

News Bulletin

SANATORIUM *The* BOARD OF MANITOBA

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For Patients, Staff, and Friends of the Sanatorium Board

DECEMBER, 1959

Chairman Breaks Ground For Therapy Unit



Work on Assiniboine Hospital's new physical and occupational therapy unit officially began on December 1 when delegates from the provincial government, the city of Brandon and the Sanatorium Board of Manitoba took part in a brief sod-turning ceremony. The honor of lifting the first shovelful of earth fell to J. W. Speirs, chairman of the Sanatorium Board.

Construction of the \$160,000 hospital wing will take about six months, according to the Sanatorium Board. When completed it will provide up-to-date physical-medical facilities for the treatment of the hospital's extended treatment patients.

The society will have a field office in the basement of the building and will use the hospital's facilities for the treatment of arthritis patients in the Brandon area.

Other speakers at the luncheon in the hospital dining hall included: Dr. A. H. Povah, medical superintendent of Assiniboine Hospital; J. W. Speirs, Past Pres-



A sod-turning ceremony at Assiniboine Hospital in Brandon this month started work on the hospital's new physiotherapy and occupational therapy unit. Among those who took part in the event were: J. W. Speirs (front row: third from left), chairman of the Sanatorium Board of Manitoba, who took the first shovel of earth; Harold Baker, president of the Associated Canadian Travellers, Brandon Club, and Al [unclear], chairman of the tuberculosis committee of the ACT (standing immediately right of Mr. Speirs).

Must Re-Assess Control Program Says Ottawa Executive Assistant

Dr. C. W. L. Jeanes, assistant to the executive secretary of the Canadian Tuberculosis Association, flew to Winnipeg last month to address the meeting of the Manitoba Thoracic Society. While in town the young, personable Englishman paid a visit to the Sanatorium Board's head offices to have a look at the work carried on here, and to make a few observations of his own about tuberculosis in Canada and the rest of the world.

TB in Canada

"The greatest danger to tuberculosis control in Canada today is public complacency," Dr. Jeanes said. "We have only to point to the 7,000 new cases of TB last year to show that tuberculosis is not under control.

"Of particular concern," he said, "are the number of

re-admissions to TB institutions. Of the 11,909 admitted to hospital last year, 30 per cent were re-admissions."

"This should be enough proof that we must re-assess our work — improve our follow-up services, expand our tuberculin testing programs, and concentrate on high incidence groups."

Dr. Jeanes said that it will be at least 10 or 15 years before tuberculosis can be controlled in Canada. He referred to the World Health Organization's statement that no country can assume it has TB under control until one percent of the school leavers, or less, are positive to the tuberculin test.

It is hard to tell how rapidly the number of positive reactors is declining in Canada, he pointed out. Reliable tuberculin surveys have been conducted in Canada for such

a short time that it is difficult to gauge our progress in this respect.

"But even when TB is controlled surveys will have to continue or we may have an upsurge. The need for a continued control program was proved last summer. We thought we had polio under control in one year. But the bad outbreak in Montreal this summer showed what happens when too many people assumed the threat of polio had disappeared and didn't bother to be vaccinated."

BCG

During the interview, Dr. Jeanes stressed the importance of the BCG vaccination program in areas where the TB incidence is high.

BCG is still an effective control method in such areas as Newfoundland where TB incidence and the death rate (14.6 per 100,00 population) is about double that of other provinces.

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Ross, medical director of the Board, said that the physiotherapy and occupational therapy unit will contribute greatly to medical services in Brandon and Western Manitoba.

"During the last five or ten years there has been increasing recognition of the role physical and occupational therapy can play in helping long-term patients to assume a more independent way of life," he said. "Even patients with respiratory diseases can benefit from these restorative services."

