

the lead. Up to January 31st of this year 325 trained nurses and 2,169 auxiliaries were enrolled in Wales for the National Hospital Service Reserve—a total of 2,494. The next best region is South West Metropolitan with a total of 1,387. The Hospital Service Reserve is a vital part of Civil Defence. Recruits, both men and women, are still wanted in all parts of the country.

In the last 10 or 15 years very great strides have been made in tackling the problem of pneumoconiosis, the worst disease of Wales's principal industry. I think the whole of South Wales is grateful for the remarkable work that has been done by many research workers, and especially the Research Unit at Llandough Hospital. I have decided to establish near to that Research Unit a centre for rehabilitation of miners suffering from pneumoconiosis. The problem must be tackled upon many fronts—research, prevention, detection, treatment, rehabilitation and re-employment.

### Design for Sanatoria.

THE NATIONAL ASSOCIATION FOR THE Prevention of Tuberculosis has pleasure in announcing the publication of "Design for Sanatoria," the Report of the N.A.P.T. Architectural Committee (Chairman, Dr. Geoffrey Todd) on the essential features of the sanatorium of the future. This clothbound volume contains 128 pages of text, 16 pages of illustrations and 4 pages of diagrams. Price 12s. 6d.

The present period of building restriction offers time to consider the ideal requirements of a sanatorium, and the report, which covers not only architecture but interior design, equipment and personnel, is therefore a valuable contribution to the study of those responsible for future planning.

Points of particular interest are the recommendations on the choice of sites, size of sanatoria, arrangements for lighting and heating, elimination of noise, recreational facilities and accommodation for nursing staff, which requires to be planned "more imaginatively than has been the custom in the past." A special section deals with the planning of sanatoria for tropical and sub-tropical conditions.

The report ends "One consideration which we should like to emphasise—for many months the sanatorium is the patient's home. . . . Bright colours, attractive paintwork, pleasant carpets and chair covers, all these mean a great deal to a sick person. . . . It is the pleasant duty of the planner of a sanatorium to contribute to the patient's welfare and thus to help him on the road to cure."

### Hull Experiment in Ward Heating

Among the numerous contributory causes of the present shortage of sanatoria for the treatment of tuberculosis, lack of nursing staff and suitable accommodation are probably those causing most concern.

One way in which the Kingston-upon-Hull Group Hospital Committee is attempting to overcome this problem is to close down some of the fever isolation wards and re-equip them for the treatment of tuberculosis, and it was felt by the Committee that one of the main difficulties, namely the labour problem, would be very much eased if a system of heating could be installed which would reduce the drudgery of cleaning and maintenance, the stoking of boilers, etc.

By way of an experiment, the Committee therefore invited the North Eastern Gas Board to submit a plan for conversion from solid fuel to gas firing of the Hospital Ward and Kitchen. The need for economy in installation costs, maintenance and running costs, was stressed, as was the importance of speed and the necessity of avoiding interference with the building fabric.

The kitchen caused no difficulty. The existing hot water installation was converted to gas firing with clock and thermostat control. The gas ovens, hot cupboard and steriliser

installed were standard equipment taken from stock. The ward heating, however, presented a more difficult problem.

The first pre-requisite in the treatment of tuberculosis, namely ample fresh air, means of course that windows and doors are normally kept open, and therefore, there are rapid changes of air and a tendency towards draughts, particularly on cold and windy days. In this particular ward at Castle Hill the windows and doors were very large and the air changes were estimated at five per hour, with the possibility of this figure being doubled during the winter. Bearing in mind the conditions, it was considered that the only form of heating which would provide a satisfactory solution would be by means of the luminous type of over-head radiant heater panels. These, moreover, could be easily and quickly installed at minimum expense and trouble. The heaters were suspended from the walls and spaced in between windows corresponding to the spacing of cots so that each heater would radiate unobstructed heat outwards and downwards on to the cots. The distance between heater and cot was finely adjusted to obviate over-heating of the patient and yet provide comfortable warmth even under the exacting conditions prevailing. The heaters are noiseless and can be switched on or off instantly under individual grouped, or thermostat control.

This conversion at Castle Hill Hospital was put into operation in mid-December, and results so far have been so gratifying that the Hospital Authority is extending the new form of heating to other wards. The operating cost—in gas consumption—has been found to be less than when solid fuel was used. Any Hospital Committees or Managements who are interested in the experiment should get in touch with the Secretary, No. 5 Hospital Management Committee, Hull (B) Group, Castle Hill, Cottingham, E. Yorks., or the Industrial Gas Engineer of the North Eastern Gas Board (Hull Group), Proctor Street, Hull.

### News from Australia.

THOUGH TIME has not yet proved its benefit in all cases, the whooping cough drug, Petan, seems to be one of the greatest blessings ever given to humanity by medical science, considers a druggist from Sydney.

It cannot effect an immediate cure, of course, he adds, but it cuts short really bad spasms. In some cases, instead of the whoop lasting, for weeks, the worst period is a matter of days. Much depends, I suppose, on the constitution of the child, but there are petan-treated cases in which the actual whoop has lasted only a week.

A baby in a Melbourne hospital developed a temperature of 109 degrees, but made a good recovery. At birth she weighed 8 lbs. Four days later she had lost 1½ lbs. and had a bowel infection, with pneumonia and complications. She was thought to be dying when taken to the Children's Hospital, but was treated with streptomycin and was able to go home in a fortnight.

By using a new type of infants' "iron lung" invented in Tasmania by Dr. McIntyre and Mr. Ian Wentworth, of Hobart, and made in Australia, Sydney's Crown Street Women's Hospital hopes to save many premature babies whose lungs have not expanded sufficiently to keep them alive.

### A TRUE STORY

AN EXCITED LITTLE BOY, greeting his Auntie, said: "I'm going to have a new baby sister!"

Auntie, being a bit cautious, said: "But Richard, supposing it's a little brother?"

Not the least daunted, the child replied: "Well, then, Daddy will have to take it into the garage, and make it into a little sister."

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