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CTA To Conduct National Study of Drug Resistance

A chief concern of those engaged in tuberculosis treatrest today is the increasing er of patients entering oria with drug resistant strains of tubercle bacilli, says Dr. C. W. L. Jeanes who on September 1 succeeded Dr. G. J. Wherrett as executive secretary of the Canada Tuberculosis Association.

The Welsh - born doctor, who came from Britain to join the CTA in 1957, paid a visit to the Sanatorium Board's head offices and Manitoba Sanatorium this month during a tour to acquaint provincial TB organizations in Western Canada with the current program of the Canadian Tuberculosis Association.

One of the CTA's main projects, he said will be a national study of the drug rest to problem.

ccording to Dr. Jeanes, the association thinks that as many as 20 per cent of the people entering sanatorium today are resistant to one, two or all of the main antituberculosis drugs. This percentage includes both new active cases and patients with reactivated disease.1

In cases where patients show resistance to these drugs — INH, PAS and streptomycin — doctors must rely on second line drugs which are not nearly as effective and are much more toxic.

The problem is not too bad yet, says Dr. Jeanes, but it could turn into an unmanageable situation if treatment is not administered for a long a time — or if research not turn up another drug as effective or better than the "Big Three".

The last important new drug — INH or isoniazid — was discovered some ten years ago, and is considered the best of the three. Administered in the form of a little



BUY AND USE CHRISTMAS SEALS. Lee McFarlane, daughter of Mrs. Patricia McFarlane of the Sanatorium Board's executive offices, was one of 12 teen-age volunteers who helped prepare for the 1962 Christmas Seal Campaign. The Christmas Seals, which this year depict chubby angels on a stained glass window, went on sale on November 12 to raise funds for the Sanatorium Board's province-wide program to prevent tuberculosis.

(Photo by Dave Portigal)

white pill, it does not kill the tuberculosis germs, but helps to incorporate them so that

to incapacitate them so that they die naturally or are swept away by the body's na-

tural defences.

Largely as the result of the widespread use of INH, the tuberculosis mortality rate in Canada has now declined to 4.2 per 100,000 population and the length of hospital treatment has been considerably shortened, Dr. Jeanes said.

But, he pointed out, the decline in the incidence of new cases has not kept pace. A total of 1,918 new active cases of tuberculosis (a great many in the dangerous, infectious, far-advanced stage of disease) were reported in Canada during the first six months of this year. This is a nearly nine per cent increase over the number of new active cases reported during the same period in 1961.

If this infectious disease is to be eliminated, case-finding surveys to find tuberculosis

(Continued on page 4)

A.C.T. Will Buy X-Ray Equipment

The Associated Canadian Travellers, Brandon Club, have pledged \$30,000 to purchase new equipment for the X-Ray Department at our Assiniboine Hospital.

The motion to replace the hospital equipment was passed unanimously at a general meeting of the club on October 3.

In acknowledging the club's proposed donation, T. A. J. Cunnings, executive director of the Sanatorium Board of Manitoba, expressed the Board's deep appreciation to the Brandon group for their full and generous support of the Brandon hospital and the various services of the Board.

Through their various money raising schemes, he said, the club has raised \$60,000 during the past five years, towards an \$85,000 pledge to help pay for the new Physiotherapy and Occupational Therapy Unit at Assiniboine Hospital.

It's Christmas Seal Time

This month marks the 55th year that Christmas Seals have been sold in Canada to raise funds for the fight against tuberculosis. In Manitoba Christmas Seal dollars are the main source of revenue for the Sanatorium Board's year-'round program of tuberculosis prevention, which provides the following vital services:

Tuberculin and X-ray Surveys — So long as we lack a completely effective vaccine against tuberculosis, community surveys, which try to find tuberculosis before infection spreads to others, will remain the chief means of bringing the disease under control. Last year 248,609 Manitobans received free examinations in TB clinics and surveys largely financed by Christmas Seals.

