



News Bulletin

SANATORIUM

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The Story of a World-Wide Crusade

By P.B.H.

Since 1904 thousands of lives have been saved because people all over the world have licked on the back of small stamps called Christmas Seals. This year—the 56th anniversary of the Christmas Seal—the thoughts of millions should go back to the year 1903 when a big, good-natured Danish postman was sorting his holiday mail at the post office in Copenhagen.

The traditional rush was on. Parcels, letters and cards were stacked to the ceiling, but the postman—Einar Holboell—took time out to light his pipe. He happened to glance out the window and across the street he saw three ragged children selling artificial flowers. Their tiny bodies shivered in the icy north wind and their thin faces and bluish hands stopped only a few of the busy Christmas shoppers.

Holboell had seen many children on his daily rounds. He didn't like what he saw and something swelled within his big frame. Here he was, sorting glad tidings from thousands of happy peo-

Encouraged by the enthusiasm he aroused when he proposed his plan to his fellow postmen, he approached the postal authorities, who expressed complete sympathy and offered to help him whip the plan into shape. The plan was next submitted to the King of Denmark. He was delighted with it. He promised royal support and suggested that, in order to make their majesties' interest evident, the first seal should bear the picture of the queen. It was now too late to put the plan into effect for this Christmas—but Holboell could wait.

So it was in 1904 that the Christmas Seal idea was launched for the first time anywhere. Two million seals, bearing the picture of Queen Louise, were printed. They were sold through the post offices in Denmark at two ore—or one cent—from December 9, 1904, to January 6, 1905.

The response to the seals was so great that they soon became scarce. Another two million were printed and sold. It meant an average sale of two seals to every man, woman and child in Denmark, and brought about \$41,000 to the organizers.

The first tangible result of Holboell's scheme came the following year when a site for a sanatorium was bought at Kolding, Denmark. A picture of the proposed sanatorium appeared on the Christmas Seal of 1908. By 1910 it was ready for the first patients.

The sale of the popular seal increased every year. Many people bought large quantities—not because they used them all—but because they wanted to pitch in.

Humorous objects, such as an old hat, a worn-out broom or a queer toy circulated from post office to post office. At each office, the staff members added their Christmas Seals to the unwrapped object and sent it on to the next point of mailing.

Holboell maintained that "letters without the seal are simply no good." An old countrywoman shared his belief: She received two letters without the seals and promptly returned them unopened to the senders with a little note saying that she didn't care to know people who didn't use Holboell's seals.

Sweden and Norway didn't waste any time borrowing the Christmas Seal idea, and in 1907 Americans were introduced to it by a Danish-born philanthropist, Jacob



The 1906 Danish Christmas Seal portrays their king, Frederik VIII.

Riis. He urged that the seals be sold in the United States to raise funds for further study of tuberculosis and as a medium for educating the public to the fact that the White Plague is preventable and needless.

A woman in Wilmington, Delaware—Emily P. Bissell—accepted the challenge. She was interested in an open-air TB cottage on the Brandywine River, where lack of funds threatened its closing. She needed \$300 and in a last desperate attempt to raise the money she decided to try the Danish plan. It worked—even better than she had hoped—for with the co-operation of the Wilmington post office, women's clubs, newspapers and stores, she raised almost \$30,000 in the first year.

In 1908 the American Red Cross took part in the campaign. Religious groups and clubs organized their workers and 6,000 newspapers ran miles of campaign copy. The result was a neat \$135,000. Since 1920 the National Tuberculosis Association has

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TB Associations Launch 53rd Christmas Seal Sale

"Buy and use Christmas Seals. Help fight tuberculosis."

This is the slogan that will echo throughout every part of Canada during the next few weeks as tuberculosis associations all across the country launch their 53rd annual Christmas Seal Campaign.

The Christmas Seals, which this year depict a cheerful scene showing a family bringing home the Christmas tree, officially went on sale in Manitoba and other provinces on November 14. The money raised by the sale of these seals will be used for tuberculosis prevention programs in the areas where the seals are sold.

