

**HYGIENE**— An old word with a new value.

**O**F LATE years, particularly since the war, a word has begun to appear more and more frequently in our conversation, in our newspapers and in our magazines. It is the word "hygiene." It is not a new word. For many years carefully preserved in our dictionaries it has lain awaiting the general service of man. In ancient times it was used by philosophers and in modern times scientific men, particularly doctors, have used it in conversing with one another and in writing for one another about the things of their profession, but that good fellow, the ordinary man, who pays most of the taxes and does most of the work has not hitherto found sufficient occasion for its use to make it worth while to put it on his active list.

The word "hygiene" is now at the door of the Temple of Science and Philosophy ready to be of use to the men and women who pass on the busy streets outside. It will be much used in the great human movement that has already begun, the movement for the promotion and preservation of the health of the babies, children, men and women of the nations of the earth. In future it will be heard more and more upon the public platform, will be read more and more in the public press and will be found more and more in men's thoughts. How did we get the word and what does it mean?

**THE ANCIENT GREEKS**

In ancient days when the human body and its functions were much more of a mystery than they are now, man looked to the supernatural for aid in fighting disease and in maintaining his physical vigour. The clever thinkers of Ancient Greece devised an elaborate system of gods and goddesses to look after human affairs. Each presided over what we might now regard as a deified government department and it is to a part of this system of Grecian mythological deities that we are indebted for our word "hygiene."



**HYGIEIA**—The goddess of Health of the Ancient Greeks. In drawings and sculpture she was generally represented as a woman in the prime of life, well-formed, and well possessed of the quality of physical fitness that she was supposed to grant and protect. The ancients attributed supernatural healing power to the snake (See page 2) and, accordingly, their health goddess was often represented holding and feeding one.

**AESCULAPIUS**

The great poet Homer in his writings mentions a personage named Aesculapius. Sometimes he seems to be regarded by Homer as a deity and at others as a very clever man highly skilled in the practice of medicine. The Greek of later but still very ancient times elevated Aesculapius to the position of unchallenged deity as the god of the healing art and built temples where he could be worshipped and his aid invoked. Like all other gods of Ancient Greece, Aesculapius, though so greatly elevated above humanity still retained human attributes. He had a daughter, a goddess known as Hygieia.

**HYGIEIA**

Hygieia was worshipped all over ancient Greece as the goddess of health. The ancient writings make it appear that while she was originally looked upon as the deity granting and protecting physical or bodily health, her sphere in later times was regarded as of wider scope and she was looked upon as the giver and protector of mental health as well. In statues and sacred writings she is represented as a calm, kindly and beneficent personage and endowed with a degree of personal beauty that only good health can confer.

**THE WANDERINGS OF A WORD**

From the habit of invoking her aid in the preservation of health the name of Hygieia came to be used in all matters connected with the means of maintaining health. It was adopted in that significance by the ancient Romans and transferred by them to the Gauls or French who changed it to "hygiene." Thence it was adopted by the English and the English speaking world.

**HYGIENE AND HEALTH**

We now speak of "personal hygiene," home "hygiene," "mental hygiene," "community hygiene,"

*Continued on page 2*

and hygiene with other similar qualifications. In whatever connection it be used, the word implies conditions, control or habits tending to promote a condition of health, for we use the old Anglo-Saxon word "helth" or "health" in its modern form to apply to that condition of the body in which it performs all its functions without pain or disease.

#### PHYSICAL AND MENTAL IDEALS

The ancient Greeks, in spite of their lack of knowledge of cause and effect in matters concerning the human body, had high

ideals of physical and mental health and vigour and of physical beauty. Though they lacked the knowledge of science that we possess they were quicker at applying the lessons of experience to wholesome living, to "hygiene," and history supports the idea that the results they achieved in physical and mental ability were unsurpassed. With modern knowledge and added centuries of experience, we should achieve results better than theirs but that can only be done by the faithful and intelligent practice of personal hygiene in each and all of our daily lives.—F. D.

## PERSONAL HYGIENE

### WHAT IT IS AND SOME OF ITS SIMPLE RULES

**P**ERSONAL hygiene is the personal application of the simple rules of health to daily life in order to prevent disease and maintain the bodily and mental energy at a high standard.

Before one can apply health knowledge to daily life, the principles of health must be known. They must be true principles, tried and tested by human experience. They must not be fads or fancies, which often have no other foundation than ignorance, superstition, or incomplete knowledge.

Personal hygiene is not a new thing because a new name has been found for it. There is an old set of health rules, perhaps they are centuries old, that once were frequently quoted. They are:—

Keep the head cool,  
the feet warm,  
the mind easy,  
the bodily functions regular.

Excellent rules they are too, and they served a useful purpose for our forefathers, who lived more in the open and were not often crowded in such numbers in large cities. But to-day, they need to be extended to meet the needs of the more complex and more highly specialized lives that we lead.

#### SOME GOOD RULES

Here is an excellent set of rules modified slightly from those in a book called "How to live":—

##### (a) Air—

- (1) Ventilate every room you occupy.
- (2) Wear light, loose and porous clothes.
- (3) Seek out-door recreations and a healthful occupation.
- (4) Sleep out if you can, or in a well-ventilated room.

##### (b) Food—

- (5) Avoid overeating and overweight.
- (6) Eat sparingly of meats and eggs.
- (7) Eat some fruit or green vegetables daily.
- (8) Eat slowly.

##### (c) Poisons—

- (9) Evacuate thoroughly, regularly and frequently.
- (10) Stand, sit and walk erect.

(11) Do not allow poisons and infections to enter the body.

(12) Keep the teeth, gums and tongue clean.

(13) Use sufficient water internally and externally.

(d) Activity—

(14) Work, play, rest and sleep in moderation.

(15) Be calm. Do not allow yourself to be overcome by anger.

One of the maxims of personal hygiene is that "all the ills that flesh is heir to" may be greatly lessened by early discovery and treatment. Accordingly many people have adopted the idea of consulting their family physician regularly and acquainting him with what may seem to be warning signs of approaching ills, and getting from him advice as to how to keep well.

## SERPENT-LORE AND MYTHOLOGY

The following notes from the Encyclopaedia Britannica upon the ancient beliefs with regard to the serpent are of historic interest and enable us better to understand why it was so often associated by them with questions of health and healing:

Serpents were supposed to know of a root which brought back their dead to life, and an old Greek story told how certain mortals took the hint.

In one form or another, the healing powers of the serpent are very familiar in legend and custom.

Siegfried bathed in the blood of the dragon he slew and thus became invulnerable. The blind emperor Theodosius recovered his sight when a grateful serpent laid a precious stone upon his eyes.

Cadmus and his wife were turned into serpents to cure human ills. "In 1899 a court in Larnaca, Cyprus, awarded £80 (Turkish) as damages for the loss of a snake's horn which had been lent to cure a certain disease" (Murison, p. 117, n. 9).

Not to multiply examples, it must suffice to refer to the old popular idea that medical

skill could be gained by eating some part of a serpent: the idea that its valuable qualities would thus be assimilated belongs to one of the fundamental dogmas of primitive mankind (cf. Porphyry, De abst. ii. 48).

Serpents were tended in the sanctuaries of the Greek Aesculapius (Asklepios) the famous god of healing. Among his symbols was a serpent coiled round a staff, and physicians were for long wont to place this at the head of their prescriptions. He is also represented leaning on a staff while a huge serpent rears itself up behind him, or (on a coin from Gythium) a serpent seems to come to him from a well.

Hygieia, goddess of health, is commonly identified with the woman in Greek art who feeds a serpent out of a saucer.

Serpent-lore worked on the imagination. So also did the Greek Mythology and in that way the conception of Hygieia very likely helped them in their striving for health.

The Ancients, even the Ancient Greeks who were then more intelligent than other nations, feared disease. To them it was a curse laid upon man by supernatural power and it took many forms.

Hygieia was a myth and the fear which inspired the ancients to invent her has lasted in nearly all races almost to the present day.

But serpent-lore and mythology have given place to something better—to knowledge.

The patient researches of Pasteur gave to the world scientific knowledge such as the race never before possessed. It is a knowledge of the causes of diseases and how they are spread. That knowledge gives the power of preventing them and no man ever enriched man's hope of happier earthly life more than Pasteur when—after he had proved it possible—he said:

"It is within the power of man to banish all infectious disease from the world."

Red Deer, Alta.—The result of the recent campaign for membership and funds resulted in contribution to the amount of \$402.00. Many members were added to the lists.—Red Deer News.

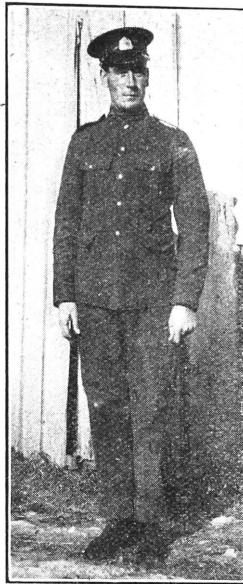
## SPRING KILLING

The most effective fly killing is done at the present time of the year. Killing ore late-winter or spring fly does more good than the slaughter of millions of summer flies.

Those crafty representatives of the breed which loaf about the warm spots of the house all winter are the potential progenitors of billions.

Then, too, they are more torpid, more deliberate in their movements, slower in their reactions than the busy, buzzing flies of summer weather. They are easier caught.

Chasing them may not be so exciting but it is infinitely more effective.



*These are photos of men of the Royal Canadian Mounted Police. Note how their excellent posture makes them seem to radiate health and energy.*

## GOOD POSTURE AIDS HEALTH

**I**N ANY consideration of health it is important to recognise that the way the body is used determines to a very considerable extent the general health of the individual.

To use the body rightly should be the aim of all. It looks better to see a man or woman standing up straight, rather than slouched or drooped. It feels better; the person is more snappy—has more pep. The endurance is greater; there is stuff left in the individual even after a hard game or a stiff piece of work.

If the body is used rightly the head is held up, with the chin drawn in, and the blood flows to and from the brain easily. In this position the wits are most keen, the reactions are quick; it is the position of alertness.

In the erect position the chest is held up, the breathing is carried on easily, and the circulation at its best. A person so standing has much better color than when the body is drooped.

In this erect position the ribs are drawn up so that the diaphragm is raised, the abdominal wall is drawn in, and the abdominal organs must be held in reasonable position. The stomach must work better, the liver must work better, the bowels must work better, all of the other organs must work better than if they are sagged, as they must be when the body is drooped.

The same thing is true of the feet and back. The chief cause of many of the cases of weak or flat feet or of weak or tired backs is the wrong use of the body. Learn to stand up straight with the proper balance of the body and most of this trouble will disappear.

### A POSTURE HABIT

Practise many times a day drawing yourself up to your full height. Feel tall. Draw

in the chin, pull up the chest, draw in the waist so as to flatten the back, and feel the weight chiefly upon the front part of the feet. Make a practice of this with your families; it will help you, but it will be of the greatest benefit to your children. Have the whole family stand for one minute in this position before breakfast or after breakfast, or before supper or after supper, or any other time in the day, and it will surprise you to see how quickly such a posture becomes a habit.