Dr. Ross said that the Sanatorium Board was also pleased to have developed some co-operation and co-ordination with the Canadian Arthritis and Rheumatism

Mayor James Creighton; Harold Baker, president of the Associated Canadian Travellers, Brandon Club; Dr. M. R. Elliott, deputy minister of health and welfare; Dr. Frank Purdie, president of the medical staff of Brandon General Hospital; and Police Chief Thomas Collister.

Dr. Elliott expressed the appreciation of his department and the government for the assistance the Sanatorium Board has given to general hospitals in providing much-needed beds for the care and treatment of extended treatment patients.

Dr. Purdie spoke of the fine co-operation Brandon doctors have received from
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Profiles

R. L. BAILEY

Robert Laurence Bailey, elected member of the Sanatorium Board, has spent 48 years with the Bank of Montreal, growing with it from messenger boy and odd-job man to a top executive and one of Winnipeg's most respected and well-liked businessmen.

Born in Woodstock, New Brunswick, the son of shoe merchant A. G. Bailey, "Bill" Bailey went into banking right after he finished high school in 1912 — mostly because "it was the only thing to do at that time." As office boy he tended the fires, ran messages and cleaned ink pots, but being an assiduous fellow he slowly began to move upward. Two years later he was ledger keeper for the Bank of Montreal in Chatham, N.B., and soon after a teller in Ottawa.



At the outbreak of World War I, Mr. Bailey left his desk to serve in the Canadian artillery attached to the 22nd Imperial Corps in France. Back in Canada in May, 1919, he again made a bee-line for the bank and trudged back and forth across the country, going through the business from assistant accountant in Quebec to a ten-year term as credit officer in Montreal, from accountant in Vancouver to inspector in Montreal, from assistant manager in Ottawa to assistant superintendent of Alberta branches in Calgary.

In March, 1943, he came to Winnipeg as assistant superintendent of the Manitoba and Saskatchewan branches. But in February, 1947, he was off again, this time as senior assistant manager of the Montreal branch. After another three years as manager of the bank in Calgary, he returned to Winnipeg in 1950 as manager of the branch here. Finally he became assistant general manager for Manitoba, Saskatchewan and Alberta branches in February, 1955.

A big-set man with a delightful sense of humour (and

Anyone Can Have Tuberculosis



Anyone may have TB — regardless of age, sex or occupation. But everyone can find out if he has this infectious disease by taking part in the Sanatorium Board's community surveys. Christmas Seals, now on sale until the end of December, will pay the price.

public health with the Rockefeller Foundation in Cincinnati and Columbus, and two years later, after a stint as a public health nurse in St. Johns, took a VON course in Montreal. Afterwards, Miss Ellis worked as

Christmas Seal Letters

Each year the Sanatorium Board receives letters from Manitoba residents regarding the Christmas Seal Sale and the work of the Board in general. The first three let-

and the clinic. This December marks 40 years association with these institutions so I feel I have considerable reason to be grateful for help received.

exceptionally popular with both his employees and business associates. Married in 1929 to the former Kathleen Armstrong, also of New Brunswick, he lives comfortably in a home on Wellington Crescent. He likes to golf (although he claims to be the world's worst) and around the house enthusiastically piles up sawdust in his penchant for "fixing things." He is also an ardent supporter of the Winnipeg Blue Bombers, and as a boy and young man played catcher for the New Brunswick-Maine Baseball League.

Around town, Mr. Bailey is involved in a number of civic activities. He is a past vice-president of the Chamber of Commerce, secretary-treasurer of the YMCA, and one-time honorary treasurer of the Joint Hospital Appeal. He is president of the Winnipeg Branch of the English-speaking Union and has been an elected member of the Sanatorium Board since 1950, serving on the Administration and Finance Committee, Clearwater Lake Hospital and Assiniboine Hospital Committees.

MISS DERINDA ELLIS

Many things are expected of a nurse, says Miss Derinda Ellis, superintendent of nurses at Manitoba Sanatorium, Ninette. She must be a leader, a teacher, a mathematician, a plumber, sometimes a laboratory technician — and always a diplomat. She must be prepared to nurse any kind of patient and she should be able to cope with all sorts of situations. Her education never stops.

