



Merry Christmas and a Happy New Year!

Christmas in a Sanatorium Board hospital is a rather special experience. Here in Winnipeg the holiday spirit takes hold early in the month when we notice the cafeteria waitresses wearing gay corsages and hear the staff choir rehearsing for the annual Festival of Carols.

It seems, too, that the wood chips are flying higher these days in the Occupational Therapy workshop, as patients hasten to complete doll cribs and rocking horses for their children and grandchildren back home. And on this particular day, December 7, we are pretty sure that downstairs in the pharmacy plans are being laid for the "best ever" variety concert for patients . . . and, of course, the staff.

We are equally certain that out at Ninette the little folk in Number One Pavilion are already being drilled for their part in the sanatorium's yearly concert . . . and that across the way, in Pembina House, the students are paying less and less attention to their textbooks as they think more and more about lines and costumes for their Christmas skit.

And as for us . . . who are aware of these and other happenings . . . it's rather hard to sit at the typewriter and ignore the cheeky *Julenisse* dancing on the keys, egging us to write something Christmasy for our friends everywhere.

Numerous events come to mind . . . and a parade of the faces of people who over the years have joined

forces to make the Christmas season a time to be long remembered by Sanatorium Board patients and staff. We think, for example, of the gaily decorated trees that not so long ago blazed from every corner of our Clearwater Lake Hospital . . . of the town's people arriving at the gates with carloads of gifts and goodies . . . of bulging stockings hanging at the foot of each patient's bed.

We recall big-eyed children in glistening costumes waiting, thumb in mouth, while their teachers at Assiniboine Hospital struggled to get

Clinic . . . the enormous turkey dinner served by the kitchen staff at noon . . . the merry antics of the staff as they bussed the cotton batting on the chief accountant's face and accepted silly gifts from his pack . . . the singing of carols around the old piano which, at the executive director's insistence, was always placed near the elevator shaft so that the music would be carried upstairs.

The many Christmases at our Sanatorium Board hospitals have indeed been wonderful occasions. And

busy sorting and wrapping other presents from other individuals and organizations.

The shy voices at Assiniboine are stilled forever . . . but if you sneak into Manitoba Sanatorium one evening this month you'll see another group of children . . . and another Christmas pageant . . . and another teacher struggling with the props.

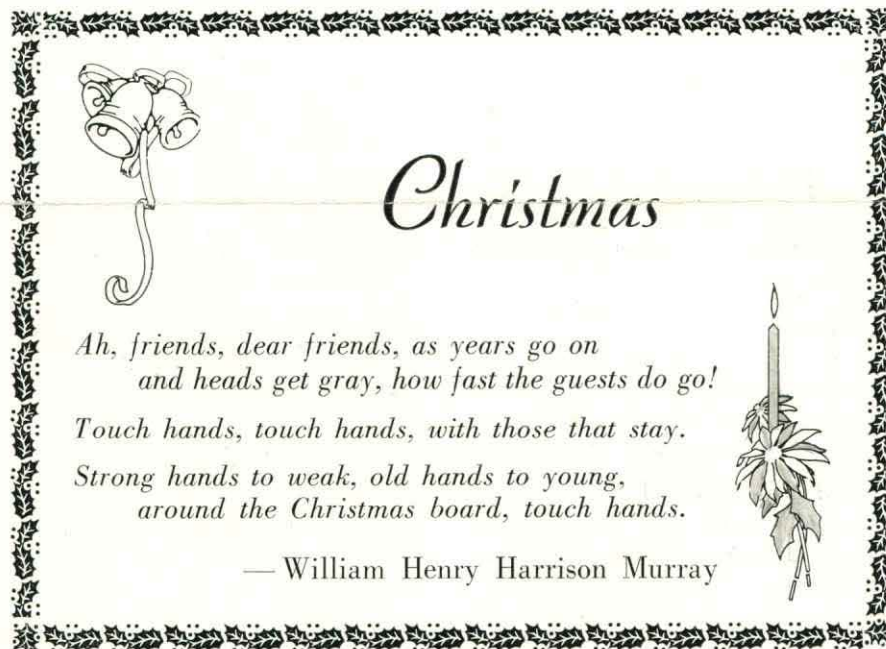
And so Merry Christmas to you all! To all of you who once were here . . . and to those who are with us still! Merry Christmas to our chief pharmacist (we already know that the variety show will be a huge success). Merry Christmas to all the staff members who are arranging the beautiful Carol Service at our M.R.H. . . . and to the people in the Physiotherapy and Occupational Therapy Departments who are hosting a party afterwards.