In TB prevention, there are three important methods of attack. These are: Tuberculin and chest X-ray surveys, which are the chief means of hunting down TB infection; health programs to educate people in better ways of living; and rehabilitation programs for tuberculosis patients.

At the opening of this year's campaign, Dr. E. L. Ross, medical director of the Sanatorium Board of Manitoba, warned residents that tuberculosis is still a serious public health problem.

Tuberculosis is not wiped out yet, he said, nor is it under control. TB still strikes some 7,000 Canadians each year, and for close to 1,000 of its victims it brings death.

Many more people are harboring in their bodies the

germs that cause TB. In Manitoba it is estimated that 21% of the population is infected.

"Any of these people can break down with active disease at any time and thus become a source of infection far into the future," he said.

The tragedy about tuberculosis today is that most of it is needless, Dr. Ross continued. "We have all the tools necessary for the eradication of the disease. With our chest X-ray and tuberculin surveys we have the means to find tuberculosis early, when it can be cured, and before it spreads to others. If these tools are used to the fullest extent, it is entirely possible to bring tuberculosis under control within the next few decades."

But, said Dr. Ross, this goal will not be achieved without the whole-hearted support of the people of Manitoba—their all-out co-operation and attendance at the TB surveys, and their financial support through the

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The first Christmas Seal in the world was sold in Denmark.

ple, all wishing each other well, while sick children begged pennies in the street.

Suddenly he had an idea. Would not people who were willing to go to that much trouble to express good will be glad to do a little more for the sake of children with tuberculosis? Perhaps they wouldn't mind buying an extra, special one-cent stamp if they knew the money from the sale of the stamps would be used to help these less fortunate ones.

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Profiles

NICHOLAS KILBURG

"Once upon a time there was a young man who got TB. He went to a sanatorium 'to chase the cure', and after he became better he stayed on to work there, taking charge of the Christmas Seal department. While he was there he used to lick so many seals that people began to call him 'Stick'. Of course, he did other things, like organizing one of the best Christmas Seal mailing lists in the country. Indeed, he did such a good job that soon the sanatorium appointed him assistant accountant, then a full-fledged accountant, and finally the business manager. The funny thing was that through all this the nickname 'Stick' stuck . . ."



That is the nutshell story of Nick "Stick" Kilburg, business manager of Manitoba Sanatorium for the past nine years and a member of its staff for nearly 30 years.

Quiet, pipe-smoking Stick Kilburg has often been described by his associates as one of the nicest, most agreeable and sincerely dedicated men on the Sanatorium Board staff. He was born in Winnipeg, the son of Mr. and Mrs. Peter Kilburg who came to Canada from Hungary at the turn of the century. After completing school in Winnipeg, he went to work for four years in a printing shop. In 1930 he came down with tuberculosis and was admitted to Manitoba Sanatorium.

From there on the story is known. Discharged in 1931 he took charge of the Christmas Seal Department, then situated at Manitoba Sanatorium, and was largely responsible for establishing a classification system for the Christmas Seal mailing list, which was considered by the C.T.A. as one of the best in the country. He became assistant accountant for the sanatorium in 1948, and accountant in 1950. Appointed business manager in 1951, he is now responsible for the planning and carrying out of all phases of the sanatorium's business and personnel management.

Mr. Kilburg was married in 1942 to the former Estella Elizabeth Hornibrook of Brandon, a member of the sanatorium nursing staff. He lives quietly in a comfortable bungalow situated on the sanatorium grounds and in his spare hours likes most of all to play golf. He also likes bowling and curling and, in the summertime, travelling.

But Mr Kilburg thinks nothing of putting these personal pleasures aside for his work. His main interest has always been the business affairs of the institution and, just as he had done so in the Christmas Seal department, he has worked hard to improve the business administration. One of his latest achievements was his graduation last year from a two-year university course in hospital organization and management.

Not only has "Stick" Kilburg's name stuck, but also his reputation as one of the Sanatorium Board's most able business administrators.