During her 33 years as a professional nurse, Miss Ellis has had a diversified career which has taken her from the children's wards and operating rooms of the modern, metropolitan hospital to the small nursing outposts of British Columbia, from public health and VON nursing in large, crowded cities to the rather quiet atmosphere of the TB institution. And during this time she has, on occasion, been called upon to deliver babies, help set fractures, do lab work, administer anaesthetics—and, as a tribute to her versatility, attend to hospital plumbing.

Born in Shipley, Yorkshire, Miss Ellis came to Canada with her parents when she was 14 years old and settled in St. Johns Quebec. After finishing high school, she entered nursing school at Children's Memorial Hospital in Montreal, graduating in 1926. That fall she took post-graduate work in



N.B., then returned to Montreal to do industrial nursing. In 1929 she became night supervisor at the Children's Hospital and remained in that position for the next ten years.

During World War II, Miss Ellis piled up more experience, first as admitting officer at the Women's College Hospital in Toronto, then as supervisor of a children's ward at Metropolitan General Hospital, Windsor. After two years in Windsor, she took a position with Essex County Sanatorium and worked there for a couple of years before joining the staff of Walkerton General Hospital as assistant superintendent of nurses. During this time, Miss Ellis learned to give intravenous injections and take X-rays — things that were to stand her in good stead when, after the war, she decided to get "small hospital" experience in British Columbia. As superintendent of nurses in Ocean Falls, Lytton, and Golden, B.C., she also became adept at giving anaesthetics, doing lab work and delivering babies. In 1952 she joined the Sanatorium Board, first as superintendent of nurses at Clearwater, and finally as superintendent of nurses at Ninette.

Miss Ellis has never lost a day for illness and though
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are typical of the many received — the last is an innovation this year.

Dear Sir:

I wanted to tell you what a pleasure it is to send even a small amount each year. When my daughter was ill about 25 years ago, we were treated with such kindness at the TB Clinics and it is something we shall never forget.

I would also like to say that we think your seals this year are really lovely, the nicest we have ever had.

Wishing you all success in your campaign, and a Happy Christmas.
St. James. Mrs. J. W. D.

Dear Sirs:

Please find enclosed \$1.00 for seals, and one sheet of seals returned. Am on pension now, hence we curtail on some items on budget. Best wishes to your Seal Campaign.

Mr. & Mrs. T. C.
P.S.—Incidentally, as the printer who did the first Seal Campaign printing for Manitoba at Kingdom Printing Co. — dealing with Dr. Stewart, then later Dr. Ross — it recalls many happy associations and conversations.
St. James.

Dear Dr. Ross:

Please accept my cheque for your Christmas Seal Fund and along with it accept my thanks for the care and help I have received through the years from Ninette Saantorium, St. Boniface

Dear Sirs:

For quite a number of years now I have donated 5 or 10 dollars to the TB fund. I do not mind this when it's for our own people, but now when both governments are talking about bringing in immigrants who have TB and are offering to help defray their cost of treatment . . . then I draw the line. It's going to cost a lot more than \$55 a month to treat a TB case, yet our old age pensioners are expected to live on this amount.

Charity begins at home . . . when our governments really play ball I will donate again. This time, therefore, I am enclosing \$2 to cover cost of stamps.

C. FF. T.

Winnipeg.

Other people are opposed to the entry of tuberculous immigrants on the grounds that they will add new hazards to community health. To all of these people, Dr. E. L. Ross, medical director of the Board gives this reply: Dear

Some time ago the Federal Government announced that Canada would make its contribution to World Refugee Year and it was mentioned that 100 tuberculous immigrants would be accepted into Canada, and also their would only be six patients. would be divided among the provinces and Manitoba's share would only be six patients.