Merry Christmas to the people of Ninette who again will trudge up the hill to join in an evening of song and fun. Merry Christmas to the Aviva Chapter of the B'nai B'rith who are serving delectable home-baked food following the concert on December 14 . . . and to the former patient who again has generously donated a gift for each of our M.R.H. patients.

Merry Christmas to the children of the Number One Pavilion . . . and to the gaily bedaubed patient whom we saw a little while ago putting the last coat of paint on a little rocking horse.

Merry Christmas, in fact, to all our patients and friends everywhere!

And may the year ahead be the happiest yet!



the props properly placed for the annual Christmas pageant. Then our thoughts turn to a certain medical secretary at Manitoba Sanatorium who was always so busy at this time of year helping the Indians and Eskimos tape record greetings to their families in the north.

Dozens of pictures flash through the mind. Pictures of beaming patients, dressed in their finest pyjamas, stretching to shake the hands of the doctors and nurses as they made special rounds of each ward on Christmas morning . . . pictures of song fests around the Christmas tree on Christmas Eve . . . and of two Sanatorium doctors who led the sanatorium orchestra, one sawing away on a fiddle, the other joyously blowing his trumpet.

With great nostalgia, we recall the sequence of Christmas Eve celebrations at the old Central Tuberculosis

though many of the faces and events have changed, the precious bond established so long ago between the patients and staff has lingered on. Carloads of gifts are no longer distributed at the hospital which now casts a ghostly shadow over the banks of Clearwater Lake . . . but here in Winnipeg and out at Ninette staff members and volunteers are already

Fight tuberculosis and other respiratory diseases



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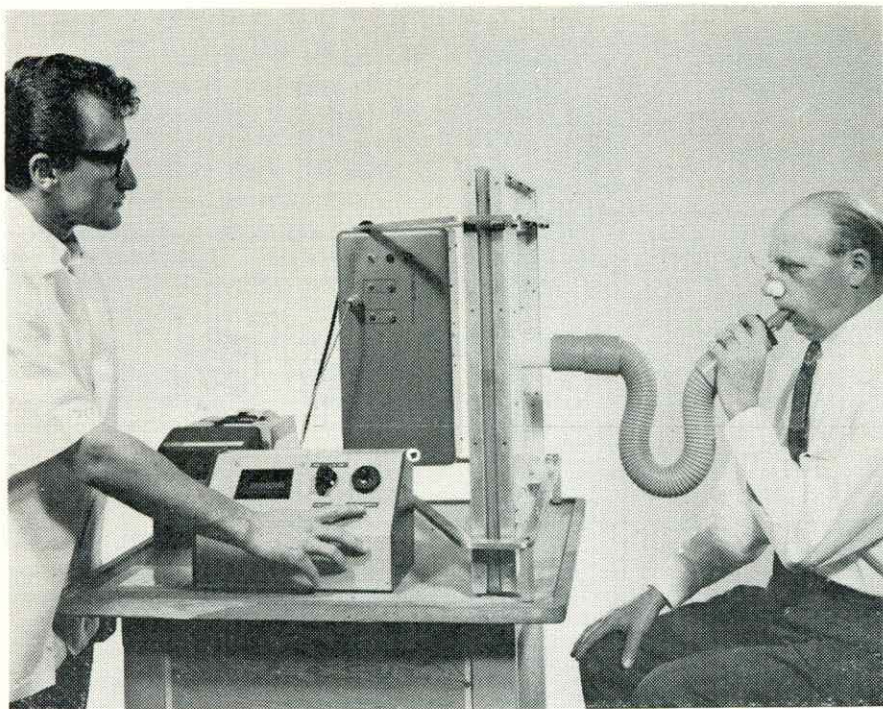
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About Those Breathing Tests



Head Porter Les Wilson is so obliging. Meeting him in the hall one day last month, we quickly enlisted his help in moving a machine into a photography studio . . . then, encouraged by his willingness, we asked him if he would mind sitting by the machine and posing for a picture.

