

### The Hard Case of the Convalescent Consumptive.

The other day an old patient called to see me. He had been admitted to the Royal National Sanatorium some twelve months ago, and after a four months' stay had been discharged with the disease in his lungs almost arrested.

He had been obliged to leave the institution because he had a family of seven children, one a cripple, dependent upon him, and he could not afford to live longer in idleness now that he was capable of a little light work. Before he came to the Sanatorium he had been caretaker of some schools, and, of course, the Managers had been obliged to employ another man, whom they did not feel justified in dismissing in order that they might re-engage a semi-invalid. When the poor man came to see me he had failed totally in obtaining work, and privation and hunger were telling sadly upon him; in short, one felt that unless something could be done, the disease would reassert itself, and his last state would be far worse than the first, in that the cup of hope had been held to his lips and then roughly withdrawn.

This is no fancy picture and no isolated instance.

How often one hears comments upon the supposed "sadness" of life in a sanatorium, but, speaking from experience, I can confidently affirm that this is quite a wrong impression. The sad part come after the patients leave us, when one hears, alas! how often the benefit gained under treatment has been all undone by return to an unhealthy environment—too frequently the lot of the poor consumptive.

Just think for a moment in what a vicious circle circumstances compel such a man to live! He has spent every penny he can raise on Sanatorium treatment, and has no one to help him financially. He has been taught that a very liberal diet is necessary for his complete recovery. For this it is absolutely necessary that he earns good wages. He cannot undertake hard manual labour or work in a confined shop or office, and, from the employer's point of view, is not worth engaging, as he has not the physical strength for a fair day's work. This being so he cannot earn a fair day's wage, and this in its turn, means a poor lodging in a crowded neighbourhood and very insufficient food, in fact, and especially if he has a family, more or less starvation.

Want of food further unfits him even for the lightest employment, and semi-starvation prepares the way for disease in his luckless children, who have very probably been born with

little physical stamina and poor constitutions.

Eventually he drifts, a hopeless wreck, into the workhouse infirmary, and his children are left behind to dree the hapless weird of the Unfit.

Putting aside Christian or even humanitarian considerations we must, if only from a business standpoint, admit the folly and absurdity of such a state of things. Enormous sums of money are spent in building and equipping Sanatoria for the poor (who cannot afford to remain in them for more than a few weeks) and who are then cast abroad to shift as best they can: finally palatial infirmaries must be provided for the last sad act of the drama.

The money subscribed by the charitable is thus very largely wasted, and ratepayers are put to enormous expense whilst the patient has been tantalised by seeing recovery almost within his grasp and only withheld by want of means. Truly it has been said that only the rich can afford to suffer from consumption.

Is it not evident that some organisation is needed to take the case of these poor convalescents in hand? Much is being done for epileptics in the way of "colonies" where they can, under medical supervision, live and work on the land. A few months ago I had the pleasure of visiting one of these establishments, a princely gift from Mr. Lewis, of Manchester, and it made one sadly wonder if something of this kind could not be organised for the convalescents from the Sanatoria for the working classes, the details of such a scheme could soon be elaborated if only funds were forthcoming.

Some ladies here have been discussing the feasibility of a plan whereby even a few of the convalescents from this Institution may be helped to tide over the period of difficulty, one suggestion is to inaugurate a registry of those wishing for work whilst another scheme is to take some cottages in the country near, and establish a poultry and bee farm, but nothing can really be done without funds to place such a venture on a sound footing.

The Press has lately been full of attempts to persuade the M.A.B. to open some of its empty hospitals for tubercular patients, but instead of herding them together in buildings it would be far more beneficial to help them towards earning their own living, and so to become once more useful members of society instead of a drag and a menace to the community at large.

The lot of the convalescent consumptive is very tragic. The problem of providing him with suitable and healthy employment is a pressing one.

HELEN TODD.

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