(Continued on page 4)

Former Chairman Dies In Winnipeg

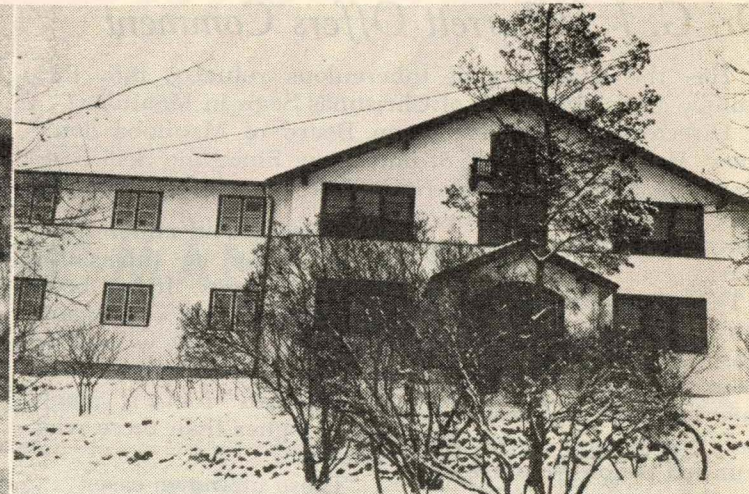


G. W. NORTHWOOD

Staff and executive members of the Sanatorium Board were shocked and saddened by the death on December 15 of Major George W. Northwood, a former chairman of the Board and long-time executive member. Mr. Northwood, who was 83, died at Deer Lodge Hospital.

Over the years Mr. Northwood made a tremendous contribution to the growth of the Sanatorium Board and the advancement of tuberculosis control in this province.

Ninette Pavilion Takes On A New Look



Pavilion Number One at Manitoba Sanatorium, Ninette, took on a new look this year when an extensive renovation job was done to both the exterior and interior of the building. Built as a military pavilion in 1917, the one-time convalescent building (left) began to show many signs of wear and tear in recent years — so this year the out-moded balconies were closed in and the exterior walls covered with a

new coat of white stucco. Inside, new partitions were erected and old ones torn down. The spacious men's and women's wards, the lounge and classroom were given coats of pastel paint and the floors were covered with vinyl tile. In all, the total effect today is a time-honored infirmary structure sporting a new face—both inside and out. (Photo of new building by Bill Amos.)

SBM Will Start World Refugee Fund - With Employee Approval

Would you contribute to a Sanatorium Board World Refugee Year fund? This question was asked of staff members at the Central Tuberculosis Clinic recently, and of the 30 members approached 28 indicated that they would support such a scheme, provided that it is undertaken by the employees of all SBM institutions.

While no definite plans have been made, nor any goal set, it is felt that Sanatorium Board employees

European refugee can be provided, or rehabilitation courses for five handicapped.

For approximately \$500 a refugee can be brought to Canada and settled here. such an undertaking would,

Re-Assess Control

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To people who may belittle the effectiveness of BCG he pointed to a survey conducted in Britain between 1950 and 1955 which involved 57,000 children. Roughly a quarter were negative and unvaccinated, he said. The other group, also negative, were given BCG and made positive.

After five years it was found that the TB incidence

is still embedded in people in all parts of the globe. (It causes at least two million deaths yearly in the world—more than half the children in the world are infected with virulent tubercle bacilli before they reach adult years.)

The International Union Against Tuberculosis has accomplished a great deal over the years in helping countries where tuberculosis is a great problem. Meeting every second year, delegates from

ber of the Sanatorium Board in 1922, and in 1925 became a member of the Executive Committee. Between 1943 and 1948 he served as chairman.

A prominent Winnipeg citizen, greatly devoted to public welfare, Mr. Northwood was for many years associated with Northwood and Chivers, architects. He was also president of the Northern Canadian Mortgage Company.

Born in Ottawa, he graduated from McGill University and came to Winnipeg in 1905. He established his own architectural business and until the outbreak of World War I designed some of Winnipeg's largest buildings.