"Sure," agreed Les. "But what's it all about?"

"This instrument is a computerized wedge spirometer," we explained, "and one day soon the Respiratory Disease Service will build one much like it and send it out on our Christmas Seal surveys. We want you to help us demonstrate how it may be used in the field."

"Fine," said Les. "So what does it do?"

"It allows instant computation of vital capacity and maximum mid-expiratory flow rate . . . and when desirable, maximum breathing capacity."

Les was fascinated. "Uh huh," he said. "Perhaps you would elaborate?"

"Well," we began again, a little uncertainly, "if you sat down in front of this instrument and put these clips on your nose, then picked up this tube, took a big deep breath and let it out as fast as you can into the tube, the instrument would give almost instant measurements of the rate of air flow out of the lungs."

"Then, don't you see," we continued, warming up to the subject, "from the machine's computations, the doctor right away gets a good indication of the condition of your breathing tubes."

"Just by learning how easily air gets in and out of your lungs," Les put in.

"Exactly. The inability to empty the lungs as rapidly as what is considered normal is the one constant feature of pulmonary impairment. In a person with emphysema, for example, air tends to be trapped in the lungs as a result of the distension and collapse of the air sac walls. Thus, the speed of air flow out of the lungs is much reduced."

"So let's try the test. Maybe I've got emphysema," suggested Les.

"Probably not. Emphysema isn't that common, although it is on the rise. But people with chronic bronchitis, which is believed to set the

stage for emphysema, can be counted in the hundreds of thousands. And the beauty of using this instrument on our surveys is that it will help detect such lung conditions as chronic bronchitis and emphysema long before people develop the symptoms. Then they can be advised about preventive measures and treatment to delay or stop the progress of their disease."

"You're going to be busy," Les ventured.

"Our doctors certainly are. The pulmonary function tests will be combined with interviews based on a standard questionnaire, which is not only designed to reveal an individual's respiratory symptoms but will also help uncover the effects of such things as air pollution, cigarette smoking and allergies on his health. In fact, these field studies, repeated among large groups of people in different parts of the province, will do a lot to clarify the physician's knowledge about chronic obstructive pulmonary diseases and its prevalence in the population."

"Sounds great," agreed Les. "But I've got to get back to work."

"Thanks for being in the picture."

"Don't mention it. Without my glasses, and with that thing on my nose, nobody will recognize me anyway."

Don't bet on it.

UNDER THE BED?

At the back of the closet? Or perhaps even on the shelf, you may have POCKET BOOKS AND MAGAZINES . . . or even BOOKS WITH HARD COVERS . . . (in reasonable condition), which you may wish to donate to patients at the Manitoba Rehabilitation Hospital and Central Tuberculosis Clinic. Why not drop some off at the second floor Library next time you pass by?

Rehabilitation Agencies Look at Success of Pembina Program

Our Pembina House at Ninette is drawing a good bit of attention these days, as more and more people learn about the successes of its rehabilitation program for socially and vocationally handicapped adults.

In one recent study of persons taking Basic Training Courses for Skill Development¹ between June, 1966 and June, 1967, a federal government official found that the success rate of our Ninette operation was 90 percent, as compared to 51.3 percent in another group.

The survey covered 80 men and women attending prevocational classes held on or near Indian reserves in the Portage-Dauphin district, plus a second group of 20 students referred by the Department of Indian Affairs to Pembina House, where, in addition to the same prevocational courses, they had the benefit of continuous counselling and work training.

The success rate of both groups was calculated simply on the basis of those who passed, failed or dropped out of the classes.² Persons who dropped out of the course but were later placed successfully in employment were counted as successes. Those who failed to attend classes because of serious illness or some other unavoidable reason were not counted as failures.

Among 80 persons attending four Basic Training for Skill Development courses in the Portage-Dauphin district, 20 dropped out during the year, and the "success rate" of the entire group taking Levels two and three of the course (counting the drop-outs) was estimated at 51.3 percent.

Breaking the group down further, it was found that the percentage of successes at the Pine Creek class was 58.3 percent; at Ebb and Flow, 52.4 percent; at Long Plain, 44 percent; and at Sandy Bay, 54.5 percent.