G. D. ILIFFE

Although the Sanatorium Board of Manitoba is a voluntary corporation, governed primarily by private citizens, several provincial government representatives have always served on its board. The reason for this is that the treatment and control of tuberculosis is a public health matter, involving both the government and the people as a whole.

One of the most valued of these "government men" is George D. Iliffe, F.C.A., comptroller-general for the Province of Manitoba. He has been a statutory member of the Sanatorium Board since 1948.

A tall, lithe man, with gray hair and pleasant manner, Mr. Iliffe was born in Lutterworth, England, and came to Canada with his parents as a small boy. His father is the late J. C. Iliffe, former principal of St. James, Elm Creek and Wawanesa public schools and for 23 years master of the fourth form at St. John's College School.

After attending public school, Mr. Iliffe entered St. John's College School where, during the last three years, he won the form prize for mathematics. He was admitted to membership in the Institute of Chartered Accountants in 1923, and elected a fellow of that institute in 1957.

After engaging in a wide variety of work with Canadian and international corporations, Mr. Iliffe was appointed chief auditor for the Manitoba government in 1933. He became comptroller-general in 1944, and as such is responsible



for the audit of all the payments and revenues of the province and for the audit of the accounts of most of its boards and commissions.

One of his outstanding accomplishments as comptroller-general took place during the years 1945 and 1947 when, as a senior advisor to Premier Stuart Garson, he helped negotiate the original tax-rental agreements with the Government of Canada. In 1955 he was awarded the City of Louisville gold medal for his achievement in a special phase of public administration. He has also contributed papers at conferences of professional associations, several of which were published by U.S. and Canadian journals.

Mr. Iliffe is married, has two sons and one daughter, and a granddaughter. His main recreational interests are curling and carpentry. At one time he participated in many other sports, including hockey and rugby football, and during his last year at St. John's College School won the senior track championship.

He has been associated with various organizations—was president of the Institute of Public Administration of Canada (1951-52), of the Alumni Association of the University of Manitoba (1952-53), and of the Institute of Chartered Accountants of Manitoba (1956-57). At present he is chairman of a continuing committee of a Dominion Provincial Conference on Provincial Public Accounts and Statistics.

San. Board Opens Therapy Unit

The Sanatorium Board's new physiotherapy and occupational therapy unit at Assiniboine Hospital was officially opened Saturday afternoon, November 19.

Several hundred guests gathered in Brandon for the opening ceremony — among them representatives from the provincial government, the City of Brandon and the Associated Canadian Travelers, Brandon Club, who helped finance the \$225,000 project.

Among those attending the event were Dr. M. R. Elliott, deputy minister of health and public welfare, Harold Baker, president of the Brandon A.C.T., Bishop Ivor Norris and Brandon Major James Creighton. J. W. Speirs, chairman of the Sanatorium Board of Manitoba, presided for the event.

The modern, one-storey therapy unit will provide an up-to-date physical medical service for the hospital's 170 extended treatment patients. It will also include treatment facilities for persons outside the hospital who can benefit from rehabilitation medicine.

SBM Nurse Retires



Miss Mary Parker, who retired from her position as licensed practical nurse at Clearwater Lake Hospital last month, was honored by members of the nursing staff at a tea in Northwood Hall. Miss Parker (seated centre) has been a member of the Sanatorium Board staff for many years.

After 17 years with the Sanatorium Board of Manitoba, Miss Mary Parker, licensed practical nurse at Clearwater Lake Hospital, The Pas, retired on October 2.

Miss Parker was a member of Clearwater Lake Hospital staff for the past three years and prior to that served at the former Dynevor Indian Hospital in Selkirk. During this time she made an outstanding contribution to the nursing care in these institutions — indeed, her dedication to her profession, her skill in bedside nursing, and her warmth and understanding, particularly toward Indian and Eskimo patients, made her one of the most valued members of the Sanatorium Board nursing staff.