In walking try to maintain the same position; swing along with the body held tall as if you owned the town, not as if you were ashamed of your town or of yourselves.

In sitting, keep the trunk of the body in the same position as when standing. Do not bend at the waist line; do the bending at the hips. Lean backward or forward as much as you choose, but do not buckle in the middle.

In lying down, lie flat; get rid of most of the pillows. Lie upon the back, or face or side, as best suits you, but do not curl up and buckle in the middle. Give your organs a chance to work properly, especially at the time of rest. Sleep will be quieter and you will wake in the morning rested, with snap and pep enough to tackle the tasks of the day and make hard jobs seem easy.

### THE BEST WAY TO USE THE BODY.

Never forget that the best way to use the body for all purposes is as if it were stretched up as tall as possible, with the head erect, chest drawn up, and with the waist or abdomen drawn in. Whether old or young, this should be learned, but since it is much easier to teach the child than the grown-ups, see that your children get this until you are proud of their good carriage. Their improvement will stimulate you to greater

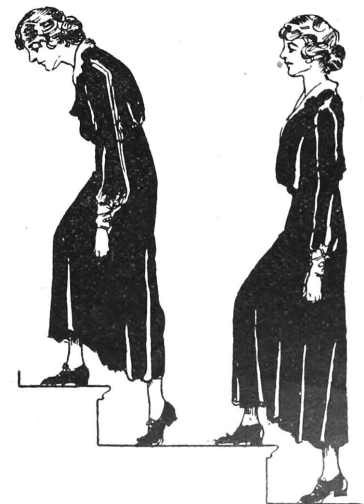
effort until this carriage becomes a habit, and once it has become instinctive to stand well poised, it will be hard to lose it. A strong, well-poised individual is better stock to be responsible for the next generation than the usual drooped type so commonly seen today. Stand up, sit up, stand tall, sit tall, throw a big chest, make your waist or abdomen flat, stand or walk forward on the feet. Be strong and healthy and get the spring and joy out of life which is hard to find when the body is weak and drooped.

—From a Radio Broadcast.

### A BUSINESS ENGAGEMENT

The Judge—"Five years' imprisonment."

The Prisoner—(to friend in the gallery) —"Go in an' tell the missus I shan't be 'ome to supper, Bill."



Incorrect

Correct

## THE CAUSE OF BALDNESS

Loss of Hair by Men is Frequent; by Women, Infrequent. Tight Hats, Which Cut Off the Blood Supply, Alleged to be the Cause. Stefansson's Experience.

**B**ALDNESS in men is a subject that has often been discussed by experts but seldom have we had the opportunity of noting a more illuminating article than one that appeared some time ago in Pearson's Magazine under the pen of Dr. R. Reynolds. The title was, "Why Men Are Bald," and among other things Dr. Reynolds said:

"Most men become more or less bald. Women's hair meets with vicissitudes; it gets dry and brittle and even becomes thin, but most women do not become bald as men do, on top of the head.

"What is the reason? If the average man who is losing his hair be asked how he accounts for it he is likely to say that with him it is hereditary. If he be asked if he inherited his baldness from his father or his mother he will say: "Why, from my father, of course?" If he then be asked if any of his sisters inherited baldness from their father he will say "No," and he begins to lose faith in his theory of baldness.

"What is the difference in the habits of life, with reference to the hair, between men and women? Men cut their hair short and women do not. Men wear hats that grip the head and women do not. Those two items constitute the whole difference in habit between the sexes with reference to the hair.

"There is no evidence that cutting of hair in any way impairs the roots of the hair. On the contrary, there is a popular impression that cutting the hair increases its growth. If it does, in the nature of things it must be a very limited aid to growth. On the other hand, if constant cutting of the hair has a tendency to make the hair on the top of the head fall out, why does it not have the same effect upon the hair on the lower part of the head, the neck, and the beard? The only inference is that cutting the hair has no effect in producing baldness.

### THE CAUSE

"The hats that men wear, then, are the cause of their baldness above the hat line. Women also wear hats, but their hats are fastened to their hair and do not grip the head as men's hats do. All other causes of baldness, such as infections, seborrhea, etc., affect both sexes alike and are, in fact, more difficult to treat locally in women than in men because of their long hair.

"How does the hat affect the growth of hair in man? By compressing the arteries, the veins, the lymphatics, and to some extent the nerves that supply and nourish the

hair. It is not because the hat is hard or soft or that it keeps the head too hot. It is because the hat band compresses the vessels and starves the roots of the hair. Caps may do



*The black squares on the bald head of the man in the picture show the situation of the vessels which carry nourishment to the roots of the hair. Dr. Reynolds blames tight-fitting hats, which interfere with this nourishment, for most cases of baldness of men.*

the same thing, but caps as a rule do not grip the head so tightly as hats do.

### COMPRESSION OF BLOOD VESSELS

"The main vessels carrying nourishment to the roots of the hair on top of the head and carrying waste matter away are in front of the ears on the under side of the skin, and are easily compressed between the skin and the bony structure of the skull. Two other groups of vessels are in the forehead on either side of the median line. They supply the hair above the forehead. Two other groups supply the back part of the head on either side of the median line.

"Baldness usually begins at the summit of the crown toward the back part, at the distant and weakest part of the vessels furnishing the circulation. In such cases the pressure has been on the vessels on the side of the head. Sometimes the baldness begins above the forehead and is the high forehead type of baldness. In these cases the pressure has been upon the vessels in the

forehead. Sometimes the head is bald low down in the neck where the pressure has been upon the vessels in this region. When the head is completely bald on top the pressure has been on the entire blood supply of the scalp.

The writer of the article discusses the question of why it is that some men become bald and others do not. He considers that while there may be other reasons for loss of the hair the pressure of tight hats over the blood vessels which supply the scalp is the chief reason. Therefore the reason some men become bald and others do not is due to the shape of the head which admits of pressure at the blood supply point. The reason baldness seems to be hereditary is not because of the transmission of some weakness which gives rise to baldness, but because the shape of the head is likely to be transmitted from parents to their offspring. That apparently is the only part which heredity plays in baldness.

The writer goes on to remark that hatless Indians are not bald nor are other savage races. The hat-wearing American Negro man becomes bald quite frequently, but the Negro woman scarcely ever.

The kind of hat that is worn and the length of time daily that it is worn and the general health of the individual also affect the health of the scalp.

The writer recommends the disuse of hats on all days when the weather is suitable. He makes some very pertinent remarks upon this subject. Among them are:

"Small boys do not want to wear hats and put them aside at every opportunity and do not seem to need them except in the severest weather.

"The city man wears a hat only to comply with custom.

"In most outdoor pursuits the hat is not required and is frequently in the way.

"Many golfers discard their hats during the game even in the broiling heat of mid-summer, but when they get into an omnibus, a train or a motor car to go to their offices they put on hats."

### STEFANSSON'S EXPERIENCE

The foregoing remarks are corroborated by the noted explorer Vilhjalmur Stefansson in a recently published article of his entitled "The Friendly Arctic." He says:

### BETTER HAIR AND BETTER TEETH

"It is not unreasonable to suppose that the falling out of hair may have something to do with the condition of general health. I can say from my own experience that my general health appears to be much better when I am in the north than it is in civilization, and that the condition of the hair corresponds.

"My hair commenced falling out when I was in college and continued until it had become noticeably thinner up to the point of my first going north when I was twenty-seven. Four or five months after I commenced the journey I noticed that my hair had ceased falling out and it did not begin again until four or five months after I re-

turned to New York in 1907. In 1908, I left New York in May, reaching the Arctic in late June, and I think it was in September or October that I noticed my hair had stopped falling. It did not fall from that time until about Christmas in 1912, three months after I got back to civilization but five or six months after I had begun to eat the ordinary mixed civilized diet and live in general in the ordinary civilized way.

"On the present expedition my hair stopped falling out some time during the winter of 1913-14 and did not begin again until I was convalescent from typhoid at Herschel island in the winter of 1917-18. So far as I can judge, I have a better head of hair now, fifteen years after, than I had when I first went north in 1906.

"It seems not unlikely that the interfer-

ence with circulation caused by a tight hatband, as is generally believed in civilization, has something to do with the falling out of the hair. In the north I never wear a hat and I cease wearing one as soon as I reach any place where going bareheaded does not expose one to annoying attention or comment. Even in the coldest weather of winter I frequently throw back the hood of my coat, wearing it so that it corresponds to a collar rather than a cap, and on very mild days I go entirely bareheaded, finding that the hair is sufficient protection for everything but the ears.

"I never wear a cap of any sort underneath the Eskimo-style hood, although that is the custom in the semi-civilized portions of Alaska, such as the vicinity of Nome, where white men have universally adopted modified Eskimo clothing.

## HEART DISEASE

Usually Has Its Beginning During the Course of Some Other Illness. Care in the Latter Helps to Prevent the Former

IN ORDER that knowledge may be directed towards prevention of bodily discomfort, disease, or inefficiency, everybody should know the following facts concerning heart disease.

Heart disease usually has its beginning during the course of some disease such as rheumatic fever, chorea, tonsillitis, syphilis, gonorrhoea, scarlet fever, and less frequently pneumonia. Local infections due to diseased tonsils and teeth are responsible for a certain number of cases of heart disease while excessive muscular strain as over-indulgence in athletics has at times proved a determining factor. It may also be caused by the persistent use of alcoholic liquors, or it may be a part of a general disease known as "arteriosclerosis", in which there is a hardening and loss of elasticity of the walls of the arteries, including the arteries supplying the heart muscle.

### MANY CASES BEGIN IN EARLY LIFE

As four of the diseases mentioned above—rheumatic fever, chorea, tonsillitis, and scarlet fever—are particularly diseases of children and young adults, it follows that many cases of heart disease have their beginning early in life. This is borne out by the estimate that from one and one-half to two per cent of the children examined in the schools show existing heart defects. Heart disease often becomes well established during the course of some illness without causing symptoms which lead to suspicion of beginning damage to the heart. This is too often the case in children, and is probably more likely to pass unnoticed as a complication of tonsillitis than in any other disease of childhood. Each attack of tonsillitis should be regarded as possibly the starting point of heart damage.

### CARE DURING RECOVERY FROM ILLNESS

It is important that there should be proper care and treatment of the ailments that are likely to cause heart disease; and

persons recovering from them should be very cautious in regard to beginning strenuous exercise. It is best to remain quiet until all danger of damage to the heart is passed. Persons leading lives in which they sit a great deal, should not, without preliminary training, change to an occupation which requires sustained muscular effort. If they do so damage may easily be done the heart muscle.