Of the 20 men and women referred to Pembina House, only two were

classified as failures. The other 18 are considered to be doing well. Some have completed Level Two of the BTSD course and are taking vocational training or are working. Others have completed Level Three and have been placed on a job successfully. A few didn't complete any level, but are working anyway after a period of orientation at Ninette.

The Indian Affairs Department attributes part of the success of the Ninette program to the fact that students are better able to adjust to the business of holding jobs by being placed for short periods in the various service trades at the Manitoba Sanatorium. They receive a great deal of individual and group counselling on how to hold a job and fend for themselves in modern society . . . and, to top it all, the goals for each individual are realistically evaluated. That is, if the individual is capable of attaining only Level 3 (the lowest level), he takes this, plus orientation and work experience, and is then placed in a job.

Pembina House, which is operated on the Ninette sanatorium grounds by the Special Rehabilitation Services branch of the Sanatorium Board of Manitoba, provides accommodation for 16 women and 24 men. It has been operating for the past several years and is an offshoot of a Brandon unit which was established by the Board 10 years ago and has since closed.

Pembina House has more referrals than it can handle, and even now is operating at over capacity. The program is supervised by Roger Butterfield.

1. The Basic Training Courses for Skill Development were established several years ago by the provincial government to upgrade the basic education of unskilled persons so that they would be able to take some sort of vocational training.
2. The writer of the report points out that the success of the programs should be calculated on the basis of a continuing program. But in this instance, he said, this was impossible.

HONOR ROLL OF CONTRIBUTORS

The Sanatorium Board of Manitoba is sincerely grateful to the following individuals and organizations who have recently made gifts or bequests of \$25 or more. Their contributions help make possible the addition of new equipment and health services and the continuance of vital research programs.*

BEQUESTS

Estate of Mary Pearl Rosalind Mulvey	\$100.00
Estate of Richard W. Craig, Q.C.	\$1,000.00
Estate of Everett McCauley	\$4,408.34
Estate of Lillian Rose Simpson	\$1,000.00

GIFTS

Battle River Coal Company Ltd.	\$725.53
Winnipeg Cosmopol Club	\$361.90
Associated Canadian Travellers, Winnipeg Club	\$3,300.00
Associated Canadian Travellers, Brandon Club	\$5,000.00
In memory of the late <i>George Iliffe</i>	
J. S. Swinden	\$25.00
In Memory of the late <i>K. J. Dawson</i>	
John F. Baldner	\$25.00
Robinson and Webber, Ltd.	\$25.00
John Rickard Clements Memorial Fund	\$25.00

*These gifts do not include contributions to the Sanatorium Board Christmas Seal Fund.

Schools, Firms Get TB Tests

Although plans for the 1968 program of tuberculosis prevention have not been finalized, our Surveys Officer Jim Zayshley has forged ahead, lining up enough work to keep his nurses and technicians busy for months to come.

This month, he announced, the Department is conducting surveys of employees of various Winnipeg firms, including the Motor Coach Industries Ltd. and the Canadian Broadcasting Corporation.

In January, he said, high school students, teachers and School Board employees in the outlying parts of Metropolitan Winnipeg will line up for tuberculosis tests, and at the end of January the survey teams plan to move into the T. Eaton Company.

Other plans include a complete x-ray survey of settlements along the Hudson Bay Railway in March and of residents of Churchill and The Pas. For this program, the technicians will take over a CNR coach and make stops at every hamlet along the 509 mile route from The Pas to Churchill. The job, they estimate, will take six days.

Seventeen Cases

The selective case finding surveys conducted throughout the province this year have been fruitful, Mr. Zayshley also noted.

Among the some 75,000 people who have received free tuberculin skin tests and chest x-rays in the 1967 community and industrial surveys, 17 new active cases of tuberculosis have been discovered.

These previously unknown cases include seven picked up on surveys of the Manitoba Indian reservations, which were conducted jointly by the Sanatorium Board and Medical Services branch of the Department of National Health and Welfare, plus 10 cases uncovered on TB surveys financed in the main by Christmas Seal funds.

In total, 179 new active cases of tuberculosis have been reported in Manitoba so far this year.