One of a family of six girls and one boy, Miss Parker was born and educated in Falkirk, Scotland.

As a young woman she was particularly interested in mission work and singing, and for many years sang in a quartet in the different missions around her home.

Following the deaths of her parents, she came to Canada in 1924 where she joined two sisters who had preceded her and were living in Winnipeg. One of these sisters, Mrs. J. M. Scott, is currently a member of the nursing staff at Manitoba Sanatorium, Ninette.

Throughout her life Miss Parker had maintained a great desire to become a nurse, and so, two years after she arrived in Winnipeg, she entered the training class at Grace Hospital, then exclusively a maternity hospital. Following graduation she remained on staff a year or two, then left in the early 1930's to take on a position at Dynevor Indian Hospital, which at that time was operated by the Anglican Church.

She remained on staff when this hospital was taken over

by the Department of Indian Affairs in 1939, and its operation undertaken by the Sanatorium Board of Manitoba.

Prior to her retirement last month, members of the nursing staff at Clearwater Lake Hospital, held an afternoon tea party in her honor and presented her with a number of gifts. Miss M. Quinn, acting superintendent of nurses, thanked her for her excellent work and wished her a happy retirement.

Other members of the Sanatorium Board joined in with Miss Quinn's wish and send a heartfelt thank you to Miss Parker, now living with a brother and sister in Vancouver, B.C.

THE JOB AHEAD

The largest reservoir of human tubercle bacilli today is within the bodies of infected persons. The challenge to public health is to eradicate this vast potential source of disease or render it innocuous.

The first step is to identify each infected individual. The next is to find an effective therapeutic agent to eradicate the bacilli or make them permanently harmless. The third and most difficult is to develop individual and community responsibility for decisive action.

Ultimate victory demands a united effort in marshalling all available resources — educational, medical and community.—CTA.

SBM Director Describes Importance Of Drugs and Rest in TB Treatment

The relationship between rest and chemotherapy in modern treatment of tuberculosis was discussed by Dr. L. Ross, medical director of the Sanatorium Board of Manitoba, when he addressed a clinical luncheon at the Winnipeg General Hospital, November 3.

Dr. Ross told his audience that intensive rest is now considered secondary in importance to chemotherapy in the treatment of TB.

"We no longer think of hospitalization in terms of years, but rather in months," he said. "An initial period of three to six months in a tuberculosis hospital is advisable. But, apart from the first few weeks when there may be symptoms and toxemia, rest does not need to be intensive."

Dr. Ross said that recent advances in our knowledge of tuberculosis and the increased effectiveness of treatment by adequate chemotherapy have greatly improved the outlook for the average patient with new disease.

Although prolonged chemotherapy is essential, most patients need to be in sanatorium only a part of the drug treatment period and can continue taking drugs at home and at work for as long as a year or more."

"Most patients can expect to return to work usually within a year."

This is considerably different from treatment methods in bygone days, he said.

"When I first joined the medical staff at Ninette 35 years ago, 80% of all admissions had far advanced disease, of which 10% were hopelessly ill. About one-third did not recover and another third only partially. One third could expect a cure.

"Treatment was based principally on building up natural resistance; rest, fresh air and generous diet were the mainstays of treatment. Rest was also applied locally to the lung by pneumothorax and, although many cures were effected, empyema was a serious complication."

Rest still plays an important part in tuberculosis treat-

ment, Dr. Ross said. "But the question now is how long is it really necessary?"

Rest is unquestionably indicated in the absence of effective chemotherapy — and all chemotherapy is certainly not effective, since some patients develop resistance to drugs.

It is also important in that it gives opportunity to indoctrinate and educate the patient in the various ways to preserve his health in the future.

"Tuberculosis is still a chronic disease, subject to periods of reactivation and, although relapses are now less frequent, they still occur too often," he said. "This is evident by the fact that over 20% of the active cases reported have had lesions previously considered to be inactive."

Dr. Ross also pointed out the importance of hospitalization at the beginning of treatment.