Rehabilitation Services for Tuberculosis Patients — Last year several hundred tuberculosis patients benefited from a special rehabilitation program which included guidance, training and employment assistance. In this day, when one-third of the tuberculosis patients entering sanatorium are reactivated cases, rehabilitation programs have become increasingly important. It is fairly certain that patients who have the benefit of these services are better equipped to cope with the stress of daily life after they leave hospital. This is often the deciding factor between recurrence of disease and the maintenance of health.

Health Education — A small percentage of Christmas Seal funds are spent on a health education program to teach people the facts about tuberculosis.

Apart from these services the Christmas Seal Campaign contributes something of great value that cannot be measured in dollars. For example, to those engaged in the fight against tuberculosis, Christmas Seals are much more than a fund raising device. They offer us the opportunity to interpret to every citizen the true current picure of the tuberculosis problem and the need for continuing an intensive program of prevention.

And to the people of Manitoba, gay Christmas Seals on holiday cards and packages offer everyone a chance to help protect their homes against this disease.

Please do your part to bring tuberculosis under control in our province. Please BUY AND USE CHRIST-MAS SEALS.

Address all communications to:

THE EDITOR, SBM NEWS BULLETIN,
800 Sherbrook Street, Winnipeg 2, Manitoba
Authorized as second class mail, Post Office Dept., Ottawa
and for payment of postage in cash.

Around Our Institutions

"These are my memories," said Kal Jambor with an enthusiastic sweep of his hand "These are my friends. I like to paint all the people who are my friends."

Judging from the collection of paintings and charcoal sketches that adorn the walls, bureau and floor of his room, Hungarian-born Kalman Jambor has a lot of friends and memories.

A passionate, dedicated artist, Kal has been a nursing orderly at Manitoba Sanatorium for nearly a year — not just because he needs the work, but because as an orderly at Ninette he encounters all sorts of people . . . and subjects for his work.

Kal has never had any formal training in art. Born and raised in Budapest, he took up sketching and painting on his own — when he first discovered he liked girls.

That was at the age of six — when he drew a picture of his young, beautiful, redhaired teacher.

Since then women have remained his favorite subject because, as he says, "There are so many good things about them."

Kal is also extremely sensitive to the kind of world he lives in. He couldn't a b i d e Russian rule in Hungary. According to him, they were dishonest ... and life was not as beautiful as they promised.

Thus, after serving two years in the Hungarian army, he took part in the '56 uprisings and, when they failed, escaped the country.

Soon afterwards Kal came to Canada where he worked in the lumber camps and mines of Northern Ontario.

"It was a rough, tough world," he said, "but it was honest and I loved the breed of men I worked with, and I painted many of them."

For three more years he worked with road construc-

tion gangs, then took a sixmonth holiday in a Winnipeg "java shop" where he lived and slept and earned money sketching, painting and playing the drums. Last November he gave up this pleasure to become an orderly.

Kal enjoys nursing the patients at Ninette San. He sympathizes with their problems, rejoices with them in their successes . . . and often paints them, working from small preliminary sketches.

People are sometimes flattered, amazed or amused to see their portraits. Always they bear symbolic titles, such as "My Long Hair", "Angry Green Eyes" or "Rain Drop" (the face of a girl in a drop of rain.)

Some take Kal as long as a week to complete, while others come easy . . . like "Sleepless Night" which was completed in twenty minutes.

Kal, who worships the hottempered Goya, describes his technique as impressionist realism. In the future, he says, he hopes to be an impressionist painter . . . and later, perhaps, to work only in the abstract.

Wherever life leads him, the Sanatorium Board wishes this talented young man fulfillment of his dreams.

Mr. Clendenning Retires

On September 31 A. G. Clendenning retired from his post as master painter and carpenter at our Clearwater Lake Hospital, The Pas.



FIFTY THOUSAND SHEETS OF CHRISTMAS SEALS are wheeled into the Sanatorium Board's offices by Miss Jean Harrison (left) and Mrs. Shirley Johnston. The women were among some 300 volunteers who helped prepare for the 1962 Christmas Seal Campaign. (Photo by David Portigal)



Artist Kalman Jambor and one of his friends.

