

gangrenous patches were separating at the edges, leaving clean granulating surfaces underneath. No oedema was present. Slight movement of the foot was noticed.

At this stage Miss A. D. showed evidence of slight left ulnar nerve injury with some medium involvement, only fingers affected; the hand was splinted in dorsiflexion. At the time of writing, thirteen days after admission, this is already showing signs of clearing up, and the general condition of both patients is excellent. Stringent precautions have been taken all along, no visitors having been allowed until the eleventh day and the cradle lamps still being in use. Both are eating and sleeping normally, and there has been no change in their mental condition. They have not talked much of their experiences, nor have they as yet been questioned.

#### Commentary.

These two cases raise several points of both general and medical importance. I have suggested to the municipal authorities that it would be of great advantage if some form of sound detector could be employed on the site of a disaster as early as possible. Both patients state that whereas they could hear everything going on above them—and Miss F. B. says that her father was alive for two days and Miss A. D. that the child lived for nearly three days—their voices were not heard until sufficient debris had been removed nearly four days afterwards. The reason for and advantages of a sound detector are therefore obvious. I suggest also that rescue work should be carried out on the assumption that people are alive though buried, and that work should be done in relays without ceasing. All ambulances should normally carry hot-water bottles (I used three of my own on this occasion) and six feet of rubber tubing with feeding cup.

The important medical points that occur to one, bearing in mind the positions in which the patients were found and the length of immobility, are: (1) The severe limitation of oxygen supply, and the lack of fluid intake, both acting together, failed to produce the obvious mental and physical reactions. (2) The extraordinarily good condition of the skin and the warmth of the extremities. (3) The absence of irritation conjunctivitis. (4) The clearness of the air passages and the absence of gritty lungs. (5) The comparatively mild nerve pressure paralysis.

I believe a doctor working in conjunction with the rescue squad is the ideal arrangement when there is any chance of rescuing people alive, and would stress the importance of some form of sound detector, and my belief that the dangerous period after prolonged burying is that between the moment when exposure takes place and the patient's arrival in hospital. Thus treatment on the lines already indicated should be instituted during the actual rescue. Lastly, I would support Professor H. A. Harris on his criticism of over-treatment. Briefly put, the treatment of "crush cases" should provide a maximum of rest, both physical and mental; a maximum of warmth, both external and internal; and a minimum of interference.

O grant us this—  
 In all our work,  
 Lord of Thy best,  
 High thought in true word drest,  
 To cheer, to lift,  
 To comfort the depressed,  
 To lighten darkness,  
 To bring rest  
 To souls distressed.  
 In all our work, O manifest  
 Thy will!  
 So shall our work be blest!

## OVALTINE.

### A UNIQUE FOOD BEVERAGE.

Nurses greatly value and rely upon Ovaltine as a nourishing beverage, both for themselves and their patients.

When a patient's digestion and powers of assimilation are affected such a food will result in a definite improvement in the nervous condition.

The manufacture of Ovaltine is carried out by exclusive scientific processes in such a way that all the important dietetic qualities are fully conserved.

The Ovaltine Research Laboratories, which have just issued their Annual Report for 1941, were originally established to control the manufacture of Ovaltine and certain pharmaceutical products, and were subsequently established to undertake general research work in nutrition.

Attempts to make good deficiencies in the national diet by addition of vitamin B<sub>1</sub> to flour, and the importance attached to other foods providing this vitamin has led to a search for rapid and accurate methods of establishing it.

The limited supplies of orange juice now available, and shortage of synthetic vitamin C, led to searches for sources of this vitamin in home-grown materials. Experiments have been carried out on vegetables, germinating grains and rose hips, of which the last gave the most promising results.

The material necessity for economising shipping space has led to attempts to use home grown potatoes in place of imported grains in cattle and poultry rations. At the request of the Ministry of Agriculture, experiments were conducted to test the effect of feeding cows and hens on dried potato slices prepared in the sugar beet factories. Analysis made at intervals on the milk showed that the feeding of the potatoes had not affected the milk constituents.

These results indicate the possibility of using potatoes not required for human consumption to replace a considerable proportion of the cereal products usually eaten during the winter by dairy cattle.

Messrs. A. Wander, Ltd., acknowledge assistance given them by many workers in academic and industrial laboratories and for their advice and collaboration in carrying out these experiments.

### DILEMMA.

The young lady wanting to live a useful life apprenticed herself to a leading hospital with the ultimate purpose of becoming a nurse. Probationary days behind her, she was given a tour of night duty on the men's public ward.

On her first night, about Lights Out time, she received numerous requests for glasses of water, which she duly carried around and placed on the bedside tables of her patients.

Later, with the whole ward a-snore, and wanting something to do to keep her awake, our heroine decided to tiptoe around in the dark with a tray and collect the empties. One by one she picked up the glasses, trayed them and carried them back to her galley, or whatever the cubbyholes where nurses park dirty dishes, may be called. There in the glaring light of the wash-up room she discovered that every glass contained a set of dentures . . . and no identification of the bedside table from which each came.—"Montrealer," *Magazine Digest*.

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