

THE BAILLIEWICK

NOVEMBER 2010

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Fenwick Operating Theatre: a lifesaving surgery in Edwardian Kingston

By Paul Robertson, Curator



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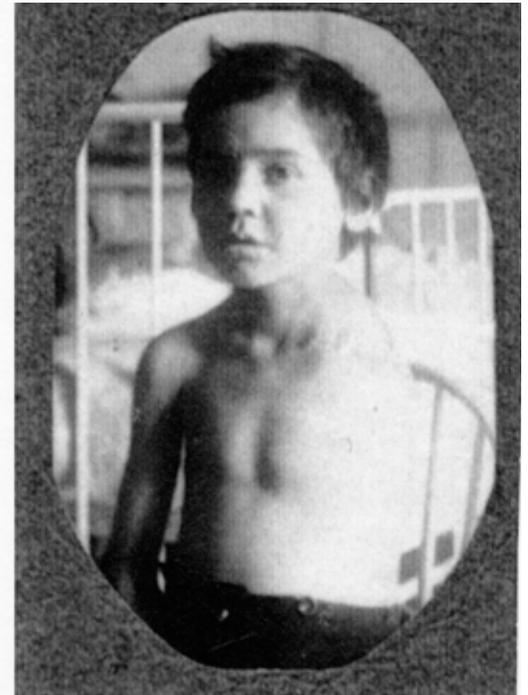
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Bennie S., age 10, on the 17th of September last was accidentally shot by his brother, a lad about two years his senior . . . The arm was nearly severed from the body . . . The patient's father ascribes the arrest of the hemorrhage to the fact that there was an old man at the house who had a "charm" for stopping bleeding . . . A doctor was procured who came a distance of twenty-two miles and remained at the house for two days, relieved his suffering and applied dressings of carbolic oil to the wound. The arm speedily became gangrenous and the little sufferer was evidently not expected to survive . . . "seventeen days" after the receipt of the injury he was started on his long journey to the Kingston general hospital. Leaving his home at six in the morning lying on a mattress in a spring waggon he reached Calabogie station on the K&P railroad at noon and arrived at the hospital about 5 p.m.

Taken by Doctors around Oct. 20 1901 when Ben was healed and out of bed.



Bennie Stalker 2 weeks after surgery, Oct. 1901, SOURCE: JIM BREMNER

These events occurred in eastern

Ontario in September - October 1901. This account reveals much about the stark realities of rural Canadian health care a century ago, but at the same time, the amazing ability of the human body

This account reveals much about the stark realities of rural Canadian health care a century ago, but at the same time, the amazing ability of the human body to survive severe trauma and the abiding human desire to care for the sick.

to survive severe trauma and the abiding human desire to care for the sick.

At the heart of the story is young William Benjamin Stalker, who was born in 1891 and lived on a farm near Plevna. The clinical details of his

misadventure and life-saving surgery are preserved in the surgeon's report detailing the boy's accident and medical treatment in the January 1902 *Kingston Medical Quarterly*. For historians, Dr. W.G. Anglin's case study puts a human

face to the ancient hospital spaces and dry administrative reports that remain as historical evidence today.

After Bennie's all-day journey to Kingston General Hospital, he was

>> *Continued on page 7*



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MUSEUM HIGHLIGHTS



Congratulations, Gregory!

The 2010 Frontenac, Lennox, & Addington Science Fair, held 9-10 April. Gregory Borschneck, Kings Town School, was this year's winner of the Museum of Health Care's Special Award for the History of Medical Science with his project "Polio: A Canadian Perspective." We enjoyed viewing the projects and talking with the students this year, and we look forward to next year's fair!