In 1914 he enlisted with the 90th Winnipeg Rifles and in 1915 went overseas with the 8th Battalion. He returned to Winnipeg in 1918 with the Military Cross.

Back in the architectural business he became a partner in the firm Northwood and Chivers.

Mr. Northwood is survived by his widow, the former Augusta Simson, and four daughters. His son-in-law R. H. G. Bonnycastle, is an executive member of the Board.

Funeral service was held December 17 at All Saints' Anglican Church,

very little effort could make a substantial contribution to the World Refugee Campaign now under way in Canada and other countries of the world.

Such a project would simply mean that the employees of the four SBM institutions make a cash donation (of any size) to a central fund in January of next year. What would be done with the money collected would be decided by the employees when the final figure is tallied up.

Here, for the readers' information, are a few of the specific things their money could buy:

- For \$14 — Extra rations for one year can be provided for one refugee.

- For \$70 — Cash grants can be made to individual refugees in the Middle East to enable them to work as blacksmiths, coffee grinders and sellers, vegetable hawkers, barbers, tailors, etc.

- For \$180 — Vocational training can be given to a young refugee for a year.

- For \$200 — A refugee student can be helped to continue his studies at a European university for one year.

- For \$840 — One crippled refugee child can be rehabilitated in the Middle East.

- For \$1,000 — Five vocational training scholarships or installation grants for six

interest and support of the employees.

The sponsorship of refugees has been successfully undertaken by a number of church and community organizations, but it is not the main goal of World Refugee Year campaigns. The major effort in most communities is to secure contributions to a central fund.

In Canada, some of these funds have been established by the provinces for camp clearance projects*. Such a fund has recently been started by Manitoba; the aim is to clear a refugee camp near Lubeck, Germany.

Here is another project in which the Sanatorium Board could join. There are about 227 persons in this camp and some of them have been there 17 years. There are about 80 children under 14 years of age, and 28 handicapped refugees. The estimated cost of clearing camp is about \$140,000.

* * *

World Refugee Year grew out of an article written last year by the British four-minute miler, Chris Chataway, and two friends. Taking as their pattern the International Geophysical Year, they called for a World Refugees Year to help solve the problems of the countless human beings left home-

was seven times that of the BCG group.

TB in the World

Dr. Jeanes spoke of the TB problem in other countries and stressed the need for nations to recognize tuberculosis as more than a national problem.

It will take years of international co-operation before we can eradicate tuberculosis he said. Tuberculosis

less through war and political upheaval.

Soon after a British delegate put the idea to the UN, and a resolution proclaiming a World Refugee Year was adopted. Forty countries are now participating in an international campaign to alleviate the troubles of one and a half million displaced persons.

Now that definite projects have been started in Canada, an all-out drive has been launched in the communities to stir up interest in and support of this humanitarian work.

So, the question is now being put to Sanatorium Board employees: "Will you, as a group, contribute to a World Refugee fund?"

Three (rather emotional) staff members have already pledged \$25. What do the others think?

mation, arrange for technical assistance, and generally forward the work of TB control.

"It is a great honor for Dr. George Wherrett to be elected president of this world assembly," Dr. Jeanes said.

The executive secretary of the CTA has been a member of the IUAT Board for many years. As a result of his election Canada automatically becomes the site for the next conference, and about 3,000 delegates will attend the meeting in Toronto in 1961.

(Dr. Jeanes himself has been named general secretary of the Canadian Conference Committee for IUAT.)

Profiles

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she has always worked long hours she has found time to develop such hobbies as cooking, swimming, golfing and horseback riding. But her first and foremost interest is, of course, nursing. A loyal and kindly woman, she has been most successful in encouraging nurses (also LPN's and nursing assistants) to continue their education and take further courses.

Have Refugees Affected Seal Sale? Dr. G. J. Wherrett Offers Comment

Has the admission of tuberculous refugees into this country affected the sale of Christmas Seals in Manitoba?