A most important factor is to discover the trouble early. Physical examination of children would result in the early detection of many cases of organic disease of the heart that might otherwise go undiscovered until some extra strain or acute illness proved too great a burden for the damaged heart. Such examination would also uncover sources of infection requiring treatment, such as diseased tonsils and abscesses at the roots of the teeth.

Distinguishable from heart disease, as discussed above in which there is disease of the heart's structure, there are certain disorders of the heart's action spoken of as functional disorders. These disorders, among which palpitation is the most common, are usually not serious. Digestive disturbances are sometimes accompanied by palpitation and pain near the heart, and such symptoms are frequently mistaken for serious heart disease.

Once diagnosed, care as to general hygiene, choice of work, selection of diet, avoidance of infection and proper treatment of existing defects or diseases will do much toward strengthening the damaged heart and enabling it to perform its functions for many years.

Prevent great ills by removal of the smaller ones.

Clean hair-brushes are necessary if you want to keep your hair in good condition; but frequent washing makes the bristles soft unless, each time after washing, you lay the bristles for a minute in a strong solution of alum.

## FIRST STEPS IN PHYSICAL CULTURE

IN ONE'S investigations into the attitude of the general public in regard to physical culture, there will be found a number of people who are obsessed with the idea that it consists of nothing but hard training. They will give vent to such expressions as:

"Physical Culture, Oh yes, that will soon make you muscle bound." Or again, "I have no time for such things, as my work keeps me busy, or, worse still, "I have all the exercise I require in my work."

A few months ago the writer had a very refreshing conversation with a wealthy business man who is well past the prime of life, on the joy of walking exercise. Though he owns a very excellent car, the mile that intervenes between his home and his office he takes much pleasure in traversing on foot. This man is well acquainted with values of various kinds and fortunately his knowledge includes that of the value of health.

The easiest way to start on the new life of physical culture is to make a small beginning. The best means of introducing the new life is, I think, by means of additional exercise produced by walking. For instance, instead of giving away to that dozing feeling produced by the evening meal and the warm room, get up from the table and go for a mile walk. The fresh air and exercise resulting from such a course will alter to a great extent the trend of thought for the remainder of the evening. Let this course be continued for a time and the average person will acquire a desire for further health improvement, that is, if it is also borne in mind that the will to succeed is necessary to attain the best results.

If the walking is done for the purpose intended and the mind is kept on the subject of health improvement, the carriage will respond and the step become more elastic, instead of the shuffling gait that is often employed as a means of getting along. The upright carriage will encourage a deeper mode of breathing and its attendant benefits.—Allan Campbell, Brandon, Manitoba.

### HE WHO LAUGHS LAST LAUGHS BEST

The following conversation was heard in the Chemical Laboratory of a modern factory:

Modarelli—"I have a sore throat."  
Buckskin Pete—"What are you going to do for it?"

Modarelli—"I guess I will goggle it."  
Buckskin Pete—"Haw, Haw, Haw."  
Modarelli—"Well, what is the right word?"

Buckskin Pete—"Why, Gurgle."  
Rest of Laboratory Crew—"Haw, Haw, Haw," and a couple of Hees.

Modarelli—"What's the matter?"  
Eddie Lewis—"Why, the right word is gargle."

Modarelli—"Haw, Haw, Haw, Haw, Haw."

Exit—Buckskin Pete.—Youngstown Street and Tube Bulletin.

## SAFETY FROM FIRE

### A Study of the Fire Chief's Report of the Causes of Conflagrations Sheds Light Upon Some Duties of Every Citizen to His Community.

THOSE living in towns and cities who are interested in principles of safety, would do well to study the annual reports of their respective fire departments, which almost invariably classify the causes of the fires that have occurred during the year. We have just noted the report of the Toronto Fire Department for the year 1922 and the classification of causes of alarms is as follows:

|  |     |
|--|-----|
| Incendiary . . . . .                     | 13  |
| Spontaneous . . . . .                    | 68  |
| Street Cars . . . . .                    | 31  |
| Automobiles . . . . .                    | 159 |
| Gasoline . . . . .                       | 28  |
| Children and Matches . . . . .           | 140 |
| Lightning . . . . .                      | 4   |
| Dumps or Grass . . . . .                 | 137 |
| Sparks . . . . .                         | 95  |
| Chimneys . . . . .                       | 59  |
| Gas and Curtains . . . . .               | 28  |
| Cigars and Cigarettes . . . . .          | 80  |
| Electric Appliances and Motors . . . . . | 70  |
| Hot Ashes . . . . .                      | 18  |
| Mice and Matches . . . . .               | 3   |
| Overboiling Tar . . . . .                | 18  |
| Wax and Varnish . . . . .                | 26  |
| Stoves and Furnaces . . . . .            | 176 |
| Rubbish . . . . .                        | 116 |
| Exploding Lamp . . . . .                 | 4   |

If we examine this list we may easily pick out items in which one might justly conclude that, had more care been exercised, there need have been no fire.

Take, for instance, chimneys. The conditions of chimneys should be examined from time to time to see that they are not too heavily coated with soot.

Curtains should not be hung too near the

flame of an open gas jet or if in a position where an open window might cause a draft that would blow the curtain upon the gas jet, some care should be taken to prevent this.

Of cigars and cigarettes, little need be said. The danger of dropping live ashes upon dry material, in waste paper baskets, or wherever a fire is likely to be caused is so obvious that carelessness is almost criminal.

In the case of electric wiring, each person for his own sake should be willing to exercise the same care in regard to safety as is required by insurance companies.

With regard to boiling of inflammable materials, we may say that this should be undertaken only with a certain amount of expert knowledge, and with due preparations for all eventualities. In this connection, we remember some humorous directions which were given in a book, which gave a recipe for making varnish for violins. It advised that the unskilled person who undertook it should first of all insure his life and his house, then send his wife and family for a holiday in the country and then notify the local fire brigade beforehand of what he was about to do.

It is a fact that there are certain trade processes of this nature which should not be performed in a home without the best of knowledge and the strictest of precautions.

These are a few simple observations which have occurred to us upon a casual examination of this list. Our readers, no doubt, will make many more significant deductions.—F. D.

## PNEUMONIA

### A Disease of Winter and Early Spring May Be Prevented by Attention to The General Rules of Health. Some Facts About This Malady Which Everyone Should Know.

THE disease known as pneumonia is most prevalent in Canada during the months of January, February, and March. It is a very serious disease and if it does not cause the death of its victim it nearly always subjects him to a long period of weakness and discomfort.

Pneumonia is a germ disease and, therefore to a large extent, preventable.

Dr. Ernest G. Stillman, of the Rockefeller Institute, says the following, with regard to the prevention of this disease:

Various bacteria may incite pneumonia but the commonest one is the pneumococcus. This is a small lancet-shaped organism which can only be seen under the highest power of the microscope. This organism is widely distributed, being frequently present even in the mouths of healthy individuals, and since it survives for considerable

lengths of time in dust, great opportunities exist for its widespread distribution, especially when people live in close association.

Furthermore, it has long been known that the best way to render bacteria virulent for any one species of animal is repeatedly to pass the germ through such animals. Hence, if pneumococci (pneumonia germs) from patients suffering from pneumonia are taken into the respiratory tract of healthy individuals, these organisms are more likely to produce severe infections. For this reason also, more stress should be laid on preventing the spread of pneumococci (the disease germs) from patients with pneumonia.

#### PREVENTION

Each case of pneumonia should be regarded as a focus (centre) for the spread of

infection. Emphasis should be laid on early diagnosis and especially on proper isolation. In so far as possible the patient should be isolated from other persons. All washable articles of clothing and the linen should be collected in a separate bag and sterilized by boiling before being sent to the laundry. Clothes which can not be washed should be sterilized by steam whenever possible. If this can not be done they should be thoroughly aired in the sunlight. The dishes used by the patient should be boiled. Such articles as bed rubbers, ice caps, hot water bags, thermometers, should be soaked in 5 per cent. carbolic acid. The sputum should be gathered in covered paper sputum cups. If these are not available, the sputum should be disinfected with five per cent. carbolic in the container and the cup should be thoroughly boiled. Gauze used for handkerchiefs should be collected in paper bags and burned.

#### PRECAUTIONS

While attending a case of pneumonia the doctor and nurse should each wear a gauze mask and gown. Their hands should be thoroughly washed after leaving the bedside. Visitors should be provided with fresh gauze masks and gowns and warned not to come into too close contact with the patient. These precautions should be maintained during convalescence and until the patient is able to leave the hospital or his home. After discharge, the mattress, pillows and blankets should be sterilized. If this is not possible they should be given a thorough airing in the sun. All room utensils used in the care of the patient should be disinfected by boiling or with five per cent. carbolic, or 1-1000 bichloride solution. The room should finally be given a thorough cleaning.

#### COUGHING AND SNEEZING

So long as healthy carriers (of pneumonia germs) are known to exist, the public should be educated in an attempt to lessen the present universal traffic in saliva. As saliva is not particularly abhorrent, there is not the same disgust towards it as there is to other human excreta. Who has not seen the apple peddler spit on his apples before polishing them, or the street car conductor wet his fingers before issuing transfers? In fact, as Chapin remarks, if saliva were of a indigo color our whole surroundings would be stained blue. As the pneumococci (pneumonia germs) gain entrance by the mouth or nose, the public should be cautioned against coughing, sneezing, or expectorating promiscuously at public gatherings or in public conveyances.

There is evidence that the mere presence of virulent pneumococci in the upper respiratory tract is not sufficient to incite the disease. Other factors must be operative at the same time, and there is no conclusive proof that even the presence of virulent pneumococci in the lung itself is necessarily followed by the lesions and symptoms of the disease.

#### GENERAL CARE OF THE HEALTH A PREVENTIVE

So our efforts at prevention should not be limited to curtailing the spread of the germs. Attention must be paid to the general rules of hygiene so as to keep the bodily resistance at its highest pitch. Ex-

cessive fatigue, loss of sleep, prolonged exposure or sudden chilling should be avoided. Working in dusty factories or living in ill-ventilated rooms should be discouraged. Acute lobar pneumonia prevails to the greatest extent in cold stormy weather.

#### A COLD—A PROBABLE CAUSE

Possibly one of the most important means of prevention of lobar pneumonia is to pay due respect to the so-called insignificant common cold. Careful histories of patients with lobar pneumonia show that about forty per cent. of the cases give a history of coryza (common cold) or other mild infection of the respiratory tract preceding the onset of pneumonia. So it seems quite possible that a mild, unrecognized infection may act as the inciting agent which, either directly or by lowering the general bodily resistance, allows the pneumococcus to invade the lungs.

