

Practical Points.

In a paper presented to the
A. Tent Colony. Illinois State Medical Society, Dr.

J. W. Pettit, of Ottawa, says that during the past twenty years there has been a steady development of confidence in the open-air method of treating pulmonary tuberculosis, and considers the wonderful success which has attended this method of treatment in all countries, irrespective of temperature, altitude, dryness, humidity, or other special climatic conditions, has demonstrated its immense value as a curative agency.

In the housing of tuberculosis patients, he considers we have yet much to learn. It was natural that sanatoria for the treatment of tuberculosis should at first copy the usual methods of hospital construction, hence there has arisen a too-expensive ideal. Our aim should be to supply the maximum amount of pure air at a minimum expense. In favourable climates the tent has been largely and successfully used. At first thought it may seem incredible that patients can be comfortably housed in a tent at a temperature of 25 deg. below zero. Yet this is just what happened with the patients of the Ottawa tent colony during last winter, one of the most severe experienced in the north-west for many years.

Inasmuch as no systematic attempt had ever been made to treat tuberculosis in Illinois by modern methods, the State Medical Society established a tent colony at Ottawa to demonstrate that this disease can be successfully treated there as elsewhere. The demonstration was only intended to cover a period of a few months, hence it was desirable that the equipment be inexpensive. To this end the tent was adopted. It was not believed at the time this method would be feasible in cold weather, or would be accepted by the patients even if it were; therefore a large building was secured where they could be housed during the winter. It was expected that as the cold weather came on, patients would move in this building at their pleasure. In order to keep them out as long as possible each tent was supplied with an oil stove, which was expected to supply only sufficient warmth for chilly, or moderately cold weather. It was anticipated that as the weather grew colder the patients would go indoors. But they did not, even the most delicate women remaining in the tents. Instead of suffering from the cold they were comfortable, and rather enjoyed the experience. Several of those who were accustomed to living in frame houses declared they would have been less comfortable had they been at home. Even new arrivals during the extremely cold weather insisted upon going into tents. Their action is the more remarkable when it is taken into account that many, if not most of them, had come from homes where it was difficult to drive them away from the vitiated and super-heated atmosphere of badly-ventilated houses.

Since it has been demonstrated that the tent is practicable in cold climates, it should be used more extensively. It fulfils the conditions most perfectly; from a scientific standpoint the tent commends itself. A tent with necessary furnishings need not cost more than one-tenth of the plan usually followed in hospital construction. To be consistent, patients must be kept out of doors not part of the time, but all the time. In no way can this be done so easily and satisfactorily as in a tent. It is as irrational as it is expensive to house tuberculosis patients in substantial buildings.

The experience at the Ottawa tent colony proves conclusively that the use of the tent in treatment of tuberculosis is applicable in any climate.

Any method by which the patient can be induced to spend the most time out of doors is to be warmly commended. There is a general impression that with the doors and windows open they enjoy all the advantages of proper ventilation, but this is not correct. By far the best way is to have a patient live in a tent, where he can have all the comforts of the home and be practically out of doors the year round. Tent life when governed by well-selected rules becomes thoroughly enjoyable, and patients who at first have exaggerated ideas of its inconveniences become loath to leave it.

Reflections.

FROM A BOARD ROOM MIRROR.

Bazaars are universally abused, and held in wholesome detestation by the male sex; nevertheless they still hold their own as a means of bringing grist to the charitable mill. The Blackpool and Darlington Hospitals have quite recently benefited, the former to the extent of £10,000, the latter of £7,000, by two most successful bazaars; and in London we know by no other means can so much money be procured.

The Rotunda Hospital in Dublin has during its century and a-half of existence taken its place as one of the premier midwifery schools of the world, and is the largest chartered clinical school of midwifery and gynaecology in the United Kingdom, and in round numbers deals with nearly 2,000 patients annually. At the end of March, 1904, the record of persons treated during its career reached the magnificent total of 259,857. The numbers of patients, of course, are annually increasing, and this fact, coupled with the requirements of the large medical and nursing staffs, have for some time made it apparent that an addition to the institution was eminently necessary. The Governors took the matter into consideration, and it was decided to add to the hospital by building what is practically a new wing.

The Governors intend to do the work thoroughly. The building will be four storeys in height, as well as a basement, which will contain an elaborate system of heating apparatus. It will have a large hall, spacious accommodation for the doctors, and over forty rooms for the use of nurses. There will be, in addition, ample provision made for nurses who become ill, and the lady students will have excellent apartments. Each floor will have the most up-to-date sanitary appliances as well as high-class bathrooms. The floors will be of fireproof material, and the kitchens and heating appliances built on the most approved plans.

At the fortieth annual meeting of the Lady Bowen Hospital at Brisbane, the Hon. F. T. Brentnall, M.L.C., in moving the adoption of the report, said: "Now that the ladies had the franchise, he thought one of them ought in future to undertake the task of moving the adoption of the report, especially as the balance-sheet testified to the thorough economy and efficiency with which the ladies of the Committee managed the hospital."

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