Directors at the Sanatorium Board of Manitoba don't know. But they are sure of one thing. Since the Seal Sale opened in this province on November 13 each day's returns have been behind what they were on the same dates last year.

The Sanatorium Board can't give any particular reason for the poorer response this year. But they have had quite a few letters and phone calls from disgruntled people who are opposed to the entry of TB immigrants and are taking it out on the Board and the Christmas Seal Sale.

Most of these complaints center on two ideas: First, that these TB immigrants are posing a new danger to public health; secondly, that they are an economic burden on the country.

Secretary's Reply

A similar situation has been reported in at least one other province. The problem seems to be so great that Dr. G. J. Wherrett, executive secretary of the Canadian Tuberculosis Association, has issued a letter to provincial TB organizations

refuse to attend either mass chest X-ray or tuberculin testing surveys. It has been proved over and over again that the people who stay away from surveys have tuberculosis rates many times higher than those who attended.

"These unknown cases . . . present far more danger than patients coming into the country willing to accept treatment . . . It is more practical to get worried about them than about the strangers."

Stand to Gain

Dr. Wherrett also points out that Canada stands to gain a certain amount of valuable information from this contribution to the world's refugee problem.

"The Public Health Service of the United States kept records on 465 cases of tuberculosis entering the country following the Hungarian uprising in 1956," he said. "Not one of these cases

Head Committee



A Joint Conference Committee, similar to the one established last spring at Clearwater Lake Hospital, was set up recently at Assiniboine Hospital in Brandon. Purpose of the committee is to provide employees with an opportunity to hold discussions on staff problems and hospital affairs. Officers elected at the first committee meeting were J. T. Daigle (left), of the teaching staff, who was named secretary, and C. L. Polnik, of the purchasing department, elected chairman.

tions in a most emphatic way."

The Bill

With respect to the complaint that the refugees will be an economic burden on the country, Dr. Wherrett says that the bill for 100 patients (in Canada) will be sizeable.

"But," he points out, "when we consider what these people have been through is it anything which

Christmas Seal

(Continued from page 2)

There are adequate facilities to treat this number in our sanatoria without affecting the admission and treatment of Manitobans. The Federal Government will assume the cost and such patients would not be spreading infection as they will be in sanatorium and treated until they are able to be discharged.

As with other immigrants, the other healthy members of these

Bulletin Board

Executive and elected members of the Sanatorium Board paid their yearly visit to Manitoba Sanatorium, Ninette, last month. Following a meeting of the administration and finance committee, the guests toured the sanatorium grounds.

Among those who attended were J. W. Speirs, chairman of the Board, and elected members: R. H. G. Bonnycastle, F. Boothroyd, S. Price Rattray, R. L. Bailey, H. T. Decatur, Dr. Ross Mitchell. Also present were Executive Director T. A. J. Cunnings, C. D. Iiffe, statutory member, Dr. E. L. Ross, medical director, and Dr. A. C. Sinclair, medical director of St. Boniface Sanatorium. Dr. A. L. Paine, medical superintendent of Manitoba Sanatorium, was host.

* * *

T. A. J. Cunnings, SBM executive director, attended the directors' meeting of the Upper Midwest Hospital Conference in

tuberculosis in refugees and TB control.

In answer to those who contend that the admission of TB immigrants will be harmful to public health, Dr. Wherrett writes:

"A great many people do not understand that the chief difficulty in tuberculosis control is not the patients that you know about, and who are willing to be treated in sanatorium, but the unknown or lost cases loose in the community and spreading infection.

"Every year there are thousands of Canadians who

pitalized. Ninety-four have reached the place where they have been discharged from clinic follow-up. One hundred and eighty are still taking drugs and 22 have been discharged without the need to continue on chemotherapy."

"The patients from the refugee camps provide us with a study group who have undergone great hardships, both physically and emotionally. If they respond to treatment as well as the Hungarians . . . it will bolster the arguments in favor of sound nutrition and hygienic condi-

20 million a year for chewing gum, should balk at paying?"