New Personnel

The Sanatorium Board welcomes Melville H. Pearce who rejoined our staff this month as teacher in the Central Tuberculosis Clinic. Mr. Pearce left this post two years ago to take a teaching position at the Dauphin Collegiate and later, at Dugald Consolidated.

We also welcome Dr. Luke Wong, new resident physician at the Manitoba Rehabilitation Hospital; Mrs. Margaret Ruth McLean, social worker at the Central Tuberculosis Clinic; and Mrs. Marion Patricia Reid who has joined our physiotherapy staff at the M.R.H.

The latest addition to the registered nursing staff at Manitoba Sanatorium is Miss Liselotte Oehlbert who has just arrived from England. Miss Oehlbert was previously in Canada for seven years, three of which she spent as school nurse at the Indian Residential School at Guy Hill, near The Pas.

Staff and Friends Honor Evelyn McGarrol

Few parties have attracted more attention from the Sanatorium Board staff than the farewell dinner for Evelyn McGarrol on November 29.

Eighty-eight people crushed into the Paddock Restaurant for the big affair arranged by Mrs. Betty Carey, of the C.T.C. Admitting Department. More than 70 others sent greetings and best wishes from across the country and throughout the province.

Sitting with Evelyn at the head table were the doctors with whom she has worked and the Sanatorium Board's executive director and chairman. Beaming up at her from below were her 89-year-old mother, her sister Gladys who for a long time has worked around the corner from Evelyn in the Central Tuberculosis Registry and behind them, the many, many staff members and former staff members who have been her friends over the years.

All had come to pay special tribute to Evelyn who for 37 years has had charge of the secretarial work in the Central Tuberculosis Clinic and has performed her duties with an efficiency and devotion that has been topped by no one. Her retirement, in fact, leaves a void that will not be easy to fill for, as Dr. E. L. Ross cheerfully admitted in his address, both the medical and non-medical staff depended heavily on Evelyn for the smooth day-to-day operation of the clinic, for her knowledge of clinic policies and affairs, and her ability to handle the public and the various little problems that cropped up each day.

Evelyn McGarrol has been with the Central Tuberculosis Clinic almost from the day it was opened. The oldest of a family of five girls and a boy, she is a Scot by birth, who at the age of nine emigrated with her family from Aberdeenshire to Winnipeg.

She completed her schooling in Winnipeg, took business training, then worked as a stenographer or bookkeeper for several local firms during the 1920's. Then, in December 1928, a slight haemorrhage from her lungs sent her scurrying to the doctor and the result was that she spent the next 16 months as a patient in one of the convalescent pavilions at Manitoba Sanatorium.

During her stay at Ninette, Evelyn filled her days with study and a lot of handicrafts (she became very

skilled in the art of petit point), but later as an out-patient in Winnipeg, she grew restless, and one autumn day in 1930, while attending the newly opened Central Tuberculosis Clinic for pneumothorax, she asked Dr. Scott about going back to work.



"Right away Dr. Scott asked me if I knew shorthand," Evelyn recalled. "After that one thing quickly led to another and on November 5, my birthday, I was told I had a job."

In the beginning the clinic doctors had the idea that Evelyn could look after all their needs by being there half-time. But as she smilingly remembers, it never quite worked out that way. "There was always so much to do," she said . . . then added, "And to me none of the work ever became dull."

Evelyn's singular devotion to her work and to the tuberculosis cause was especially recognized at her farewell dinner when the Sanatorium Board's chairman, Frank Boothroyd, presented her with a tiny gold Cross of Lorraine, the symbol of the worldwide anti-tuberculosis crusade. Afterwards the Board staff and her other friends stepped in to give her a gold bracelet and other tokens of their very deep affection and esteem.



Dr. D. L. Scott, who has worked with Evelyn McGarrol at the Central Tuberculosis Clinic for the past 30 years, presents her with a gift from her many friends at a farewell dinner on November 29. Beside Dr. Scott is Mrs. Scott, and beside Evelyn, Dr. E. L. Ross, former medical director of the Sanatorium Board. (Photo by Jim Zayshley)

Now, at home, Evelyn McGarrol will turn her attention to household duties, to the beautiful roses she grows each year in the garden and to travelling, which she has always enjoyed. Back at the clinic she will always be missed very much. May she have a long and happy retirement.

