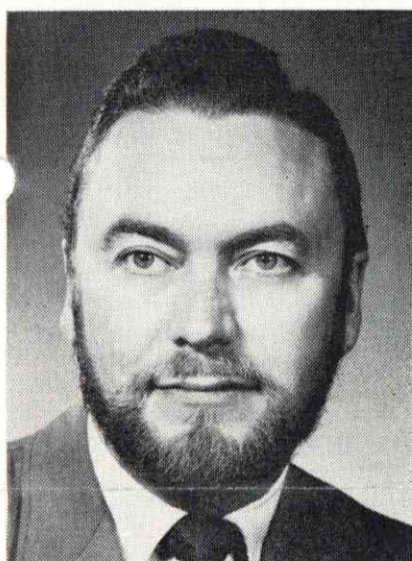
The project — which begins January 24 and initially involves some 3,500 students in the Winnipeg School Division — is being conducted by the Sanatorium Board's surveys department, with the approval and co-operation of provincial and community health units.

The primary objective of this screening program is to identify and investigate positive reactors, track down the sources of infection, and

provide treatment for those with active disease and preventive drug therapy for infected individuals who may be in danger of developing active disease.

A second purpose is to determine the incidence of infection in this age group. According to the standards of the World Health Organization, tuberculosis can be considered to be under control when one percent or less of the 14-year-old population is negative to the tuberculin skin test. Previous tuberculin screening programs in Manitoba have shown that about six percent of the 14-year-olds are infected with the tubercle bacillus.

Committees Focus on Respiratory Disease



R. M. CHERNIACK, MD, FRCP, FACP

Dr. Reuben M. Cherniack, professor of medicine at the University of Manitoba and physician-in-chief of our Respiratory Disease Service, has been named chairman of an eight-member Subcommittee on Acute and Chronic Respiratory Failure, by the National Institute of Health in Bethesda, Maryland.

According to Dr. Cherniack, who serves as a respiratory disease consultant to the U.S. Government, the purpose of this subcommittee — together with other subcommittees appointed in various parts of the United States — is to determine the present status of respiratory disease in America and to recommend future requirements for the intensive care and rehabilitation of patients with acute or chronic respiratory insufficiency.

The first meeting of the subcommittee was held in Bethesda in October. The second will be held in Chicago on January 21, and after that Dr. Cherniack's subcommittee will meet with the other committees in Washington, D.C.

A second Canadian serving on Dr. Cherniack's subcommittee is Dr. E. J. Moran Campbell, noted professor of medicine and respiratory disease expert at McMaster University.

On another junket in mid-December, Dr. Cherniack paid a four-day visit to Caracas, where he delivered 10 addresses to the Venezuela Society of Physiology and Medicine at the Institute Diagnostico. His lectures

concerned the diagnosis of dyspnea and respiratory insufficiency, the concept of the intensive care unit, long-term artificial respiration techniques and complications, oxygen therapy, complications in treatment of respiratory insufficiency, the management of chronic respiratory insufficiency and physical medicine and rehabilitation.

At the meeting of the Royal College of Physicians and Surgeons of Canada on January 25, Dr. Cherniack will also present a paper to the Canadian Society for Clinical Investigation . . . on the Interdependence Between Mechanical Resistance to Breathing, and Ventilatory Respiration to Hypercapnia and Hypoxia.

MRS. TOWNS RETIRES

Mrs. B. H. (Ruth) Towns, a member of the registered nursing staff at the Manitoba Sanatorium for 15 years, was honored at a farewell tea on December 3.

Mrs. Towns joined the sanatorium staff as a general staff nurse in 1956, later served as head nurse in the operating theatre and then as central supply and pharmacy nurse. She was born and educated in Winnipeg and prior to her employment with the Board, she worked at the Killarney and Wawanesa Hospitals.

The Board expresses appreciation to Mrs. Towns for her many years of fine service . . . and wishes her and her family much happiness and success in their new home and business at Rathwell, Manitoba.

CLINICAL DIRECTOR

Continued from Page 1
early polyarthritis and the results of various treatment techniques for rheumatic diseases. He is the author or co-author of a number of scientific papers and abstracts, and in 1969, he was a guest speaker at the 12th International Congress on Rheumatology in Prague.

He is associated with several medical organizations (including the Canadian and American Rheumatism Associations, the Winnipeg Medical Society and Heberden Society), and on the non-medical side, he is a member of the Winnipeg Rotary Club and the Board of Regents of the University of Winnipeg.

Person Heads Hearing Aid Board

J. Brayton Person, chief of the Department of Communication Disorders at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre, will chair a five-member board to establish standards of practice, regulations and educational requirements for hearing aid dealers.

A Hearing Aid Act to license and regulate hearing aid dealers will be in force on April 3, 1972, through the Department of Consumer, Corporate and Internal Services, according to Health and Social Development Minister Rene E. Toupin.

The Board to set the requirements will, in addition to Mr. Person, consist of John E. Mason, director of the Consumer's Bureau; Dr. D. M. Brodovsky, otolaryngologist; A. E. Monk, president of the Manitoba Hearing Aid Dealers' Association, and S. Z. Grower, special projects manager in the Health and Social Development Department.