A member of our Clearwater staff since the hospital was first opened in 1947, Mr. Clendenning was honored at several parties prior to his retirement. On September 21 fellow staff members of the Engineering Department held a stag party for him and his friends at the hospital and airport, and on September 25 both he and his wife were guests of honor at a tea in Northwood Hall. On this occasion Chief of Medical Services Dr. S. L. Carey presented to the couple, on behalf of the staff and his friends, an engraved silver tray.

Being among the first of our staff members at Clearwater, Mr. Clendenning has left his trademark of good work in every hospital department and the staff residences, and he will long be remembered by all who knew

We wish him and his wife continued health and prosperity in their new home at Neepawa.

NATP Graduation

The fifth class of nurses assistants and orderlies to complete the Sanatorium Board's Nurses' Assistants Training Program at Assiniboine Hospital, Brandon, received their certificates during a brief ceremony on November 1.

The new graduates are: Miss Gwen Bucklaschuk, Mrs. Wilma Green, Mrs. Beverley J. Henson, Mrs. Laura Hjelmeland, Mrs. J. R. Howell, Miss Gladys Janush, Miss Evelyn Kowal, Burton McDougald, Mrs. Eveline Millar, Mrs. Flora Nixon, Mrs. E. Hendricks, and Mrs. V. Pow.

The guest speaker was Dr. E. L. Ross, medical director of the Sanatorium Board.

Following the presentation of certificates by Mrs. Irene Cruikshank, director of nursing, Burton McDougald, nursing orderly, gave a brief speech on behalf of the graduating class. The event closed with/a tea in the staff lounge.

Champaign Volunteers

The Sanatorium Board extends warmest thanks to the some 300 volunteers who helped prepare for our 1962 Christmas Seal Campaign.

During the six weeks prior to the opening of the campaign on November 12 the women gave up about 2,000 hours of their time to come to our Christmas Seal offices, fold seals and stuff envelopes for mailing.

Among the groups involved in the preparations were: Ladies' Auxiliary of the Associated Canadian Travellers, Winnipeg Club; P.E.O. Sisterhood, Chapter D; Inner Wheel of Winnipeg and West Winnipeg; Calvary Temple Mission Circle; Professional Engineers' Wives; and the members of various Winnipeg curling clubs.

On two special "Blitz Nights" last month, some 100 business women from all parts of the city joined our own staff members in a busy stuffing session. Appearing at our offices soon after 5 p.m., they had dinner in the hospital cafeteria, then went straight to work — stuffing as many as 50,000 envelopes in a single night.

To all of these people goes the Sanatorium Board's heartfelt gratitute . . . for it is no understatement to say that, without their contribution, it would be almost impossible to continue our yearly crusade against tuberculosis.

New SBM Staff

To the Sanatorium Board of Manitoba we welcome the following new staff members:

Assiniboine Hospital: Miss Margaret Davidson, general staff nurse; and Mrs. Jacqueline Jarvin, licensed practical nurse.

Clearwater Lake Hospital, Miss Yvette Delgado of Jamaica, general staff nurse; Mrs. Isabelle Newall, general staff nurse; Miss Shirley Johnston and Miss Julie Ezie, licensed practical nurses.

Manitoba Rehabilitation Hospital: The staff of the Occupational Therapy Department has been bolstered considerably with the arrival of two new occupational therapists.

Miss Heather Liddell arrived from England on October 16. A 1959 graduate of the London School of Occupa al Therapy (with a di tion in psychology), she formerly employed as a cupational therapist at general hospital in Su land, Co. Durham.

Michael Keevil, also a uate of the London Oc tional Therapy School, a ed on November 9. He recently attached to the bury Hospital at Wood Essex.