2010 Dr. Margaret Angus Research Fellowship Evening Presentation



2010 Dr. Margaret Angus Research Fellow Sarah Xiao
(PHOTO COURTESY QUEEN'S JOURNAL).

On October 21, 2010 Dr. Margaret Angus Research Fellow Sarah Xiao, who recently completed her Master of Science (MSc) in Nursing at Queen's University, delivered a public presentation entitled *Torture or Treatment: Electroconvulsive Therapy* to a standing room only crowd at the Glaxo Wellcome Clinical Education Centre. Sarah's paper discussed the historical perspective of shock therapy, examined the uses and efficacy of ECT (particularly in the last 60 years), and considered how the medical profession envisions its use into the future. Congratulations, Sarah!

A Superb Summer!

By Catherine Toews, Museum Manager



LEFT: Volunteer Carol Page works in the MHC garden.



RIGHT: Summer family program participants show off the casts they created and decorated.

It was another wonderful - and action-packed! - summer here at the Museum, with increased visitor numbers and a variety of programs and events to keep us busy! Buoyed up by the skilled assistance of summer staff members Laura Ludtke, Morgan Copeman, and Nicole Belej-Corrigan, the Museum was a hive of constant activity! Highlights included:

- Visits from members of the KGH Nurses' Alumnae on Saturday, June 5. The nurses enjoyed a first look at our newly launched "What is a nurse?" video, and then had a chance to explore every inch of the Ann Baillie Building National Historic Site - a building which many of them once called home during their time in training.
- New family programs for children ages 6 & up in July and August. Kids (and adults!) had a blast creating and decorating casts, brewing and tasting medicinal potions, and carefully extracting

"organs" from "patients" made of Jell-O!

- Some much-needed tender loving care for the Museum's front gardens. Volunteer Carol Page donated her time, muscles, and supplies to this project, and the results were astonishing!
- For the second year in a row, the summer staff members had the opportunity to participate in a professional development Round Robin with other local museums. Student staff at each of the four host sites had 45 minutes to demonstrate their museum's programs and talk about their individual contributions.

...and that's just a sampling of the goings-on at the Museum in summer 2010! A huge thank you to all of the volunteers and staff members who gave their time to the Museum this summer. We simply could not have done it without you!

Dr. James Low receives First Capital Honourable Achievement Award



(PHOTO COURTESY QUEEN'S UNIVERSITY NEWS CENTRE)

Museum of Health Care Executive Director Dr. James Low was recently recognized for his outstanding volunteer efforts when he was presented with a First Capital Honourable Achievement Award from the City of Kingston on Canada Day, July 1. Dr. Low has been the Museum's volunteer Executive Director for almost 20 years.

Queen's University News Centre highlighted the volunteer awards in two news stories, and a multi-page profile of Dr. Low was also featured in the July 2010 edition of *Profile Kingston* magazine.

Museum Sinks its Teeth into Dental History

By Paul Robertson, Curator

Trial Dentures, Crawford Dental Collection, 010.020

The Museum of Health Care is excited to announce the arrival of Canada's premier dental history collection. A gift to the MHC from the Canadian Dental Association's Dentistry Canada Fund, this collection represents the most comprehensive cross-section of dental technology and practice in Canada over the past 200 years and greatly enhances our current dental holdings.

We are naming the collection after Dr. Ralph and Mrs. Olga Crawford to honour their more than 40-year 'labour of love' amassing and curating this extensive assemblage of artefacts and archives. Dr. Crawford began the collection as a dental student in the 1960s and originally used the objects

to decorate his office in Winnipeg. In 1997 the Dentistry Canada Fund invited the Crawfords to establish the Dentistry Canada Museum at the organisation's downtown Ottawa headquarters. After the closure of the museum in 2008, the DCF offered the Crawford Collection to the MHC.

The collection contains well over 1500 artefacts and documents. Included are dental chairs, units, cabinets, instruments and supplies, laboratory equipment, books, journals, and ephemera. Representing innovation and ingenuity, the Crawford Collection contains such items as an 1846 finger drill, circa 1912 portable dental chair, 1930s X-ray unit, 19th-century tooth keys for pulling teeth, a set of dentures

made of deer teeth, and modern mouth guards and helmets used to prevent sports injuries. We even have a plaster dental cast of the late Prime Minister John Diefenbaker's teeth!