The prevention of diseases in which the inciting micro-organism (germ of disease) enters the body by the way of the air passages is not to be secured by applying sanitary measures similar to those employed in the prevention of typhoid and malaria, namely, the regulation of the water supply or destruction of flies and mosquitoes. In the prevention of pneumonia the chief attention must be given to the rules of personal hygiene. These are the most difficult of all hygienic regulations to enforce. The infectious germs in pneumonia are contained within the secretions of the nose and mouth and are spread by the sprayed material which is coughed or otherwise thrown into the surroundings of patients.—*Health News.*

#### THE PROBLEMS OF LIFE

A little girl of six sat looking thoughtfully out of the window of her home the other day. Her mother questioned her as to the cause of her seriousness.

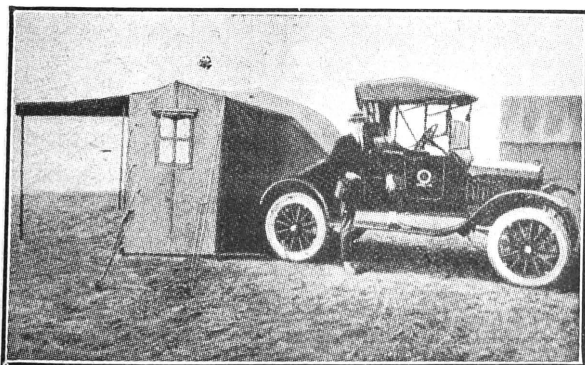
"Oh," she replied, "I was just thinking that when I grow up to be a big lady I'm goin' to get married and have three children."

Her mother, although very much surprised, was also amused.

"You will be very fortunate indeed," replied the fond parent.

The little miss grew silent and thoughtful again. Finally she said:

"But, of course, you can never tell, mother. I might marry a bachelor."



One of the Junior Red Cross dental cars which toured the Battlefords Inspectorate in Saskatchewan. The portable operating tent stands beside it.

## A Reputation—

for unvarying Quality is the  
Greatest Mark of Distinction.

# "SALADA"

## TEA

has given Matchless Quality for 31 years. H 345  
So Delicious! Just Try It.

## CHILDREN HELP THEMSELVES

Junior Red Cross Members in Saskatchewan Raised Funds Sufficient to Equip and Operate Travelling Dental Cars to Remedy Defective Teeth.

IN THE late Fall of 1921, the Saskatchewan Junior Red Cross inaugurated a dental service for children attending rural schools, or at points where there is no resident dentist, and for this purpose, purchased and equipped two motor cars, placed them in charge of fully qualified dentists and assigned one to the northern half of the Province and the other to the southern portion.

This action of the Saskatchewan Junior Red Cross was begun as a result of the facts disclosed by the reports of the School Hygiene staff of nurses employed by the Department of Education.

The examination of 15,000 children in 548 schools in 1919 showed that no less than 8,705, or 58 per cent. were handicapped by decaying teeth. In 1920 it was found that out of 33,821 children examined in 1,121 schools, 20,576, or a little over 60 per cent. had decaying teeth.

The nurses, in carrying out their duties, reported to the parents that their children required dental treatment. Owing to the generally prohibitive expense of taking

those children, frequently from isolated rural districts, to a point where the service of a dentist could be obtained, these children's teeth remained in a neglected condition, and threatened to undermine their general health and lead to disease. For example, of the 20,576 reported in 1921, fewer than 3,000 were reported as subsequently receiving treatment.

In carrying out its peace-time policy for "the promotion of health and prevention of disease," the Red Cross decided to inaugurate this dental service for children by means of motor cars which would go direct to the schools after the visit of a nurse.

In addition to providing dental treatment, tooth-brushes and tooth paste were supplied to children who needed them. At each school the children were given by the dentist a simple talk on Oral Mouth Hygiene and the proper way to use a tooth brush.

The following is a brief statistical record of the work accomplished during the first year of this service (1922) a service which has called forth strong commendation from school nurses, teachers, and school district officials, as well as from parents generally:

|   |            |
|---|------------|
| Number of motor cars employed   | 2          |
| Number of School Districts visited  | 284        |
| Mileage covered by cars   | 15,767     |
| Number of children treated  | 3,877      |
| Number operations performed, i.e. Fillings, Extractions, Cleaning teeth, etc.               | 7,438      |
| Tooth brushes and tooth paste distributed   | 1,200      |
| Revenue received from nominal fees charged (Fillings 50c.; Extractions 25c.; Cleaning 50c.) | \$1,690.00 |
| Free service given on basis same charges  | 1,305.50   |
| Addresses given on oral hygiene   | 284        |
| Pupils present at addresses   | 8,250      |

# THE Canadian Red Cross

A national journal published monthly by the Canadian Red Cross Society, to place before the people of Canada information concerning its program and activities, and to assist in carrying out the purpose of national Red Cross Societies of the world as set forth in Article XXV of the Covenant of the League of Nations.

*"The members of the League agree to encourage and promote the establishment and co-operation of duly authorized voluntary national Red Cross organizations having as purposes, the improvement of health, the prevention of disease, and the mitigation of suffering throughout the world."*

CANADIAN RED CROSS SOCIETY

National Office:

410 Sherbourne Street — Toronto, Ontario.

Vol. II. TORONTO, FEBRUARY, 1923 No. 2

## LIVING CONDITIONS

In the control and eradication of tuberculosis there are two important lines of effort—the cure of sufferers and the provision of wholesome living conditions for everybody. Earnest and laudable endeavors are being made by the Canadian Tuberculosis Association and by other public and private agencies. Public interest has been aroused and public opinion formed. In consequence comfortable and efficient sanatoria devoted solely to the treatment of tuberculous patients have been erected at many points in the Dominion. Other patients receive medical care and intelligent instruction in private institutions.

But these institutions in themselves can avail but little in eradicating the disease as long as conditions remain which keep them full of patients. It is a matter of common knowledge that tuberculosis is fostered by unhygienic and unwholesome ways of living. In many instances the people who live thus are of the poorer and more ignorant of the population and are not responsible for the conditions under which they live; in fact, quite often they are powerless to overcome them.

It is a well-known fact in industry that when the workman receives a higher wage he generally aims at a higher standard of living. If employers of labour would take sufficient interest in their help and would look further ahead than the monthly balance-sheet, they could soon calculate how much to their advantage it would be to have on their payrolls capable, well-paid, healthy men and women. They can take a part in the prevention of disease by doing all possible to bring about such conditions.

## ON WHEELS

Toronto Star

A Chicago insurance company has been making a health survey of the male waist line.

It finds that the line is growing longer; the distance around the equator is increasing. The increase is attributed to "eating great quantities of pastries and other sweets which fatten in the wrong places. If they take exercise they take just enough to make them eat heavily!"

Doubtless the average city man's waistline is also "on the make." But is it all due to the hearty, or too fat-producing, dinners?

What the modern business man does in the way of eating is doubtless an important factor in his frontal development. What he doesn't do in the way of walking is an equally important factor. There are men, of course, who would not get fat if they sat around all day. There are others who could not keep thin if they indulged in a road race every morning. But the average man would be in better health and of better physique if he walked more. Instead, he walks less. He has become a creature upon wheels.

## THE RED CROSS

From *The Evening Times and Star*, St. John, New Brunswick

The New Brunswick Division of the Canadian Red Cross is a provincial institution with a specific and most important task to perform, and it is to be congratulated on the character of the men and women who conduct its affairs. It is not an organization spending money without due regard for results. The work it has to do is of the highest value to the community, and that instruction regarding it is now given in the schools is a distinct advantage.

The Minister of Health has on many occasions testified to the value of the aid given the department by the Red Cross, but perhaps its best service will be in that quietly performed service in the various parts of the province where it has branches, in arousing a more general interest in all matters pertaining to health. The chief difficulty the health department has to overcome is the indifference with which unhealthful conditions are regarded.

The local people interested in the Red Cross can do a very great amount of good by making it clear that whatever party may be in power in a political sense the work for public health must go on, because it is essential to the task of making an efficient citizenship, and reducing the cost of institutions for the care of victims of ignorance and neglect. Of course the Red Cross has many activities, but all of them are founded on the principle of helpful service to those in need, and the organization is such as to get most satisfactory results. It is part of a world-wide movement of vast human benefit.



## NEW BRUNSWICK

### Minister of Public Health and Superintendent of Education Speak Highly of Work of Provincial Division. A Year of Notable Achievement

A YEAR of achievement for the New Brunswick Division of the Canadian Red Cross was reported at the annual meeting held in St. John recently. R. T. Hayes, M. L. A., the President, who presided, was unanimously re-elected. At the business sessions which were held in the Red Cross Depot, reports were heard from the following: Miss Jarvis, Secretary; Mr. C. B. Allan, Treasurer; Mrs. Harold Lawrence and Miss Jessie Lawson, Supervisors of Junior Red Cross work. Mr. E. A. Schofield reported for the committee of soldiers' workshops and Mr. C. B. Allan also reported on his attendance at the two Central Council meetings held during the year.

The secretary's report told of the visits from officials from outside branches and headquarters. The relief work throughout New Brunswick during the year had been very heavy and many donations had been distributed.

The Junior branch had progressed favourably and under the sanction and co-operation of the Board of Education it was being organized in the schools.

The Membership Enrollment had been carried on in some parts of the province, but there was still opportunity for further activity. Miss Jarvis pointed out that the Society had to place itself on a self-supporting basis, as the limit of possibility of grants from headquarters had been reached.

The treasurer, Mr. C. B. Allan, in the financial report from December 1st, 1921, to December 31st, 1922, showed receipts amounting to \$40,380.27; disbursements, \$33,892.26; balance, \$6,488.01. The Division has invested funds to the amount of \$25,000.

#### A YEAR OF USEFUL EFFORT.

Other reports received were: Mrs. Scott representing the Hospital Committee; Miss Allison for the sewing committee; Mrs. Jas. Robertson, the Bulletin Committee; F. B. Ellis reported that the Recreation Hut for the Lancaster Hospital had been completed at a cost of \$6,911.91, and was formally opened last fall. A report from Miss Meiklejohn, Director of Public Health Services was heard, together with numerous others from branches of the Red Cross, telling of the splendid work done along the lines of public health, sewing and caring for the soldiers' families, and emergency work.

#### PORT WORK

Miss Tremaine, Port Nurse, was introduced and gave an interesting account of the useful work in receiving newcomers at the port, and in following up their cases of illness or disability by sending forward information to their respective destinations.

Addresses were heard from Dr. W. S. Carter, superintendent of Education for New Brunswick who is also a member of the Executive; Hon. Dr. W. F. Roberts, Minister of Public Health; Rev. Mr. FitzPatrick, of Canterbury-York County; Mrs.

George F. Smith; Dr. Murray MacLaren; Miss Marven of the Soldier Settlement Board; Miss Mary Flett, representing the Patriotic Fund; Miss Nutter, Superintendent of the Women's Institutes; Miss Irene Barber, of the St. John Ambulance Association; Miss Atherton Smith for the St. John Local Council of Women and others.