The hospital now has remedial gymnasts with arrival this month of I Whitton. Mr. Whitton, was born in Somerset, land, is a graduate of School of Remedial Gyntics at Penderfield Hosp and was formerly senio medial gymnast at the I trial Rehabilitation Cent Bristol. He also served three years as a PT intor in the British Army

New physiotherapist the rehabilitation hospita Miss Patricia Enslin and Norma Haynes. Both w born in Durban, South A Miss Enslin was former tached to a hospital in hannesburg and Miss Ha to Baragwanath Hospit the Transvaal.

Miss Margaret C. Rick is a recent addition to speech therapy staff. A uate of the Edinburgh S of Speech Therapy, Rickards later obtained licentiateship at the Co of Speech Therapists in don. She arrived in Ca in 1956 where she took a tion at the Cerebral Centre in Hamilton. In she came to Winnipeg until recently was therapist at the Child Hospital.

To the medical staff and Manitoba Rehabilitation pital we welcome the foring doctors:

Dr. S. K. Warma, wh ceived his degree in med in Calcutta, India, is a cialist in general sur and a Fellow of the l College of Surgeons. In Dr. Warma was appo senior surgical house of at Nottingham General pital and from 1959 unt came to Winnipeg in was surgical registrar at hospitals in Sheffield. He recently a member of medical staff at Grace pital. Dr. Adrian H. Collyns,

was born in Uganda, ha honors degree in na sciences from Cambridge versity and took his ry training at St. Barthole. Hospital in London.

Dr. George Hollo, who born in Yugoslavia, is a uate of medical school Belgrade and Israel. Be coming to Winnipeg he wed for the Ministry of H in several hospitals in Is

Our Brandon Unit - Stepping Stone to a New Way of Life

Tommy Suwarak is an Eskimo, age 27, who stands at out five feet and weighs y 90 pounds. For over eight years he had far advanced tuberculosis of the lungs which, although it is now inactive, has left him with a crippling respiratory problem, rheumatic heart disease and permanent deafness.

Tommy is married and has a six-year-old son who lives with his mother at Rankin Inlet, but Tommy knows he will never be able to rejoin them there, for his physical condition is such that he could not again survive the rigour of life in the Far North.

Under these circumstances what can be done to help Tommy? A displaced Eskimo whose cheerful grin belies be lonesesome look in his es, it is difficult to imagine at he could live happily in our "southern" white society. He can speak only a little English, has only about two years of schooling and virtually no training for any and of occupation — save

Tommy's problem is, without doubt, particularly complicated, but in many respects it is quite similar to the difficulties facing hundreds of other handicapped Indians and Eskimos who, through reasons of health or personal desire, are seeking a living away from the reserve, among people whose social customs and habits are alien to their own.

To help alleviate part of this tremendous problem, the natorium Board of Manitous, in co-operation with varous government departments, operates a special rehabilitation program for handicapped persons of Indian origin. The services are offered to persons with any kind of physical handicap, and in recent times have also come to include a few who are considered socially handicapped.

In general the program is divided into three sections, comprising: An in-hospital program of counselling and academic up-grading for persons in Sanatorium Board hospitals; a rehabilitation unit at our Assiniboine Hospital in Brandon; and placement and follow-up services.

The core of the program is special unit at Brandon. nown officially as the Evaluation and Social Orientation Unit, its primary purpose is to acquaint the Indian, Metis or Eskimo with life and work in Canadian urban society... and it is here that people like Tommy are admitted for a three or four month period

following their treatment and a brief period of assessment.

Although the unit occupies one wing of Assiniboine Hospital and uses that hospital's facilities, it is designed to have as little hospital atmosphere as possible, but rather to approximate a warm, friendly boarding home in a normal, urban setting. It provides accommodation for six women, ten men and one family, includes a classroom with a small, attached kitchen unit, and a lounge.

Under the guidance of supervisor Miss Ruth Snuggs and her assistant, Mrs. Phyllis Watt, the rehabilitants go through a daily routine which simulates as closely as possible an average workday. Direct supervision is kept to a minimum. Each person gets up on his own in the morning, tidies his area of the dormitory and joins the others in general housekeeping chores. After breakfast he reports to the classroom.