FREE PAMPHLETS

What are the symptoms of chronic bronchitis and emphysema?

What is involved in a tuberculin skin test?

Is cigarette smoking really that dangerous?

To answer these and other questions about tuberculosis and respiratory diseases, the Health Education Service of the Sanatorium Board's Christmas Seal Fund provides a number of free pamphlets. These are mailed out to individuals on request and are provided in quantities to physicians and teachers and business firms.

The material includes a series of pamphlets called "The Facts" which deal briefly with subjects ranging from cigarette smoking, chronic cough and shortness of breath to specific lung conditions such as tuberculosis, asthma, chronic bronchitis and emphysema.

The tuberculosis literature also includes a tiny picture story booklet, "This Is Mr. TB Germ", which is very popular among children, and handbooks for physicians and public health nurses.

Also available are quantities of notebook-size charts of the respiratory system and wall charts of the respiratory system.

To get this free material, please address your request to:

Health Education
Sanatorium Board of Manitoba
800 Sherbrook Street
Winnipeg 2, Manitoba.

B'nai B'rith Chapter Entertains Patients

The Aviva Chapter of the B'nai B'rith have recently begun their third season of providing twice monthly entertainment for the patients at the Manitoba Rehabilitation Hospital. The first variety concert was held in November and following this highly successful event, our patients enjoyed a big evening of bingo in the hospital auditorium in early December.

Under the chairmanship of Mrs. Sandra Novikoff, the chapter has scheduled concerts and bingo games for the rest of the winter and spring months. The members bring baked delicacies from their homes to serve at the end of each evening, and as an extra touch following the variety show, they are again having a lighted cake for those patients celebrating birthdays during each month.

The Sanatorium Board and the staff and patients at the Rehabilitation Hospital express their thanks to the chapter for this fine community work.

Brandon Travellers Assist Sanatorium Board

The Sanatorium Board gratefully acknowledges the \$5,000 cheque that was handed over by members of the Associated Canadian Travellers of Brandon at their big annual President's Dinner and Ball at the Prince Edward Hotel on December 9.

With President W. E. Rees chairing the evening's program, the cheque was presented by Past President Jack Cook and accepted on behalf of the Sanatorium Board by our Executive Director T. A. J. Cunnings. The money will be used as the second payment on a \$17,000 club pledge to cover the cost of the diabetes blood tests which were provided to some 20,000 residents of western Manitoba last year.

The Associated Canadian Travellers of both Brandon and Winnipeg have been outstanding supporters of the Sanatorium Board's work since 1945, and together over the years they have contributed close to half of a million dollars towards tuberculosis preventive programs, rehabilitation services and more recently, the diabetes detection surveys.

Many other organizations have in turn given some very fine assistance to the Travellers, and none perhaps more than CKX Radio and Television Stations in Brandon. In recognition of their 22 years of support, the A.C.T. set aside a portion of their program to honor John Craig, presi-



A.C.T. Past President Jack Cook presents a \$5,000 cheque to T. A. J. Cunnings.
(Photo courtesy of the Brandon Sun)

dent and general manager of CKX. The club's vice-president, Ron Hurley, presented him with an engraved silver tray.

During the evening club members and the Sanatorium Board also extended warm congratulations to Bill McCreath, a former member of the Brandon club executive who follow-

ing his transfer to Dauphin, helped organize a new Dauphin branch of the A.C.T. and became its first president.

Succeeding Mr. Rees as president of the Brandon club is Wray A. Reid. Vice-presidents for the coming year are Al Basaraba, Frank Cullen and Keith Woodcock.

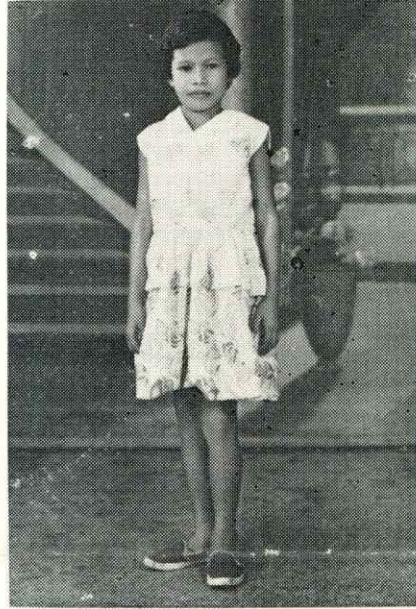
Teresita Moises — One Year Later

Ten-year-old Teresita Moises, the little girl of the Philippines who only one year ago had so little in life, has blossomed into a healthy, happy young lady — thanks to her 26 foster parents at the Manitoba Rehabilitation Hospital.