#### HEALTH AND EDUCATION

In all the addresses heard, the keynote seemed to be one of congratulation to the Red Cross for its notable accomplishments along the lines of public health, its battle against disease and insanitary conditions, and especially for its good work among the

poor and needy. Dr. Carter particularly complimented the Red Cross on having attained something which no other society has been able to do, namely, getting a place on the curriculum of the city schools. Dr. W. F. Roberts, Minister of Public Health, in his address said:

"The record of what has been accomplished for the betterment of health conditions, in this province during the last year is one of which we may well be proud. The value of precious human lives cannot be computed in dollars and cents, but no one will deny that the lives which have been saved by means of the energetic efforts of the Provincial Government aided nobly by the Red Cross Society and other similar organizations may be regarded as an economic gain inestimably greater than the expenditure which was the means of saving them.

## PREVENTION OF CANCER

### Ten Essential Facts That Everyone Should Know Issued in Bulletin by Michigan Department of Health. Early Recognition of the Disease by Skilled Physicians Absolutely Necessary

IN OUR issue of May, 1922, we gave a short article upon the importance of the early diagnosis and early treatment of cancer. The cause of cancer has not yet been found, and, until it is, it will be impossible for anybody to set forth the best means of preventing it. In the meantime the only thing that can be done is to take such steps as have been proved by experience to be the most effective, namely, to eradicate the disease as soon as it is discovered. We are able to supplement our statements in the May issue with the following which have been published by the American Society for the Prevention of Cancer and have been distributed very widely in the Public Health publications of the United States. We take our selection from the Cancer Number of the Michigan Department of Health. They are as follows:

#### CANCER FACTS

The society holds that the following essential facts about this disease should be familiar to every intelligent adult:

1. Cancer begins as a small local growth which can often be safely and easily removed in the early stages by competent surgical treatment, or in certain favorable cases by radium X ray or other methods.

2. The beginning of Cancer is usually painless; for this reason its onset is doubly insidious and other danger signals must be looked for and heeded in time.

3. Cancer is not a contagious or blood disease and there should be no thought of disgrace or hereditary taint associated with it.

4. Cancer is not a contagious disease and there is no danger from living in the same house or from contact with a patient.

5. In any ordinary sense, cancer is not inherited. Some authorities believe that there may be inheritance of a certain tendency to the disease, but even this is not clearly established. The disease is so frequent that by the very law of chance many cases will occur in some families. Life insurance companies do not regard cancer in the family as a reason for rejecting applicants or increasing premiums.

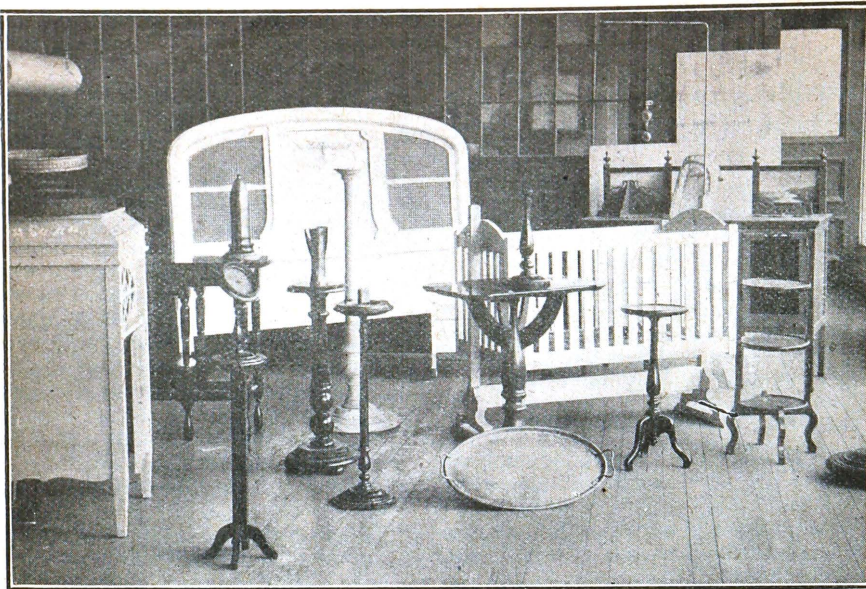
6. A persistent lump in the breast, or continued abnormal discharge or bleeding should take a woman to her doctor forthwith. The increased flowing which frequently occurs at the change of life, is always suspicious, as is the return of flowing after it has stopped. I mean any reddish color in the urine is very suspicious of cancer in the bladder or kidney; though it is also seen sometimes with stone of the bladder or kidney. Do not expect the doctor to tell you what the matter is without making a careful physical examination.

7. Sores, cracks, lacerations, lumps and ulcers which do not heal, warts, moles or birthmarks which change in color or appearance are danger signs which demand competent medical investigation and treatment.

8. Persistent indigestion in middle life with loss of weight and change of color, may mean internal cancer.

9. Continued irritation in some form rather than a sudden blow, is the usual exciting cause of cancer.

10. A doctor who says "Wait and see", assumes a serious responsibility. No competent doctor will treat a suspicious symptom without making a thorough examination.



## RED CROSS WORKSHOPS

**British Columbia Division Has Made Careful Study of the Problem of Aiding Ex-Soldiers Whose Disabilities Handicap Them in the Open Labor Market.**

**T**HE British Columbia Division of the Red Cross has tackled the difficulty of dealing with "problem cases" by establishing Red Cross Workshops for Disabled Veterans in Vancouver and Victoria.

The "problem case" is that of the returned man who, although on account of his disabilities is unable to compete in the open labor market, is still sufficiently strong to work, perhaps only for a limited number of hours per day, or for a full day if allowed certain intervals of rest. It is obvious that the ordinary employer cannot be expected to employ men in this condition, for to do so would entail slower production and a dislocation of the relations of his workers to one another. The problem case, is usually thrown upon his own resources and, being unable to compete with his fellows, is likely to become depressed and a burden to himself and others.

### HELP AT THE RIGHT TIME

It is just this kind of man that the Red Cross workshops employ. The applicant's army record having been investigated, a medical board determines whether he is eligible for the shops. Then, if he has not learned a trade, he is employed at a recognized minimum rate. A rest room is fitted up in connection with the shop, and there the man may take whatever rest periods the doctors prescribe. Moreover, he is given an opportunity to learn from a competent and tactful instructor one of the trades which are used in the shop. Then as the learner becomes proficient his wages are raised. It has been found in practice, that employment in the shops at work which is sold on its merits, and not from any sentimental appeal, goes a long way toward correcting the neurasthenic condition which accompanies long illness or severe injury.

With regard to the nature of the work,

certain definite rules have been laid down. It must be light, and its products adapted to the requirements of the local market. It must be as remunerative as possible, and it must be of a nature that is likely to help in a cure of the man's disability. In the aggregate, the occupations engaged in must be varied so as to suit as many types of disability as possible. Thus in the Vancouver shop men are employed at art metal-work, furniture making, French polishing, photograph developing and other suitable trades.

The men, as their health improves and their proficiency increases, are encouraged to seek for work outside the shops, or to start in business for themselves but, should they do so and fail through no fault of their own, they are not debarred from re-employment at the Red Cross shops.

Between thirty and forty ex-soldiers are employed in Vancouver. Experience has

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*Furniture and other useful articles produced in the Vancouver and Victoria, B.C., workshops conducted by the Canadian Red Cross on behalf of partially disabled ex-soldiers.*

---

shown that a start may be made with a unit of twenty men, this number being gradually increased each month for about six months. The cost of keeping each man in permanent employment need not exceed twenty-five to thirty dollars a month, a comparatively small sum to be expended on permanent re-establishment.

Excellent furniture, and other productions, have been turned out of the Red Cross shops. The men have their own committee, and they are both enthusiastic with regard to the scheme, and proud of the work they are able to produce.

### STRANGE, ISN'T IT?

The strange part of it is that children usually need punishment when their parents have a grouch.

### DANGER AHEAD

Little Tommie Brown was always interested in his new baby sister. One day he stood peering down upon it while nurse was singing it to sleep.

"Nurse," he whispered at last, "she's nearly unconscious, isn't she?"

"Yes," nodded the nurse, and continued singing the lullaby.

Tommie whispered in alarm: "Then don't sing any more or you'll kill her."



*The Vancouver workshops and some of the workmen.*

## BRITISH COLUMBIA PIONEERS

**Red Cross Divisions Organized Christmas Cheer for Children of the Poorer Settlers in the Pioneer Districts of the Province. This Timely Duty, Cheerfully Undertaken, Brought Much Happiness to the Children's Lives.**

**I**N BRITISH COLUMBIA, a good deal of the work of the Provincial Division of the Canadian Red Cross is carried out for the benefit of soldier settlers, in co-operation with the Soldiers' Settlement Board. This fact suggested a Christmas undertaking of an unique and interesting character.

In the larger cities of British Columbia, as in those of other provinces, there are many organizations which make it their care to see that the children of the poorer citizens are provided with Christmas cheer and comforts. But scattered here and there, in isolated rural districts, are cases of poverty which are quite as pitiful as any that can be found in a city slum. The poor settler, as a rule, has no one to help him and but few take interest in his welfare, and though poor crops, floods, or other disasters may leave him absolutely penniless, he must struggle along in the best way he can, while he and his wife and children are often but scantily supplied with both food

and clothing.

Many cases of this kind have come to the attention of the British Columbia Division during the past year, and it was evident that unless help came from outside to some of these settlers, there would be but little of Christmas joy for some of the families. The Division, therefore, issued an appeal through the local press, while with the aid of the Soldiers' Settlement Board and others, it compiled a list of needy and deserving settlers with families. Partly owing to the general financial depression, and partly to the large number of similar appeals appearing at the season, the receipts of money were not very large. The total amount was \$108, but wholesale firms and other friends of the Red Cross donated fruit, candies and clothing and the office of the Provincial Director of Nursing, Mrs. Anna M. Stabler, soon began to look like a Christmas bazaar.

Members of Red Cross Home Nursing classes undertook to dress dolls and to make

Christmas stockings, and members of the office staff also helped in this direction in the intervals of their regular duties. Other volunteer helpers filled the stockings with nuts, candies and other of the good things of which children are fond.

A list of 285 children in various places had been made and it was very gratifying to everyone concerned that each of these received a Christmas parcel, notwithstanding the limited amount of money subscribed. They were very good parcels, too, for each one contained a stocking, some article or articles of clothing, and a toy for each child. The gifts included dolls, mouth organs, books, and other toys.

Since Christmas, many letters of grateful thanks have been received by the Division. A typical one may be quoted:

"I beg to acknowledge receipt of Christmas gifts, and to thank you very much for them. The children were delighted that Father Christmas found them at . . . . . as we had told them we were quite sure the sea would be too rough for him. I am afraid that they would not have had any good things for Christmas morning had it not been for your kindness."

Others speak of the way in which the gifts exactly suited the child for whom they were intended, and the reading of these letters by those who did the work has amply rewarded them.