Schooling in the unit is usually limited to the individual needs of the student. (For example, in Tommy's case the aim at this point is to convince him that he should use the hearing aid with which he has been provided, and to increase his knowledge of English.)

But although it is important, schooling plays a seconday role. Most of the classroom time is devoted to group counselling in a wide range of subjects — such as grooming and personal hygiene, purchasing and budgeting, social courtesies, rights and responsibilities of citizenship.

Many other hours are spent showing the rehabilitants how to prepare for, apply for and keep a job. With the aid of films, tours of industries and talks by local businessmen. They are given an idea of the wealth of job opportunities available in the city and, as much as possible, the counsellors help them select some vocational goal.

In their leisure hours, the men and women learn about recreational opportunities and, with the assistance of Mrs. Watt and Harold Weitman, they take part in activities ranging from weaving, sewing, knitting and glovemaking to ceramics, copper tooling, metal engraving and pottery. At other times they go in for more active recreation, such as swimming, horseback riding, bowling, skating and square dancing.

As a result of the unit's program, a gradual change usually takes place in the rehabilitant. As the weeks go by his outlook broadens, he develops self-confidence, new

goals and an increased understanding of how to cope with the problems that will face him when he is on his own.

And yet, when he leaves the unit, he is not necessarily ready to take on life without further guidance. The unit is just the beginning of his rehabilitation process, the stepping stone bridging the gap between the old way of life and the new. In the months ahead, while he is getting settled in society, situations may arise which he will find difficult to handle, and although he is encouraged to rely on his own resources. the rehabilitation department may have to step in to give further counselling and moral support. Very often this "weaning process", considered a vital part of the total program, continues for a year or two.

Since the Brandon Unit was established four years a go, many men and women have passed through it. In the time following their discharge not all have succeeded in overcoming their problems and some have returned home to the reserve. But the successful ones are by far the greater number, and many have gone on to become office workers, electricians, a u t o mechanics and accountants.

Some have required little or no assistance after the v leave the unit. Others have required a lot of help over a long period of time. In the case of Tommy Suwarak, for example, it will be many months before his case file can be closed . . . indeed, it may never be closed. The Rehabilitation Department is however encouraged by the fact that during the weeks he has spent at the Unit, his physical condition has improved considerably, and they are hopeful that Tommy may eventually be settled at Fort Churchill, where he can be with his family and his own people, but still close to the medical attention he will require for the rest of his life. Because he is an expert in soapstone sculpture, the department also hopes to establish him in some business along this line.

In all, the rehabilitation of the Indian, Metis or Eskimo calls for a lot of patience, a lot of money and, above all, a lot of time.

But time - consuming and expensive as it is at the outset, rehabilitation is an investment that pays off handsomely in the end. As a result of this unique experiment, 130 men and women are now settled in some gainful employment and have become responsible, contented, tax-paying citizens.



Twenty-one-year-old George Baxter, a former tuberculosis patient, likes to improve his English by reading the newspaper.



Tommy Suwarak, an Eskimo, tackles Grade 3 English lessons with the help of Mrs. Phyllis Watt, assistant in the Brandon Unit.



During their leisure hours, Kenneth Keeper and Cyril Spence strum guitars, while John Alexander records the session.



Ceramics is a favorite hobby of the rehabilitants. Left to right, Rebecca Gliddy glazes a candle holder, Alice Thunder is fettling a hand modelled shell dish, and Rena Hart glazes a leaf vase.

Six Doctors from Britain, U.S. and Canada Students Awarded Will Attend Symposium On Rehabilitation Memorial Bursary

Six distinguished physicians and surgeons from England, Canada and the United States will be special guests at the Third Manitoba Symposium on Rehabilitation and Orthopedic Disabilities, to be held in Winnipeg on December 7 and 8.

The six physicians are: Sir Reginald Watson-Jones of London, England; Dr. Richmond S. Paine of Washington, D.C.; Dr. C. H. Slocumb of Rochester, Minn.; Dr. H. Relton McCarroll of St. Louis, Mo.; Dr. D. H. O'Donoghue of Oklahoma City; and Dr. A. T. Jousse of Toronto.