During this period, he said, the patient is likely to be infective and if at home would constitute a danger to his family. Hospitalization also affords the opportunity for sensitivity studies, laboratory and X-ray examinations, gastric cultures, etc. — all of which have a bearing on the future course of treatment.

Private physicians play an important role in tuberculosis control, especially in the field of diagnosis, Dr. Ross said. "And recent trends are bound to bring him into closer touch with treatment, because of shorter hospitalization and continuation of chemotherapy at home.

"However," he concluded, "there are many sound reasons why almost all cases with pulmonary tuberculosis should have initial treatment in a tuberculosis hospital."

SEAL SALE

(Continued from page 1)

yearly sale of Christmas Seals.

"Tuberculosis will never die out of its own accord," he said. "Nor can it be wiped out by doctors alone.

"It must be stamped out by united effort on all fronts."

Discuss Extension Of Rehab. Service

Tentative plans for the extension of rehabilitation services at Clearwater Lake Hospital were discussed at a meeting of the North of '53 Medical Society at Flin Flon, November 4.

Dr. Leslie Truelove, chief of staff of the Manitoba Rehabilitation Hospital, Winnipeg, gave a brief description of new rehabilitation developments in Winnipeg and Brandon, and suggested that an integrated program could include rehabilitation facilities at Clearwater Lake Hospital, The Pas.

Enumerating the advantages of using the hospital as a physical treatment centre for both long and short term patients in Northern Manitoba, Dr. Truelove stressed the adequate physical facilities already present at the hospital, the good nursing service, and the presence of constant medical supervision.

Regular specialist consultation in the field of physical medicine and rehabilitation is also available to the hospital through the establishment of monthly clinics, he said.

Dr. Truelove also pointed out the importance of using the hospital's facilities for the treatment of short term patients. Although the hospital is primarily designated for the treatment of long term patients, a particular role could be played in the relatively short term admission of elderly people, he said

The object here would be increasing their functional level to a point when they could return home.

Another important function of the hospital, he said, would lie in the treatment and investigation of respiratory diseases, both chronic and acute.

At the meeting doctors discussed means of providing transportation service for patients from outlying areas. At this time it was suggested that an ambulance service might be established.

It was also suggested that many of the northern patients who now go to Winnipeg for physical medical services should be treated at Clearwater Lake Hospital.

Twelve doctors from various parts of Manitoba attended the medical meeting. Also present were five visiting doctors from Winnipeg.

Dr. S. L. Carey, medical superintendent, represented Clearwater Lake Hospital.

Clearwater Lake Hospital Opens New Dial Exchange

The installation of a telephone service may seem an ordinary matter to city folk who have been used to this sort of thing for many years now — but for staff members at Clearwater Lake Hospital in Northern Manitoba the establishment in the hospital last month of an open dial exchange was cause for jubilant celebration.

Situated 17 miles north of the little town of The Pas, some 350 miles north of Winnipeg, Clearwater Lake Hospital had waited 18 years for the coming of a modern tele-

phone service, and until this event was forced to depend on a rather rudimentary telephonic communication system provided to northern outposts by the Canadian National Telegraph. The placing into operation of the new dial office at the hospital on October 25 was considered a major step forward for the Sanatorium Board institution.

The cutover ceremony was witnessed by more than 30 guests, as well as staff members, who heard in brief the story of the telephone and the progress made in telephonic communication in Manitoba.

Among the guest speakers were G. R. Delaney of Dauphin, district supervisor for the Manitoba Telephone System, and J. F. Mills, commissioner of telephones, Winnipeg, who brought greetings from the MTS, and gave a short history of the company.

He also extended the company's appreciation to the CN telegraphs who pioneered communications in the North and from whom the MTS lease circuits in order to establish telephonic communication with northern communities.

Other speakers included the Hon. J. B. Carroll, minister of public utilities, and Mayor Harry Trager of The Pas, who on behalf of the town expressed gratitude for the new service.

Dr. S. L. Carey, hospital medical superintendent, spoke on behalf of the Clearwater Lake Hospital staff.