The Board will set up an examining committee which (together with the Board) will establish regulations designed to:

- Protect the public by ensuring competency of individuals fitting hearing aids.
- Set up an educational program that will help the hearing aid dealers to become hearing aid fitters with a margin of professionalism.

The new act spells out terms under which certification of dealers is granted, complaints can be investigat-

ed, appeals launched, penalties levied and licenses suspended.

No one under the age of 18 may be sold a hearing aid without a physician's written diagnosis and prescription, thus assuring that no pathological condition exists which could be treated by other means. In cases where an aid is sold needlessly to an adult a forfeiture bond would fully reimburse the individual.

Mr. Toupin said that a poorly fitted hearing aid can be as damaging as poorly fitted eyeglasses and that consumers have the right to hearing aids that meet professional standards.

R.D. IN CANADA

During 1970, according to Hospital Insurance Statistics, a total of 16,501 people in Canada died from respiratory diseases.

Deaths from bronchitis and emphysema were 3,136—almost double the number reported in 1968.

Deaths from tuberculosis numbered 527, and 162 of these were non-pulmonary. Cancer of the respiratory system accounted for 5,438 deaths in 1970—which is about the same figure as those for 1968 and 1969. And over 5,000 people died from pneumonia.

Respiratory disease in general accounted for 3,415,885 hospital patient days in 1968 and 333,477 hospital discharges.

Patient days for bronchitis and emphysema in 1968 were 707,241, and hospital discharges numbered over 65,000. (The cost per patient day for these two conditions alone would have been well over \$40 million.)

Only pneumonia outstripped bronchitis and emphysema with respect to the number of hospital discharges and patient days in 1968.

DATA PROCESSING

(Continued from Page 2)

But its possible connection with regional data storage equipment, and a national computer, evokes more exciting thoughts of a nation-wide system in which health information would be stored for all Canadians — and instantly available for the finest possible care.



THE 21st CLASS to graduate from the Nurses' Assistants' and Nursing Orderlies Program at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre are pictured with their instructors following a brief ceremony in the Nursing Education Classroom on December 15. Over 60 instruction sessions and an examination on some 50 subjects related to the care and rehabilitation of the physically disabled had to be completed to earn certificates and badges. Our congratulations to (left to right) Mrs. Dorothy Ramsay, instructor, Miss Romila Dhingra, Miss Yvonne Huska, Miss Debbie Hall, Miss Marilyn Onushko, Miss Shirley Ayow and Mrs. Patricia Eadie, instructor; and seated left to right, Paul Loeppky, Ravindranath Maharaj and Gerald Yorke.

Many Helped To Brighten Christmas in Hospital

With the help of many good people in and outside our hospitals, Sanatorium Board patients who were unable to spend Christmas at home found a way to be happy during this special celebration.

On Christmas Day at the Manitoba Rehabilitation Hospital, *Versafood Services* arranged a family-style dinner for several dozen patients who were able to get down to the cafeteria, and sumptuous trays with favors for everyone who remained on the wards. Unit Manager Ed Lawrence and the kitchen and cafeteria staff joined with patients in the singing of carols before the turkey and plum pudding were brought in . . . and according to accounts it was the very nicest "hospital Christmas" ever.

Young and old at the D. A. Stewart Centre and Manitoba Sanatorium, Ninette, also fared well at Christmas. Pre-Christmas parties, concerts and carolling were organized by staff members and community organizations . . . and everything possible was done to brighten both Christmas and New Year's Day.

The Annual Carol Service for patients and staff at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre on December 22 was warm and inspiring (the participants seem to achieve greater excellence each year) and our thanks are expressed to the staff members who took part—and in particular to the director and vocalist Miss Joyce Traub, pianist Miss Connie Hershberger and guitarist Roy Holstein.

Manitoba Sanatorium also had their traditional "Christmas Tree and Festival of Carols" on December 23, with the sanatorium orchestra providing the music and Santa and his



REPRESENTATIVES OF THE NORTH KILDONAN Police and Fire Departments showed up with Santa Claus at the D. A. Stewart Centre on December 15 . . . and with broad smiles distributed gifts and good cheer to old and young. The Sanatorium Board is indebted to the good will of these forces who since 1968 have made a special effort to brighten the holiday season for our tuberculosis and respiratory disease patients.

(Photo by John McLean of the East Kildonan and Elmwood Herald)

helpers distributing gifts to each patient after the event. A Christmas concert, with skits, a pageant and music was presented by staff, patients and Pembina House students on December 16.

The festivities in Winnipeg and Ninette were too numerous to recount in detail—but the Board expresses its appreciation to the individuals and organizations who made them possible. In Winnipeg we are grateful to the *Aviva Chapter of the B'nai B'rith* who supplied and served refreshments after the staff variety show for MRH-DASC patients in mid-December; to the *William E.*

Gladstone Chapter, IODE, and the *North Kildonan Police and Fire Departments*, who distributed gifts to patients at the D. A. Stewart Centre; to the *Fort Garry Reading Club* who sent books, the *Salvation Army* who sang carols and distributed gifts, and the *Club Demetrius* and *Suzie Wong Group* who also brought music to the patients' wards.