The Symposium, which has grown to be one of the top annual medical events in the province, is open to all people who are interested in the problems of rehabilitating the disabled. It is arranged by the Orthopedic Section of the Manitoba Medical Association and is sponsored by the Sanatorium Board of Manitoba, the Society for Crippled Children and Adults of Manitoba, the Work men's Compensation Board, and the Manitoba Division of the Canadian Arthritis and Rheumatism So-

Because of the considerable interest shown in the Symposium in previous years, it will be extended this year from one day of concentrated study to two days. The first day will consist of clinical sessions on the orthopedic problems of the treatment of paraplegia, arthritis and cerebral palsy, to be held in the auditoriums of the Winnipeg General Hospital School of Nursing and the Manitoba Rehabilitation Hospital. The second day will be devoted to the presentation of special papers in the auditorium of the University of Manitoba Medical School.

The Alexander Gibson Memorial Lecture will be delivered by Sir Reginald Watson-Jones on Friday evening, December 7, in the Medical School auditorium. Title of his lecture is "The Advance of Bone Surgery — Treatment of the Body and Mind."

Sir Reginald will also take part in the clinical session on Orthopedic Problems and will present a paper on "Dislocations of Joints and Their Complications".



A man renowned in medical circles throughout the world, Sir Reginald is Orthopedic Surgeon to the Queen, civilian consult-

ant in orthopedic surgery to the Royal Air Force and Director of the Orthopedic and Accident Department at London Hospital. He holds numerous medical degrees and has written many books and papers on orthopedic and surgical subjects.

He is also a past president of the British Orthopedic Association and Hunterian professor of surgery and senior vice-president of the Royal College of Surgeons of Eng-

Dr. Richmond S. Paine, of Washington, D.C., will pre-

sent two papers on the treatment of Cerebral Palsy. Dr. Paine was recently appointed director of a new Diagnostic and Treatment



Centre for Congenital Defects and Malformations at Children's Hospital of the District of Columbia. Forwith the Children's merly Medical Centre and Harvard Medical School in Boston, he has also been appointed neurologist to the Children's Hospital in Washington and Professor of Pediatric Neurology at the George Washington University School of Me-

He is an expert in the neurologic evaluation of the infant and has produced two medical motion pictures on the subject for the National Institute of Health.

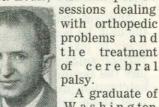
Dr. Don H. O'Donoghue, of Oklahoma City, will also



take part in the session on orthopedic problems and present a special paper on the treatsurgical ment of ligament injuries.

Dr. O'Donoghue has been in private practice in Oklahoma City since 1930, and since 1948 has served as professor and chairman of the Department of Orthopedic Surgery and Fractures at the University of Oklahoma Medical School. He is also Chairman of the Faculty Board, and a member of the executive committee of the Clinical Faculty of the School of Medicine and the University Hospitals. The author of a number of medical articles, he has recently completed a book entitled "The Treatment of Injuries to Athletes".

Dr. R. Relton McCarroll, of St. Louis, will take part in



Washington University

School of Medicine, he is a staff member of Barnes, St. Louis Children's, St. Luke's and the Shriners Hospitals in St. Louis. He is also past president of the American Academy of Orthopedic Surgeons and the Orthopedic Section of the American Medical As-

Dr. A. T. Jousse, of Toronto, will discuss the treatment and management of paraplegia.



tation Medicine at Toronto University, and medical director of Lyndhurst Lodge Hospital in Toronto.

Dr. C. H. Slocumb, of the Mayo Clinic in Rochester, Minn., will take part in a session on the treatment of arthritis and will present a paper on "The Internist's paper on help in Orthopedic Surgery for Patients with Arthritis."