At the end of the ceremony Hilary Davies, hospital manager, threw the switch that put the new exchange into operation and at the same time Dr. Carey placed a call to R. H. G. Bonnycastle, chairman of the Clearwater Lake Hospital Committee, in Winnipeg.

A sumptuous dinner for the guests and staff members closed the big event.

WORLD WIDE CRUSADE

(Continued from page 1)

sponsored the sale of the Christmas Seals and sales have steadily increased.

Canada sold its first Christmas Seal in 1908, through individual committees working separately from one another. In 1927 the Canadian Tuberculosis Association consolidated the sale of seals, making it a unified and national campaign measure.

By the start of World War 1, Holboell's idea had become international. Scores of countries successfully used it in an attempt to stamp out TB as a number one killer.

While his idea mushroomed and spread, the postman with the big heart wasn't forgotten. In 1909 Einar Holboell was decorated by the King of Denmark and received the appointment of postmaster at Charlottelund, where the king spent his summers. The King of



Einar Holboell, the Danish postman, appears on the 1927 stamp.

Sweden and the King of Italy also gave him decorations, and America honored him in 1924 when he was guest at the NTA's annual meeting. Holboell was the humblest, and yet the biggest, man on that day in Atlanta, Georgia.

The Danish Christmas Seal of 1927 was not as merry as some of the previous ones. It bore the picture of the postman who became famous on all continents. Einar Holboell died February 23, 1927, but he lives on in humanity's symbol of true Christian giving. He was privileged to see not only Denmark aroused and in a winning battle against the dreaded plague, but to see his Christmas Seals encircling the globe — the messengers of hope in more than 50 different countries.

PROTECT THE FAMILY CIRCLE



Buy and Use Christmas Seals — Help Fight Tuberculosis

Higher Rate

There are approximately 200,000 former TB patients in Canada. The rate of active cases among these people is 40 times higher than that of the general public. There can scarcely be any other conclusion than that the follow-up work should be more thorough and that greater effort is necessary to see that patients stick to their drug regimes.—CTA BULLETIN.

This 'n' That

By P.A.H.

One warm, sunny afternoon not long ago I paid a visit to the patients' library at Manitoba Sanatorium, Ninette, where I spent a pleasant hour with John Mahr, a gentle, kindly, white-haired man who has been the library's director since 1954.

The library at Manitoba Sanatorium is the largest available for Sanatorium Board patients. Located in a small, dark room on the ground floor of the administration building, it overflows with some 6,500 volumes. They cover a wide variety of subjects—some 240 in the non-fiction section—and include a fairly large number in foreign languages. There are even a few books and magazines in Braille.

All of the books, which for the most part have been donated by ex-patients and service clubs, have been painstakingly organized on the shelves according to the regular library system. To be sure, many of them are quite old—some even date back to the early years of the sanatorium's history. But the greater percentage represents the finest in English literature—and, as Mr. Mahr smilingly puts it, "an old book that hasn't been read by someone, is new to him anyway."

An ex-patient of Manitoba Sanatorium, Mr. Mahr is himself the subject for a full-length article. As he showed me around the library he told me a little about his life.

He was born in the Crimea, he said, the son of a German Baptist minister who as a young man had gone to Russia to preach the gospel. While a young boy he was sent to live with relatives in the old Danish duchies of Schleswig-Holstein, now a part of Germany, and after completing school there, he returned to Russia, to the city of Tashkent in Central Asia near the Turkish border. He married there, and for a few years took up farming on the outskirts of the city.

These were turbulent times in Russia, the bloody collectivization years that followed the 1917 Revolution, and in 1928 Mr. Mahr decided to get out of the country and seek a better life in the West. He came to Canada with his wife and two small boys—just in time for the great depression.

Settling first in Winnipeg, then in Vancouver, Mr. Mahr finally turned to farming, and occasionally gravel hauling in Manitoba. In 1935, weakened by the long years of strenuous living, he fell victim to tuberculosis and was admitted to Manitoba Sanatorium.