Chairman Breaks

(Continued from page 1)

the Assiniboine Hospital staff.

All speakers paid warm tribute to the Associated Canadian Travellers for their work in helping to raise funds for the new wing. In reply, Harold Baker, ACT president, pledged the continued support of his club in the expanded work of the Sanatorium Board.

tribute to the economy of Canada and the province. On humanitarian grounds the taking of these less fortunate people, who are living under poor conditions and with little hope of proper treatment for their tuberculosis, is a very small contribution to make.

The Sanatorium Board . . . would oppose anything that we thought would create a further problem in this respect or set back remarkable progress that has been made. I can assure you that the taking of these few tuberculous immigrants will create no problems.

E. L. ROSS, M.D.

Traditional Christmas Tree Is An Old Symbol Of Faith

O fir tree clad in solemn green
How steadfast are thy colors!
The summer blaze or winter chill
Thy noble verdure graces still;
O fir tree clad in solemn green,
How steadfast are thy colors!

—Translation from the German

There are many legends about the first Christmas tree. One of the most popular, as you know, is the story told about Martin Luther who, when he was out walking one Christmas Eve, was inspired by thousands of glittering stars in the sky to place lights on a fir tree to brighten the Christmas of his son.

But the Christmas tree, in some form or other, has existed for centuries, and up until the middle of the sev-

enteenth century the Christbaum (as it is called in Germany) had no lights.

It is believed to be the invention of the common people (not the church) and although they have no idea of its factual history, they have many beautiful stories about its origin which are far more eloquent than any dull chronicle. Here is one of them:

* * *

Once upon a time on a cold Christmas Eve, the wind howled and whistled about a forester's cottage, deep in the midst of tall trees. Inside, the forester and his good wife and children were warm and snug, thankful for their stout little home and plentiful supply of food.

Suddenly there came a tiny knock on the door.

"Who can that be?" cried the startled forester.

"Open the door and let us see!" chorused his family.

The forester quickly arose and threw open the thick, wooden door. There on the threshold stood a small child, cold, hungry and exhausted.

Quickly the family took him in and shut out the storm. The wife sat the child down by the fire and brought him some goodly, plain food. Afterwards he was put in the cosiest bed.

The morning broke in a dazzling white such as the forester and his family had never seen before. Up in the

heavens the angel choir sang, with their beautiful music which reaches down to shepherds and cottagers alike.

The Child stood before them, radiant now. And He said:

"There is nothing I can give you beyond what you already have, except one thing." From a fir tree he broke off a branch and planted it by the door. Immediately it blossomed.

"Behold," He said, "my gift to you. Henceforth it shall always bear its fruits at Christmastide, when all the world is empty and dead. To you it shall be a sign of faith that does not die."

Recent additions to the Sanatorium Board staff include: Miss Jeanie O'Rourke Thomas of Carfin, Scotland, appointed charge nurse at Manitoba Sanatorium; Miss Elsie Mary Stewart of Ninette, who also joined the nursing staff at Manitoba Sanatorium; Mrs. Alice E. Farmer, appointed charge nurse at Assiniboine Hospital; and Mrs. Carol Clark, new stenographer at the CTC in the Rehabilitation service.

* * *

Congratulations are extended to Erken Hentschel, electrician at Clearwater Lake Hospital, who obtained his Journeyman Electrician's License.

* * *

The following couples were married recently: Lionel Joyal, X-ray technician at Clearwater Lake Hospital, to the former Laurette Comeau, nurses' assistant, on October 31 in St. Boniface; David Ackroyd, son of Ernest Ackroyd, CTC X-ray technician, to Barbara Furgal on Nov. 14 in Winnipeg; Gladys Kathleen Voke, of the nursing staff at Clearwater Hospital, to Donald McLean, commissionaire at Clearwater, on Dec. 9 in Winnipeg.