

Where is the Lord Lister who will do for the hospital kitchen what the great surgeon did for the operating room?

In our clearer knowledge of life and its requirements, we have come to see how great a part in all living things the food plays; how its scantiness or abundance gives either leaf or seed, affects muscular or brain development. How quickly improper food destroys the perfect balance of health in a pet geranium, or in the school girl. We are learning that the business man breaks down not because of his work but because of his hasty pastry luncheon or his banquet dinners. Life is conditioned on its food supply, and the first place in which all the best scientific knowledge of food, as a remedial agent, should be applied is in the hospital kitchen. But, as in the old adage, shoemakers' children and blacksmiths' horses go barefoot, so the hospital kitchen is among the last to show the effect of modern science. The great surgeon is too busy to think about it and the medical school has taken for granted that the usual is the sufficient, so that the house superintendent has no real knowledge which will enable him to direct his chef or instruct his nurses. In a few cases, the latter have some outside instruction which, falling upon more or less stony ground, brings forth scanty food, or a good crop, according to circumstances.

The hospital kitchen of the future will rival the operating room in cleanliness and convenience, when it is clearly recognised that of no avail is the skill of the surgeon, useless is the drug of the physician if the body cannot renew its strength from within, if diseased and inflamed tissue cannot be replaced by normal conditions. Nothing but food can furnish the blood current with the substances from which the cells may choose those essential to them. However fully he may be sustained for a time by the products of the chemical factory, it is of the utmost importance to the final recovery of the patient that he desire natural food in sufficient quantity to regain his strength.

The neglect of the heart of the whole hospital—the kitchen, is hard to understand until one brings himself to realise that this same neglect permeates the community in regard to individual homes and that the medical schools treat of food only in relation to disease and not in relation to healthful living.

It is everywhere too often forgotten that the human body has a reserve fund which enables it to meet a sudden run on its bank account with

safety, and hence for a time it can go without food or it can use a one-sided food. It can assimilate food forced into the circulation without its wish, but every physician knows that there is a limit to this; that a natural appetite for natural food must come as a means of recovery. Why then is it such a matter of indifference what is served from the kitchen?

It is quite time that plain truths should be spoken and that every one, from trustees to scullery maid, should be roused to do each his or her part toward a better state of things, to put the food department of our hospitals on something like a 20th century basis.

The chances are, however, that the kitchen of even a new hospital will have been built on old plans or even the old kitchen will be retained after all the rest of the buildings have been remodeled. Utter lack of ventilation from the top of the room, inadequate hoods and flues, a temperature sufficient to cook most foods outside of the ovens, exhausting the strength of the workers and flavouring the food with perspiration. The steam boiler will be next the ice box and the vegetable room against the bread oven. The ice cream freezer and the garbage barrel in the same room. Any imaginable wrong condition may be found.

The relation of bacteria to flavour is being worked out in dairy and vineyard, but the kitchen goes on growing the same old crop in the corners of the dripping pans and bread tins, in the gauge of the coffee urn, in the bread mixer. Cleanliness as known to the bacteriologist has not penetrated to the lower regions in spite of apparently conscientious scrubbing, many a case in the wards has failed of its proper recovery because of this fact. Indeed, I have seen far worse things than are here described.

The kitchen should be held as a place sacred from all intrusion by soiled feet or garments. Each operation should have its place so arranged as not to interfere with any other, and all waste should be removed as soon as possible.

The model kitchen will have very little brought into it as waste when factory methods are employed, so that the coarse trimmings and cleaning will be done in a cool anteroom. The day will come when the present greasy condition of floors and cook's helpers will be looked upon with as much horror as we now feel when we think of the stained woollen coat serving the surgeon for years of operations.

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