Dr. Slocumb received his Doctor of Medicine from the



University of Minnesota 1927 and his Master Science in Medicine in 1930. He has been a member of the Mayo Clinic since

1936 (having a special interest in rheumatology and arthritis), and from April, 1953, until October of this year served as head of the Clinic's Medicine Section.

In 1951 Dr. Slocumb was awarded the triennial gold medal of the West London Medico-Chiurgical Society for his work in the clinical investigation of the application of cortisone and ACTH.

"Drug Resistance"

(Cont. from Page 1) early must be continued with as much vigilance as ever, Dr. Jeanes said. And the principal anti-tuberculosis drugs we now have must be brought to bear before the widespread emergence of drug resistant strains of the tuberculosis

Dr. G. D. Coghlin

The Dr. Donald Gordon Coghlin Memorial Bursary was recently awarded to two students attending the University of Manitoba's School of Medical Rehabilitation. The recipients were Miss Barbara McKay and Miss Janice Minaker, first year physiotherapy students.

The bursary was founded in 1961 by the Western Manitoba Branch of the Canadian Arthritis and Rheumatism Society to honor the memory of the former medical director of the Brandon Branch and the former chief of the department of internal medicine at our Assiniboine Hospital in Brandon.

This is the second year that the bursary has been presented by the society and this year the society was able to increase both the amount of bursary and the number of students receiving it.

The bursaries were presented by Dr. Fletcher Barager, medical director of the Manitoba Division of C.A.R.S., at a small luncheon at the Manitoba Rehabilitation Hospital.

Among those who attended the event were Dr. L. H. Truelove, chief of medical services of the rehabilitation hospital and director of the School of Medical Rehabilitation, and Miss Marjorie Spence, head of the school's physiotherapy department.

The Manitoba Division of C.A.R.S. was represented by the executive secretary, J. E. G. Murrell, and the Western Manitoba Branch by the secretary, Mrs. A. G. Wood.

Club Holds Party

To boost interest in staff recreational activities, the Manitoba Rehabilitation Hospital Recreation and Social Club held a party on Friday evening, Nov. 9, for staff members, their relatives and friends.

The party, which offered bingo and other games, dancing and refreshments, was attended by 130 persons and was deemed a sound success - a good beginning for further staff social activities.

Among the events planned for the future will be a Christmas Party, to which friends and relatives of the staff will again be invited.

According to club chair-William Williamson, man several sports activities are under full swing. now Twenty-one persons have signed up for the curling club; 16 women are taking part in the gymnastics class, and 40 members and 20 spares are competing in the bowling league.

Bulletin Board

A special one-day st dy of the tubercule control program in Ma itoba will be be held the Manitoba Rehabili tion Hospital on Dece and the roles of the hea health unit and the pr ate physician in TB c

Taking part will representatives from t provincial and local heal departments, the Sana rium Board's executi and tuberculo medical staff. Dr. C. W. Jeanes, executive secr ary of the Canadian Tu erculosis Association, w be a special guest. Dr. R. Elliott, provincial puty minister of heal will act as chairman.

A large x-ray film si vey was conducted by t Sanatorium Board's M bile Survey Unit at Trappist Monastery in Norbert on November The survey was a spec project which combin TB preventive service with a research progra of the U.S. Cardiovascul Disease Control Servi The object of the U project is to determi the relationship betwe the fat content of the d and the development coronary artery disease

Miss Nan Tupper Cha man, director of dieta services for the Sanato ium Board returned Winnipeg recently from holiday in Italy, Gree and Turkey. Prior to h departure overseas s attended the annual co vention of the America Dietetic Association, he in Miami, Fla., from No ember 9 to 13.

Edward Dubinsky, SB executive assistant, is o of two trustees to repr sent the Associated Ho pitals of Manitoba at t Upper Midwest Hospi Conference Board of Tr stees meeting in Minne polis on November 30.

Anyone have an unus piano which they wou like to donate to the p tients at the Manit Rehabilitation Hospital

A piano is urgent required for patient 1 creation, and another needed for the Spee Therapy Department where it will be used i singing classes, an impo tant part of treatment.