The Physiotherapy Department staff decided to adopt Teresita in October, 1966, when they heard about her plight through Foster Parents Plan, Inc. Since then they have sent \$16.00 every month to provide the child with food, clothing, school supplies, vitamins and other necessities, and bolstered this with extra contributions of clothing and a \$10 cheque for Teresita to spend any way she pleases on her birthday. The extra money (each member chips in one dollar every month) is banked for Teresita's future education — and to cover such other



Teresita in 1966.



Teresita in 1967.

department projects as providing a Merry Christmas this month for two needy families in Winnipeg.

To gladden the hearts of the staff, Teresita writes to them each month. "I wish to please you," she announced in one letter. "I wish to inform you that I am now striving hard in my schooling. If God permits, I would like to become a nurse so that I could help my parents and make them happy when they grow old."

Before she received assistance, Teresita had little to eat and often missed school because she could not

bear the taunts about her ragged clothing. She struggled through life with her tuberculous father and mother, three sisters and two brothers in a wooden hut in Pasig. Generally, the father was too ill to work, so the family was cared for by the mother who managed to earn about 70 cents a day selling seafood to her neighbors.

Now their life has changed. "With your kind help the family and I are able to make ends meet," Mrs. Moises writes. Or, as Teresita puts it, "We are living so merrily . . . we hope you are as happy as we are!"

BULLETIN BOARD

With another New Year fast approaching, there are lots of meetings these days to draw up programs for the months ahead. A big event for 1968, we note, is a two-day Nurses' Institute on Tuberculosis and Respiratory Diseases.

The Institute, which will be held in Winnipeg sometime in April, promises a very full scientific program which should attract the interest of the nursing profession from coast to coast. It is sponsored by the Canadian Tuberculosis Association and hosted by the Sanatorium Board, with Miss E. L. M. Thorpe, nursing consultant to the Board, as general chairman. A member of the planning committee is Dr. Floris King of Ottawa, field representative and nursing consultant for the C.T.A. She stopped off in Winnipeg on December 13 to discuss the program with Miss Thorpe.

As one of his special projects for 1968, Dr. R. R. P. Hayter, director of Physical Medicine at the Manitoba Rehabilitation Hospital, has high hopes of helping the amputees of Manitoba to establish social and recreation clubs. Unlike the paraplegics and other groups of disabled citizens, civilian amputees have had no organized programs to meet their social needs and interests. As a step toward getting something started, Dr. Hayter, with the help of other members of the M.R.H. staff, hosted a Christmas party at the hospital on December 14. Around 40 amputees from the Winnipeg area attended.

Among those who took part in the two-day Maintenance Institute held by the Manitoba Hospital Association at the Legislative Buildings on November 30 and December 1, was our M.R.H. Plant Superintendent Bill Evans. Mr. Evans presented a paper on "Preventive Maintenance."

Our congratulations to Miss Martha Treichel who was recently elected president of the Winnipeg branch of the Canadian Physiotherapy Association. Miss Treichel has also been appointed assistant to the Chief Physiotherapist at the Manitoba Rehabilitation Hospital.

G. W. Holland, chairman of the Manitoba Hospital Commission, accompanied by our Executive Director T. A. J. Cunnings, paid a special visit to Ninette on November 24 to tour the buildings and grounds of our Manitoba Sanatorium.

Also on November 24 the Manitoba Rehabilitation Hospital had a distinguished visitor from the Mayo Clinic at Rochester, Minnesota . . . Dr. John L. Magness, a specialist in physical medicine and internal medicine.

**FIGHT
TB
WITH
CHRISTMAS
SEALS**

ANSWER YOUR CHRISTMAS
SEAL LETTER TODAY