After his release in 1938, he became an orderly at Winnipeg General Hospital,

a position he held until 1948 when he again broke down with TB and was forced to re-enter sanatorium for six more years of treatment. Released a second time in 1954, Mr. Mahr took up residence at the sanatorium where he has found now a serene life in his books, the classical music he loves, and long walks in the countryside.

When Mr. Mahr took on the job of sanatorium librarian, he was determined to build up a patients' library that would compare, if to a smaller degree, to any other good library in the province.

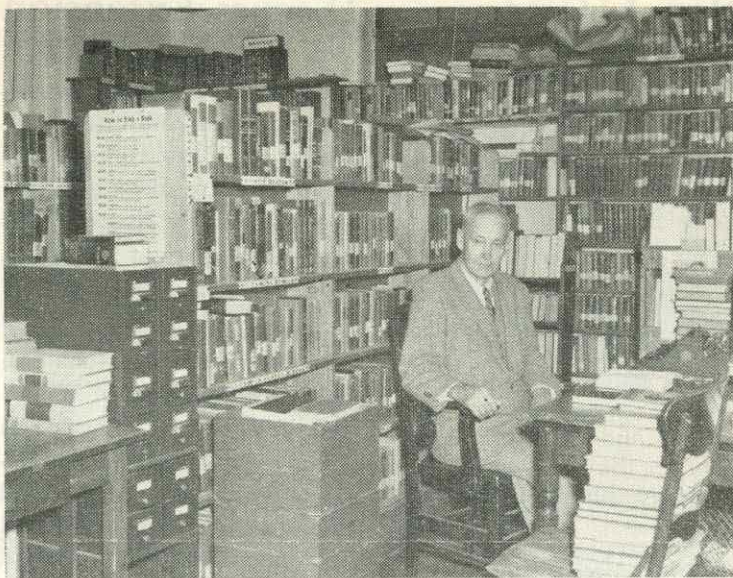
His first task was to bring order to the helter-skelter system that had served the patients for nearly 50 years. He read a good deal of literature on the subject and paid a visit to both the Brandon and Winnipeg Public Libraries. Then, armed with a brush, paint can and pen, he closed the library, sorted out the books and re-numbered them according to the Dewey system. He made out a catalogue, set the books in their new places on the shelves, and re-opened for business.

The library service at Manitoba Sanatorium is free, as it is in other SBM institutions. Patients pay no fines and they may keep the books out as long as they require them.

Mr. Mahr also delivers books to the patient's bedside on request, and every two weeks makes the rounds of the wards with his library cart. On these occasions he takes with him a wide assortment of books that he thinks will please his readers' tastes... and, of course, a goodly supply of the latest magazines.

The purpose of the service, as Mr. Mahr points out, is to get as many patients as possible to read. Books are great friends for the sanatorium patient who must spend a large part of the day in bed. By opening up wonderful worlds of imagination and adventure and new ideas, they not only widen the reader's knowledge and outlook on life, but they also serve as a pleasurable escape from the trials and tribulations that inevitably accompany a long illness.

Indeed, the value of good books has long been acknow-



—Photo by Bill Amos

John Mahr in the patients' library at Manitoba Sanatorium.

ledged by sanatorium doctors who realize that very often they can do more than anything else to keep the patient happy and content—and that, they say, is half the battle in getting well.

So it gives Mr. Mahr great satisfaction when people take advantage of the sanatorium's library service. And, as the number of books continues to grow, he has dreams of giving ever more pleasure to patients.

"Perhaps, someday, we will have a bigger room... with a reading corner... and a record player to provide good music..."

* * *

From C. G. Bonney, the Sanatorium Board's director of pharmacy services, comes a few more notes on the romance of pharmacy.

"I should like to have people develop a greater interest in drugs—rather than in just the price," writes our scholarly duck-hunter. "and it just so happens that I have these short articles on how some of our drugs got their names.