## FARM WELL WATER

**Many Wells Are Seriously Polluted and a Danger to the Health of Those Using the Water From Them. Dominion Government Makes Careful Examination of All Samples Sent to it**

**A**MONG the samples of agricultural interest sent to the Division of Chemistry of the Dominion Experimental Farms for analysis last year were 119 samples of water from farm wells, with a view to securing information as to whether they were pure and wholesome for drinking purposes. Of these 24 per cent. were found to be satisfactory, 18 per cent. were suspicious and probably dangerous, and 55 per cent. seriously polluted. It is found that in the majority of instances that polluted water comes from shallow wells which are improperly located, either in the barnyard or under the stable or barn, or not far from the outhouse. Sooner or later, states the Dominion Chemist in his annual report, a well thus located must become contaminated and its water a menace to health. The well should be located at least fifty yards from any probably source of contamination, while as an additional safeguard the surrounding area should be maintained in sod. It will be found of very considerable value to line the well to a depth of 10 to 12 feet and to a thickness of say 6 inches with concrete or puddled clay, continuing this wall or lining for a foot above ground. A number of other useful suggestions relating to the subject are contained in the report.

If contamination is suspected the following safeguards are recommended:

1. Boiling for ten or fifteen minutes all water required for drinking or culinary use. The water thus boiled can be aerated, and freed from insipidity, by cooling in the open air.

2. Chlorination. A level teaspoonful of chloride of lime in rubbed up with a little water to the consistency of cream. This thin paste is diluted and thoroughly mixed with water to the volume of approximately one pint, bottled and securely corked. This stock solution will keep for at least a week. A teaspoonful of this solution should be added with stirring to each two gallons of the water to be treated. After fifteen minutes all disease germs will be destroyed.

Farmers desirous of an analysis should write to the Division of Chemistry for the necessary directions for the collection of the sample.—Issued by the Director of Publicity, Dominion Department of Agriculture, Ottawa, January 27, 1923.

### TWO RINGS

The family were out of town, and the house was left in charge of a young housemaid. On opening the door the first morning she found the charwoman standing there, obviously angry. "I've been ringing and ringing for the last half hour," she said.

"Why ever didn't you come sooner?"

"Oh, was that you?" replied the housemaid. "You kept on so regularly that I thought it was only the telephone!"—*Philadelphia Star.*

### WINTER HEALTH ADVICE

**I**N EARLIER years in Canada summer was the season of sickness and in comparison winter was healthful. While winter is not much more unhealthful than it was fifty years ago, our health at other seasons has become so much better that our winter health is now a disgrace. Some day we may grow dissatisfied with it and change it.

Increased sickness comes soon after we put the windows down and turn on the heat. Winter sickness usually starts with colds and colds often lead to pneumonia. The best way to prevent pneumonia is to avoid colds. There are certain simple rules we can follow which will help us to avoid colds.

Be out-of-doors as much as possible.

Keep feet dry and warm.

Keep the house well ventilated.

Keep out of crowds.

Avoid dusty, dirty air.

Keep down street dust.

Avoid chillings which start colds.

Keep the children with acute colds and sore throats out of schools.

Do not be in too close contact with people suffering from acute colds and sore throats. If they are friends or relatives to whom you are giving attention in illness take intelligent precautions to prevent yourself catching the illness.

## PRINCE EDWARD ISLAND

### Staff of Red Cross Health Nurses Found That a Very Large Proportion of School Children Have Defects That May Be Remedied. Bad Teeth Very Prevalent. Steps Taken to Improve Conditions.

**M**ISS AMY E. McMAHON, chief of the staff of Red Cross health nurses of the Prince Edward Island Division, gave, in her report for the past year, some useful information upon the health conditions in the island province. The report read as follows:

During 1922, health work has been undertaken along many lines, but most of the nurses' time has been spent on the school children.

120 schools were inspected during the year.

3,791 children were examined, weighed and measured.

95.2 per cent. of the children were found to have defects.

85.6 per cent. of the children were found to have defects, other than teeth.

24.6 per cent. of the children were 10 per cent. underweight for height and age, most of whom showed other signs of malnutrition.

Last year's report included most of the schools in the larger centres, while this year, with a few exceptions, the schools inspected were in the country districts.

It was astonishing to find that in the majority of the rural schools, a greater percentage of pupils showed signs of malnutrition than in the larger schools. In some cases this could be attributed to bad teeth and gums or to diseased tonsils and adenoids, while in a great many instances, it was evidently due to lack of food of the right kind, especially milk, eggs and vegetables. On the other hand, the children who had no marked physical defects and who were given the advantages of plenty of good country air and food, were of the type that Canada can well be proud of.

#### THE DOCTORS HELPED

I should like to take this opportunity of thanking the doctors who so kindly gave their time to examine the pupils in many of the schools and to those who later gave the necessary treatments where the parents were unable to pay. When there was no doctor to be had, in addition to the weighing and measuring, the nurses' inspection consisted of the eye and ear tests, examination for apparent defects of nose, throat, teeth, skin and posture and for signs of malnutrition. Each child was talked to individually by the nurse and advised according to his special needs.

In every case, explanatory slips were sent to the parents, stating whether the defects found in their children were slight and could be corrected by home treatment or whether the family doctor should be seen.

#### TRUSTEES AND PARENTS

The trustees and parents were invited to come to the schools, in order to see the inspection being carried on and to hear the talks being given to the children on "Good Health Habits," the object being to en-

courage them to try to become bigger and stronger girls and boys, thereby helping their country as well as themselves. After school hours, literature and advice were given to the mothers, who brought their babies and young children to be weighed and examined. Frequently the nurses held meetings in the evenings, which were attended according to the degree of interest shown by the people in the district.

In the country districts, a great deal of dental attention is needed among both the children and the adults. Very often the teeth have been neglected, only because it was practically impossible to take the whole family long distances to the nearest dentist. It would be a great boon to the people if some dentist would take his equipment and tour the country during the summer months.

#### SCHOOLS AND HOMES

Very often the schools in the country were not at all in keeping with the fine homes and barns in the neighborhood. In most places, however, where there were Women's Institutes, the schools were more comfortable and in better condition. In every case a detailed report of the inspection of the school building has been sent to the local Secretary of Trustees, as well as to the Chief Superintendent of Education stating what has been found that was considered detrimental to the pupils' health and offering suggestions for the necessary improvement.

#### HEALTH VISITS

During the year, 2,495 health visits were made to the homes throughout the Island.

|                                |       |
|--------------------------------|-------|
| School                         | 1,513 |
| Pre-school                     | 261   |
| Infant                         | 367   |
| Prenatal                       | 38    |
| Adult, including T. B. patient | 316   |

2,495

The follow-up work has been most satisfactory. Parents, who would otherwise have paid little attention to the slips, have, after a personal visit, been convinced of the importance of having the defects corrected and been willing to co-operate with the nurses by encouraging the children to improve their "Health Habits."

In many cases where the children needed to be operated on and the parents were unable to pay, satisfactory arrangements have been made with the hospitals or with the local doctors. Even under these conditions, however, there are those who will not give their consent to having the children's tonsils and adenoids removed. This prejudice is however being gradually overcome.

Although some of the dentists in Charlottetown have in urgent cases been attending gratuitously to the teeth of the poor children, referred to them by the Red

Cross Nurses, a more satisfactory arrangement should be devised.

A great interest is being shown in health matters, as is apparent by the increased number of visits made to the Health Centre. The total number for the year was 2,991.

|                            |      |
|----------------------------|------|
| School children            | 1627 |
| Children of pre-school age | 146  |
| Infants                    | 116  |
| Prenatal cases             | 11   |
| Parents with children      | 188  |
| Adults for health advice   | 199  |
| Emergencies                | 4    |

Instruction was given to mothers in the care and feeding of their babies and young children. As a rule, the mothers, especially the younger ones, were willing to carry out the advice given. The older children came to be weighed and to have their health habits checked up, for their interest had, in most cases, been aroused by the health talks given during the school inspections. Those who found that they had more than the average monthly gain, at once attributed it to their improved health habits, especially to the increased amount of milk taken, or to extra hours of sleep in well ventilated rooms. All children, whether examined previously at school or not, received the same attention and supervision. Quantities of literature on different health subjects were distributed from the Centre during the year.

#### AT THE PROVINCIAL EXHIBITION

The Child Welfare and Public Health Booth at the Provincial Exhibition this year attracted a great deal of attention. It was visited by several thousand people, who had the exhibit explained to them and who took away health literature. What proved to be an interesting part of the demonstration was the children's food table. On one side was shown the actual food that made for better health and growth and on the other what needed to be avoided, both as to the choice and the cooking of the food. There were 585 boys, girls and babies weighed and measured. A health leaflet was provided for each one, on which was marked their actual weight and height and how they differed from the average child of the same age. Those who needed further advice were encouraged to visit the Red Cross Health Centre, later. During the afternoon, local doctors and dentists gave talks to the people both individually and collectively, examining the children when requested to do so.

Last winter two groups of school girls between the ages of 14 and 16 were organized into "Health Leagues" and met in the Health Centre twice a week. Talks and demonstrations were given on "Personal and Home Hygiene," "Elements of Home Nursing" and the "Care of the Baby." At the close of the classes, an appropriate prize was awarded to the girl who wrote the best paper, on what she had learned during the course.

#### INTERESTING THE YOUNG TEACHERS

During the Spring a course of five lectures was given to the students of the Prince of Wales College, on the different phases of "Health Education" for which

several of the doctors and a dentist kindly gave their services. This course proved of great value as shown by the marked interest taken by the young teachers this autumn, when the nurses were inspecting their schools.

Often we are called upon to co-operate with other organizations. For example, last winter a family was referred to us by the Red Cross of one of the Western Provinces. The father, an ex-service man, had gone to the west to work and on the death of his wife here, the children had been left destitute, with a girl of fifteen in charge. Till the arrival of the father, this family was supervised by one of our nurses and the necessary food procured. The Western Branch refunded what had been spent.

#### CO-OPERATING WITH D. S. C. R.

We have been able to co-operate with the Soldiers' Civil Re-Establishment by visiting their tuberculous patients who were in the different districts where the nurses were working. This has been of mutual advantage, for often school children were living in the same house and the nurse could then give the necessary advice and supervision. In one case it was necessary to advise that a returned soldier be sent back to Kentville Sanatorium, where he had been previously under treatment.

Several times we have been able to get in touch with people coming into the Province who have been referred to us by the Immigration Offices at the ports of landing.

A great number of people still do not seem to realize that this work has so far been merely a demonstration carried on by the Red Cross Society, and that naturally preference was given to the larger centres where more people could be reached and to the districts that showed the greatest interest and wrote asking for the nurses.

In some places, the people showed great interest and appreciation, while in others they were apparently more or less indifferent.

#### HELP OF PARENTS AND TEACHERS NECESSARY

The success of the work is in direct proportion to the interest shown by the parents and teachers. The interest of the children can always be aroused, but it cannot be expected that they will continue to carry out their part, without the co-operation of the home and school.