The *Beta Beta Chapter, Pi Rho Zeta*, who remember the children at the D. A. Stewart Centre on all holidays and special occasions, again provided toys and activity bags for the little patients on Christmas Day and sent bundles of confectionary and good wishes to all MRH-DASC patients.

Mounds of beautifully wrapped gifts were sent to patients at the Manitoba Sanatorium from the *Professional Engineers' Wives of Winnipeg*, the *Ladies' Auxiliary to the Associated Canadian Travellers*, *Winnipeg Zonta Club* and several *United Church Women's* groups in the Brandon district. Other donors included the *Belmont CGIT*, *Killarney Elks*, *Wawanesa Lions Club* and *Boissevain Primrose Homemakers*.

WINTER WORKS PROJECTS

A number of important projects are under way in Sanatorium Board buildings at Ninette and Winnipeg, thanks to a \$147,500 grant from the provincial winter works program.

At the Manitoba Rehabilitation Hospital - D. A. Stewart Centre in Winnipeg, the funds will be used for general maintenance, improvements to the medical records system, and inventories of drugs and equipment in preparation for data processing.

Building repairs and general maintenance projects are being undertaken at the Manitoba Sanatorium and Pembina House, Ninette.

BULLETIN BOARD

Harold L. McKay, chairman of the Sanatorium Board, has recently been elected chairman of the Winnipeg Regional Hospital Council. Mr. McKay, a member of our Board since 1964, has been particularly active in hospital work since his retirement as senior vice-president of the Bank of Montreal in Winnipeg. In addition to his responsibilities with the Board and Hospital Council, he serves as our representative on the Health Sciences Coordinating Council, which plans and coordinates patient care, teaching and research in the Manitoba Medical Centre and at St. Boniface General Hospital.

While visiting his homeland, Dr. A. J. Mehta, of the active medical staff of the Manitoba Rehabilitation Hospital, attended the Third Asian and Oceanian Congress on Neurology, held in Bombay from November 29 to December 4.

At the Chateau Laurier in Ottawa, November 28 to December 1, T. A. J. Cunnings, executive director of the Sanatorium Board, took part in a seminar and workshop sponsored by the Ontario Chapter of the American College of Hospital Administrators. The sessions on "The New Look in Health Services" involved a top level management discussion of the problems facing hospital and health administrators. Federal Minister of Health John Munro was a guest speaker.

Congratulations to Mrs. Gertrude Peters who has successfully completed the home study course, intramural session and examination to become an accredited medical record technician. This training course is sponsored by the Canadian Hospital Association and the Canadian Association of Medical Record Librarians.

The team in the Prosthetics Products Division and the Prosthetics and Orthotics Research and Development Unit has been steadily building up skills and knowledge by attending various courses and conferences. Chief Prosthetist Ian Cochrane is presently taking a four-week course in Above-Knee Prostheses at U.C.L.A. In November assistant prosthetists Bill Dickie and John Barber attended courses at Northwestern University in above knee and upper extremity prostheses respectively; and during the same month research engineer Reinhart Daher and research technician Jack Heath attended an exhibition and conference on plastics sponsored by the Society of Plastics Industry in Edmonton. Earlier Mr. Daher also visited Minneapolis to study the Otto Bock system of modular artificial limbs.

Honor Dr. A. L. Paine for Long Service

The interruption in Manitoba Sanatorium's Christmas concert caught the tall, handsome master of ceremonies off guard—but not the staff of the sanatorium and Pembina House who had planned this special event.

After Dave Ross of Pembina House had finished his vocal solo, and while Yvonne Ruten adjusted her accordion for the next program item, Hospital Manager "Stick" Kilburg and Pembina House Supervisor Lynn Kuzenko strode on stage to pay special tribute to Medical Superintendent Dr. A. L. Paine.

At the close of 1971, Dr. Paine had completed 25 years as medical superintendent of Manitoba Sanatorium and to commemorate this anniversary Mr. Kilburg gave a brief address of tribute and Mr. Kuzenko presented him with an inscribed plaque. Mrs. Paine, who in her capacity as a head nurse at Ninette, has shared her husband's lifetime work in the tuberculosis field, was presented with a bouquet of roses by Mrs. William Broadhead.

A native of Saskatchewan, Dr. Paine is a 1929 graduate of the University of Manitoba Medical



DR. and MRS. A. L. PAINE

School, and except for two years of post-graduate study in Philadelphia, he has devoted his life to tuberculosis work in Manitoba. He joined the medical staff at the Manitoba Sanatorium in 1933 and served with the Sanatorium Board's travelling clinics until 1941 when he took over all of the surgery at Ninette. He was appointed medical superintendent in 1946, and for approximately 30 years he served as Manitoba's foremost tuberculosis chest surgeon.