"Alcohol, for example, is derived from the Arabic word, *alkohl*, which means collyrium or eye wash... so when a happy drinker calls his liquor 'eye wash', little does he realize how close his expression is to the truth.

"Belladonna is obtained from the *Atropa Belladonna* plant. It was named 'Bella Donna' (beautiful woman) owing to the use of the drug by the female of our species to dilate their pupils in order to attract men. Also, because of its poisonous nature it was called *atropa*, after *Atropos*, the eldest of the Three Fates who was responsible for cutting the thread of life.

"Morphine is named after *Morpheus*, the Greek god of

dreams, and *Laudanum* comes from the Latin verb, *laudo*—I praise.

"Opium is from the Greek word which means juice. The drug is obtained from the dried juice of an incised capsule of the *Papaver Somniferum* (to sleep), the Oriental poppy. *Hashish*, or marihuana, as we know it, is named after Hassan ben Sahab, a friend of Omar Khayyam, who organized a group of assassins in the 11th century. They were given "hashish" before committing their bloody crimes.

"Pharmacy is derived from the Greek word, *Pharmakon*, meaning drug."

Mr. Bonney also enclosed an interesting account about the Peyote or Mescal Button (Sacred Mushroom), which we will reserve for a later issue.

* * *

Three pairs of artists, a bevy of children and a handsome St. Bernard dog are featured in TV Christmas Seal promotions this year.

These people (and dog) have combined their talents to make the 1960 Christmas Seal "come alive" as they bring home the Christmas tree, while Mom and Dad sing the Christmas Seal song.

One pair of "parents" are husband and wife, Terry Dale, hostess of CBC-TV's PM Party, and Alan Dale, host on the variety show, *Swing Gently*. Another is Pam Hyatt and Frank Stalley, the former with *Swing Gently*, the latter a CBC news announcer.

Barbara Franklin and Allan Blye also make a charming pair. She is often seen in TV productions, and he is in PM Party and *Swing Gently*.

The children who make up the family are from Toronto. The last member, perhaps the most interesting of all, is a talented, extremely well-behaved, six-month-old pup belonging to J. F. East of Toronto.

Bulletin Board

A discussion and film of Assiniboine Hospital's new physiotherapy and occupational therapy unit was a recent feature of CKX-TV's (Brandon) nightly program, "Topic". Appearing on the half-hour show were Dr. Leslie Truelove, chief of staff of the Manitoba Rehabilitation Hospital, J. P. Prendiville, physiotherapist at Assiniboine Hospital, and R. J. Robinson of the Brandon A.C.T. Mr. Prendiville also gave the commentary for a film showing patients being treated in the unit.

* * *

Speech therapy has now been added to the list of rehabilitation services at Assiniboine Hospital, Brandon. Beginning November 23, Miss Eleanor Letcher, speech therapist at the Brandon Hospital for Mental Diseases, will give treatment to patients at the hospital for two hours once a week.

* * *

The Society for Crippled Children and Adults held a two-day review and diagnostic clinic last month at Assiniboine Hospital in Brandon. The clinic, an annual event, was primarily for the examination and review of children in Southwest Manitoba.

* * *

The contract for the construction of a tunnel, connecting the Manitoba Rehabilitation Hospital with the Children's Hospital, the Winnipeg General Hospital and the Manitoba Cancer Foundation, was let this month to G. A. Baert Construction Company. Work on the tunnel will proceed immediately, according to T. A. J. Cunnings, SBM executive director.

* * *

Staff members at Clearwater Lake Hospital, The Pas, held a gala Sadie Hawkins' dance in the new Northwood Recreation Hall on November 12. The dance marked the first big social event since the hall was opened early this fall.

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Handling Christmas Seal returns at the head office this year are Mrs. La Brydon, Mrs. Mary Thompson, Mrs. Marjorie Thompson, Mrs. Iva Palmer, Mrs. Elizabeth Smith, Mrs. Kay Cribbs, Mrs. Thelma Stewart, Mrs. Mary Owens and Mrs. Chris Tones.