#### AN OLD NOTION EXPLODED

Some men are born controversialists. Archdeacon Whately was one and he cheerfully admitted it. "One cannot argue with you," said an exasperated friend to him one day, "for you will never admit one's premises. I don't believe you would admit without argument that two and two make four." "Certainly not!" replied the Archdeacon. "For instance, they might make 22."

#### HIS PREFERRED FATE

The man was marrying a widow. His brother said to him on his wedding morn: "I could never bear to be a widow's second husband."

The bridegroom smiled optimistically. "Well, for my part," he said, "I'd rather be a widow's second husband than her first."

## NOTES ON CURRENT HEALTH LITERATURE

THE following interesting articles on public health have appeared in recent periodicals. **Health Officers and Public Health Workers** may borrow any of these upon application to the Health Information Service, Canadian Red Cross, 410 Sherbourne St., Toronto.

Please mention the month of this magazine and the marginal numbers of the articles desired.

#### 1. Ventilation:

The January number of the "Journal of the Outdoor Life" contains a symposium on ventilation including the following articles:—

- (a) Air from the Standpoint of Physiology.
- (b) Atmospheric Conditions and Respiratory Disease.
- (c) Heat Loss from the Human Body.
- (d) The Ventilation of the Schoolroom.

#### 2. Symposium on Dental Hygiene:

"The Journal of State Medicine" for November 1922 contains the following articles on dental hygiene:—

- (a) The Building of Good Teeth.
- (b) The Prevention of Dental Caries and Oral Sepsis
- (c) The Causes and Effects of Irregular Teeth.

#### 3. Maternal Mortality:

"Effective Methods of Reducing Maternal Mortality." By Dr. R. A. Bolt, American Child Hygiene Association. "Health News," November 1922, page 247.

#### 4. Maternity Clinics:

The organization and function of a maternity clinic as described by Dr. G. E. Oates in a lecture delivered at the Royal Institute of Public Health. "Maternity and Child Welfare," Dec. 1922 p. 379

#### 5. Industrial Welfare:

A description of the measures to safeguard the health of adolescent workers at Cadbury Bros. plant in Bourneville, England. "The Child," Dec. 1922, p.71.

#### 6. Hospital Social Service:

Recent developments in hospital social service. By N. Florence Cummings, R. N., Managing Editor, Hospital Social Service, New York. "The Public Health Nurse," Dec. 1922, p. 643.

#### 7. Infant Feeding and Infant Mortality:

The relation of breast and artificial feeding and infant mortality. By Dr. R. M. Woodbury of the U. S. Children's Bureau "The American Journal of Hygiene," Nov. 1922, p.668.

#### 8. Nutrition Classes for Children:

A year's experience of nutrition classes in Detroit shows a minor influence on weight of school children but a marked improvement in their health and dietary habits. "City Health," Nov. 1922, p.3.

#### 9. Rural Child Welfare:

Bulletin No. 107, issued by the U. S. Children's Bureau on County organization for child care and protection.

#### 10. The Growth of Children:

A study of the growth of different types of children with special reference to height, weight, and breathing capacity. By Dr. B. T. Baldwin of the University of Iowa. "Journal of the Outdoor Life," Dec. 1922, p.405.

#### 11. The Mental Hygiene Problem:

Some phases of the problem of mental hygiene in Canada as described by Dr. E. K. Clarke in address before the Canadian Public Health Association. "The Public Health Journal," Dec. 1922, p.537.

#### 12. Venereal Disease in Canada:

A review of the venereal disease situation in Canada. By Dr. J. J. Heagerty of the Department of Health of Canada. "The Public Health Journal," Nov. 1922, p.485

#### 13. The Cause of Tuberculosis:

The cause of tuberculosis in its modern aspects. By Dr. E. R. Baldwin of the Trudeau Foundation, Saranac Lake, N. Y. "New York Tuberculosis Association Bulletin," Nov.-Dec. 1922, p.1.

#### 14. The Prevention of Infection:

A popular description of the way infection spreads and the best methods of prevention. "The Health Builder," Jan. 1923, p.207.

#### BOOKS ADDED TO THE LIBRARY

#### 15. "The Practice of Preventive Medicine:"

By J. G. Fitzgerald, M. D., F. R. S. C., Professor of Hygiene and Preventive Medicine, University of Toronto

#### 16. "The Evolution of Public Health Nursing:"

By Annie M. Brainard. Cloth. \$3.00. Pp.453. Philadelphia and London: W. B. Saunders, 1922.

#### 17. "Heredity and Child Culture:"

By Henry Dwight Chapin.

#### 18 "Motherhood:"

By H. W. Long, M. D.

#### GOT AWAY AGAIN

The stationmaster, hearing a crash on the platform, rushed out of his room just in time to see the express disappearing round the curve, and a dishevelled young man sprawling out perfectly flat among a confusion of overturned milk cans and the scattered contents of his travelling bag.

"Was he trying to catch a train?" the stationmaster asked of a small boy who stood by admiring the scene.

"He did catch it," said the boy happily, "but it got away again."

#### AN UNBREAKABLE DOLL

"I wish I had a baby brother to wheel in my go-cart, mamma," said small Elsie. "My dolls are always getting broken when it tips over."—*Boston Transcript*.

## Current Red Cross News From Canada's Press

CALGARY, ALTA.—One of the happiest Christmases that they had ever known was spent by the patients and staff of the Junior Red Cross Hospital.

It was all very pleasing and everyone was so kind in remembering the little gifts that cheer sick children. A remarkable thing to know, was that of the thirty two patients in the hospital, from the 17-year old to the 18-months-old, everyone wore that look of satisfaction that is only shown by those who are really happy.—*Calgary Albertan*.

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SEAFORTH, ONT.—The annual meeting of the Seaforth Red Cross Society was held in the Carnegie Library. Mrs. F. Holmstead presided. The Secretary, Mrs. L. T. Delacey, read an encouraging report on work accomplished during the year. Twelve cases of goods were shipped to the Northern Ontario Fire Relief Committee. A number of needy persons in the town were helped and boxes of Christmas cheer were sent to soldier settlers.

—*Stratford Beacon*.

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ST. JOHN, N. B.—A year of great achievement for the New Brunswick Division of the Canadian Red Cross was reported upon at the annual meeting, held in three sessions in the city of St. John.

Dr. W. S. Carter, Supt. of Education for New Brunswick, gave a congratulatory address. R. T. Hayes, M. L. A., the President, was unanimously re-elected.

—*Daily Telegraph and Sun*.

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KINGSTON, ONT.—At the regular monthly meeting of the Kingston Branch of the Canadian Red Cross, letters of appreciation were read, first, from the soldier patients of Mowat and Sydenham hospitals thanking the Society for the abundance of Christmas cheer during the holiday and, second, from a returned soldier in Northern Ontario, who expressed his gratification for the assistance rendered after the recent fire.—*Kingston Whig*.

\*\*\*\*\*

UNITY, SASK.—On the invitation of the G. W. V. A., Mr. W. F. Kerr, Commissioner for the Saskatchewan Division of the Canadian Red Cross, gave an excellent account of the varied work that is being done in the Province by the Red Cross organization. Mr. J. A. MacDonald, President of the local branch of the Society, and J. W. Pratt, Secretary, were among the speakers.

—*Saskatoon Star*.

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VANCOUVER, B. C.—Classes in home-nursing will be started February 8th by the British Columbia Provincial Division of the Canadian Red Cross. Existing classes in the Province have a membership of 108 students who will finish their course on January 31st.

The object of the Red Cross Society in giving these courses is not to qualify students for professional nursing but to fit girls and women to nurse simple cases of illness in their own homes.—*Vancouver Sun*.

EDMONTON, ALTA.—Howard Stutchbury was unanimously elected president of the Edmonton branch of the Canadian Red Cross. His Honor Lieutenant-Governor Brett, Premier Greenfield, Archbishop O'Leary, Bishop Gray, and Mayor Duggan were made honorary presidents. Lieutenant-Governor Brett, Provincial president, complimented the local branch upon the work of the year, a total of 786 cases having received attention. There had been a distribution of 7,000 articles of a total value in excess of \$4,000. Soldiers' dependents to the number of 479 had been given assistance.—*Edmonton Journal*.

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KITCHENER, ONT.—The most important items in the secretary's report on the work of the past year concerned help

given to needy families and the sending of supplies to the fire sufferers in Northern Ontario. In connection with the latter, the Society was greatly assisted by the teachers and school children who collected and packed 72 packages.—*Kitchener Record*.

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OSHAWA, ONT.—The local branch of the Canadian Red Cross during the past year has included in its activities child welfare work, particularly in the public schools of the city; the rendering of assistance to fire sufferers of Northern Ontario; assistance in carrying on baby clinics and the supplying of milk to underweight children who are attending the public schools. The president elected for the following year is W. E. M. Sinclair, M. L. A.—*Toronto Globe*.

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SARNIA, ONT.—The sale held by the Sarnia Red Cross in the Public Library was one of the most successful sales of the usual two-a-month affairs. The proceeds are devoted to social service work.

—*Sarnia Observer*.

## ONTARIO'S JUNIORS HELPED

**Schools of the Province Aided Substantially in Work of Disaster Relief. Over Six Thousand Dollars Subscribed. Department of Education Designates Junior Red Cross as Disbursing Agency**

THE schools of Ontario have helped generously in the relief of distress among the sufferers in the Northern Ontario Fire of October last. To January 31st the sum of \$6,054.00 had been contributed by the schools in 695 places. It is estimated that 100,000 children have shared in the enterprise. This has been in response to an appeal issued by Hon. R. H. Grant, Minister of Education, on behalf of the boys and girls who lost their homes and schools.

The Junior Red Cross has been designated by the Department of Education as the agency through which contributions should be made and disbursed. Donations continue to come in. While the first use of the Fund calls for the case of sick and crippled children of fire sufferers, any needs for clothing or other necessities dis-

covered by Red Cross nurses, teachers or inspectors will be met. Before Christmas more than \$1,800.00 was used for the purchase of presents. Fifteen hundred pairs of rubber shoes for children and more than twenty-five hundred other presents such as skates, sleighs, dolls, and toys were distributed throughout the district.

A little three year old paralytic is under the charge of the Junior Red Cross in the Hospital for Sick Children, Toronto, at the present time and arrangements are under consideration for the special treatment of three more cases—one a clubfoot case and the others victims of infantile paralysis. All are children of fire sufferers. The care of sick children in the Red Cross Hospitals at Haileybury and Englehart will also be met by this Junior Red Cross Fund.

## HAILEYBURY FIRE

**Many Families Left Destitute as Result of Great Conflagration. Some Peculiar Freaks of the Fire**

THE number of families who suffered from the effects of the Haileybury fire last October was 1,744. The Chairman of the Ontario Provincial Government Relief Committee stated that the average number of persons per family would be comparatively high. Most of these were rendered homeless. The number of families left destitute by the fire was 650.

Two hundred and seventy-four farming families lost their implements.

The Ontario Division of the Canadian Red Cross was most active in the work of relief. It was at the scene with the first relief train and, as already recounted in our

two previous issues, lost no opportunity of being a help and a service to the people.

In many places the fire acted in a "freakish" way. In the midst of the town of Haileybury a small frame building stood unharmed and scarcely scorched. On its devastating track the fire turned in towards the town of New Liskeard, reached within a few feet of some frame buildings near the railway station, then turned as abruptly away without doing damage. One case was reported of three haystacks standing in a row and a comparatively short distance apart. The middle one was taken and the other two left.

## THE CARE OF THE BABY

ARTICLE IX.—FRESH AIR AND EXERCISE

**B**ABIES need fresh air just as much as they need food. This is true for very young and delicate babies as well as strong babies. Mothers sometimes fear that fresh air will cause colds. Fresh air prevents colds, it does not cause them.

The baby's room should always be well ventilated. One of the best ways to do this is to open the window slightly at the top and bottom with a window board in the lower sash during cold weather. The temperature of the room should be between 65 and 68 degrees with a reduction to 60 degrees at night. A baby sleeps better in a cool room if the bed clothing is sufficient.

When the baby is a week old, he may be taken out for a few minutes each mild day. This outing is gradually lengthened until he stays out most of the time.

In very hot weather the baby should be taken out early and placed in a shady spot, screened from flies. During the hottest part of the day, the baby may be cooler indoors.

Accustom the baby to outdoor air in the winter time by giving him an airing at noon for fifteen minutes and gradually increase the time until he is out of doors from ten until two every fine winter day. In very bad weather, dress him as for going out; open all the windows and let him remain in the fresh air for some time.

### EXERCISE

The normal baby exercises his body constantly while awake. This is one of the chief reasons why his clothing should be loose enough to allow this natural exercise. For the same reason, the child should not be left in a high chair for any length of time nor be tied tightly in a carriage, so as to prevent free movement of the limbs.

The creeping pen or "kiddie-coop" is very useful when baby begins to creep. The floor of the pen should be a firm mattress or folded blanket with a washable cover. Do not encourage the baby to walk before he is ready to do so and do not use a baby walker.

### GOOD HABITS

Babies form habits easily and at a very early age. They learn can good habits just as easily and quickly as they can learn bad ones. Whether the habits are good or bad depends upon the training given by the parents and not upon the child itself. Don't blame the baby for a bad habit. A bad habit should not be formed but if formed it cannot be too soon broken. It is well worth while to do so even at the expense of several crying spells or two or three wakeful nights.

Training in good habits should begin at birth. A well trained baby is fed regularly, sleeps regularly and, as one mother expressed it, is "a regular little machine." Such a baby is a pleasure and a credit to the mother.

The worst habit is to feed a baby at irregular intervals or every time he cries.

This makes the baby more trouble and is bad for his health.

The baby who demands too much attention has a bad habit. He should be handled very little and, if left alone, will learn soon to amuse himself.

### CRYING

A well baby does not cry very much, and since he has no other means of calling attention to his wants during the early months of his life, his cry should be heeded. But when he cries simply because he has learned from experience that this brings him whatever he wants, he has acquired one of the worst habits he can have, and one which it takes all the strength and patience of the mother to break. Crying should cease when the cause has been removed.

After his needs have been satisfied, he should be put down alone and left to cry until he goes to sleep.

### PACIFIER

The habit of sucking a pacifier or comfort is both dirty and dangerous. A pacifier is never clean, it spreads diseases, spoils the shape of the mouth and often causes adenoids. The best place for it is in the kitchen stove. The habit of sucking the thumb can be broken by the use of a cardboard cuff extending from the wrist to above the elbow.

### KISSING

A baby should never be kissed on the mouth nor on the fingers which are in the mouth many times a day. The baby does not enjoy being kissed and there is no better way of spreading colds, tuberculosis, diphtheria and other communicable diseases.

### THE WISE AND THE FOOLISH

"Which is the way to Ottawa, my lad?"

"I—I don't know."

"Which is the way to Topeka, then?"

"I—I don't know."

"Well, can you tell me how to get back to Wichita, then?"

"I—I don't know."

By this time the drummer was quite impatient and said to the boy: "Say, you don't know very much, do you?" to which the lad retorted.

"No! But—but I ain't lost!"—*Judge.*

### HIDE AND SEEK

One day while a farmer and his men were digging potatoes, a tramp came along and stopped to watch the workers. The boss, being short of help, asked the vagrant if he wanted a job.

The man of leisure replied, "Sure! What do I have to do?"

"Dig potatoes."

The tramp started to walk away, and with a look of disgust replied, "Let the man who planted them dig them. He knows where he put them."—*Judge.*

## THE HEALTH QUESTION BOX

"What is the objection to giving a pacifier to a baby?"

These are the objections:—

It carries dirt and germs into the mouth.

The sucking habit is a bad one. It causes an unnatural flow of saliva and spoils the shape of the jaw, lips, the roof, the mouth and the expression of the face.

\* \* \* \*

### FISHY TASTE—BUT NO FISH

"Our drinking water comes from a small lake and has a "fishy taste," but there are few fish in the lake. Is the water safe to drink?"

This taste is not a danger sign and is not caused by fish. A fishy taste such as you describe is more than likely to be caused by microscopic organisms that do no harm beyond carrying an unpleasant taste that discourages people from drinking as much water as is good for them. Other harmless micro-organisms may give the odour of geraniums or even of a dirty pig pen.

The best means of prevention is sometimes to aerate the water by shaking in a large bottle half filled. This will remove the objectionable taste by allowing the unpleasant gas to escape. In the case of a public water supply copper sulphate or blue stone will kill the organisms. This is applied by placing the chemical in a gunny sack and trailing the sack in the water behind a boat, which is rowed about the lake or reservoir. The amount of chemical used is extremely small and does not injure the water for drinking purposes.

\* \* \* \*

### A QUART A DAY

"Why should a child get a quart of milk a day if he eats enough of other foods?"

The food of a child must supply fuel for energy, repair material to restore worn out parts of the body, and, most important of all, building material for growth. The development of bones and teeth requires a supply of food rich especially in lime salts, and milk is the food richest in lime salts.

Recent researches have shown that children who drink a quart of milk a day can store more calcium than those who take less milk or depend on vegetables as the source of this important food element.

Therefore, for sturdy bones and sound teeth, give your child a quart of milk a day. But do not forget also that the teeth should have exercise on some foods that require chewing.

Do not forget also that to be safe for children milk should be pasteurized.

\* \* \* \*

### AN OLD ONE ON HEREDITY

A little boy who was very much puzzled over the theory of evolution questioned his mother thus:

"Mamma, am I descended from a monkey?"

"I don't know," the mother replied. "I never knew any of your father's people."

# Notice to Members

**A**FTER the March issue, "The Canadian Red Cross Magazine" will be mailed only to Life Members and to Annual Members who have renewed their membership for the year 1923. Complete lists of Life and Annual Members are now being prepared.

The Canadian Red Cross desires particularly to retain the interest and support of all who are on its present list of members.

If you have not renewed your membership for the year, please fill out the form below and send it to any of the following addresses:

## THE CANADIAN RED CROSS EXECUTIVE OFFICERS OF PROVINCIAL DIVISIONS:

**PRINCE EDWARD ISLAND:**  
Dr. S. R. Jenkins,  
Charlottetown, P.E.I.

**QUEBEC:**  
Lieut.-Col. J. F. Buckley,  
45 Belmont Park,  
Montreal, Que.

**SASKATCHEWAN:**  
W. F. Kerr,  
2331 Victoria Avenue,  
Regina, Sask.

**NOVA SCOTIA:**  
Dr. Smith L. Walker,  
63 Metrople Bldg.,  
Halifax, N.S.

**ONTARIO:**  
Dr. Fred W. Routley,  
410 Sherbourne St.,  
Toronto, Ont.

**ALBERTA:**  
Mrs. C. B. Waagen,  
O'Sullivan Block,  
Calgary, Alta.

**NEW BRUNSWICK:**  
Miss Ethel Jarvis,  
160 Prince William St.,  
St. John, N.B.

**MANITOBA:**  
G. J. Seale,  
187 Kennedy St.,  
Winnipeg, Man.

**BRITISH COLUMBIA:**  
A. J. Forsyth,  
626 Pender St. West,  
Vancouver, B. C.

To.....  
.....  
.....

(Name of Provincial Division of Canadian Red Cross)

Herewith enclosed is the sum of One Dollar as a contribution to the Canadian Red Cross Society, which sum includes twenty-five cents per annum (\$0.25) as subscription to the magazine, "The Canadian Red Cross."

Date..... Signed.....

Address.....  
.....

### ICE CREAM CONES

No. 3 Public Food Series

**T**HE BOSTON Transcript tells the story of a child who was asked: "And did you see the Statue of Liberty when you were in New York, dear?"

The little one replied: "The Statue of Liberty? Oh! You mean the big lady holding up the ice cream cone."

Those who have sailed past Bartholdi's great statue in New York Harbour will readily recall the resemblance. The torch of Madame Liberty, as there moulded, is just the shape of the ice cream cone with which the little one was evidently familiar.

All children and many of their elders are fond of ice cream cones, but a moment's observation of the way in which they are displayed and handled in some shops would "give us pause", as Shakespeare would say. Perhaps we might interpret this into modern speech as "make us hesitate."

One sees these little receptacles piled up in all sorts of corners dusty and handled by hands in various conditions of cleanliness. They are exposed to dust, and perhaps worse than dust, from the time the cover of the carton is removed until they find their way into the hand and, eventually, the mouth of the customer—for the ice cream cone is not merely a container. It is also an article of diet.

There may not be much danger of disease being conveyed in that way and then again there may be. We should take no chances on that. This is particularly important in view of the fact that children are the most frequent patrons of the ice-cream-cone sellers.

There is another side to the question and that is the mental. If we accustom ourselves to tolerating anything of a low standard, we eventually suffer by it. It is better for everybody to have and to demand a high standard of cleanliness in the matter of the handling of food. It is more wholesome to mind and body.

Everybody likes clean food and everybody likes to see food cleanly handled. Those who engage themselves in serving food to the public should keep this in mind because it pays. It also gives an additional pleasure to life to have the satisfaction of knowing that customers are pleased and satisfied.—F.D.

### ASKING A LOT

The patient was becoming nervous as the physician prepared to give the anaesthetic. He had made none of Irvin Cobb's plans to record the details for the use of posterity, but still he was anxious.

"Will it make me sick, Doc?" he asked. "Not a bit," said the physician reassuringly.

"How long will it be before I know anything?" he queried as the mask was adjusted.

"You're asking a good deal of the ether," was the doctor's reply.—Judge.

Laziness travels so slowly that poverty soon overtakes it.