Not since 2002 when we accepted the 4600-item University Health Network collection of 18th to 20th-century health care artefacts and archival materials (originally assembled by the Toronto Academy of Medicine) has the MHC been offered a collection of such size, scope, and quality.

The additional financial support of the Canada Dentistry Fund that accompanies the donation will assist with the housing and integration of the Crawford Collection into existing Museum holdings. We welcome Young Canada Works intern Sophie Malek who will begin to inventory, catalogue, and photograph the objects over the next six months. We are now planning future exhibits featuring the Crawford Collection to be shown in the Museum and on the website. Dr. and Mrs. Crawford have generously offered their time and expertise to curatorial staff as we work through the collection. Look out for future issues of the *BAILLIEWICK* where we'll describe what's new in dental history at the Museum!

Saying Goodbye

By Paul Robertson, Curator



Connie making a mannequin for the KGH Auxiliary exhibit, 2005.

Museum Volunteer Always Had a Story to Share

Museum staff mourns the loss of one of our long-time volunteers. Connie Cox passed away 5 June 2010 after a brief illness. Among her many talents was her ability to recount a tale to anyone who would listen.

A graduate of the Ontario Hospital School of Nursing (which later became Kingston Psychiatric Hospital), Connie maintained a long association with the institution. After retiring from the hospital, Connie volunteered at a number of places including St. Mary's of the Lake Hospital and the MHC where she helped with visitors, exhibit preparation, cataloguing, and odd jobs around the Museum. Connie liked activities that kept her active.

Connie's knowledge and experience became invaluable resources to curatorial staff during the creation of the first outreach gallery at KPH in 2000 and she played a particular role in the transfer of the extensive KPH collection of nursing and medical instruments to the MHC.

Connie loved people and fit well into the fabric of the MHC. She is missed.



Congratulations & Goodbye

Congratulations to Dr. Hassan Raiesi on his recent completion of a PhD in mechanical engineering at Queen's. A native of Iran, Hassan has been the Museum's collections photographer since 2007 under the university's work study program. Hassan's graduation also means that he will be leaving us at the end of 2010. We'll miss you -- thanks for all of your hard work and good luck in your future endeavours!

Nursing was the first designation to recognize the contributions of women by the Historic Sites and Monuments Board of Canada. The designation stated:

The Ann Baillie Building was designated because it commemorates the contribution of nurses and nursing to scientific medicine and to women's agency as health care professionals and because it speaks to the training and professionalism of nurses, to their social life, to the development of their unique culture, and to the emergence of leaders in the field of nursing.

Hospital-based apprenticeship schools provided training for student nurses, who in turn worked at the Hospital. The skills and sense of professionalism the young women acquired here were important in their subsequent careers.

The Ann Baillie Building was one of the first purpose-built nurses' residences in Canada. The building had a lovely setting on the south side of the hospital facing Lake Ontario with a large lawn sloping down to the water. The nurses' home became an integral part of the evolving hospital complex, providing nursing staff with comfortable accommodations and convenient access to the wards and operating rooms. The stately appearance of the Ann Baillie Building acknowledged the centrality of nurses to the institution and the status of nursing as a profession for women

Restoration of the Ann Baillie Building

The cornerstone was laid in August 1903, and the Home opened in April of 1904. The building, cruciform in plan, was built of random coursed hammer-dressed limestone. A monumental portico had two generous veranda levels, and four massive stone columns. A broad flight of entry stairs accessed the main double door entrance.

In 2001, a Conservation and Presentation Plan for the restoration of the building was developed with Parks Canada on the recommendation of the Historic Sites and Monuments Board. Phase 1 of the restoration began in 2004

Restoration and Re-adaption of the Ann Baillie Building

By Dr. James Low, Executive Director

and was completed in 2007.

This included: restoration of the weight bearing foundations of the building; renovation of level 0 with vapour barriers to protect the foundation; and a stairwell and elevator tower required by the Ontario Building Code to permit public access to the building and access for the physically challenged

The planning for Phase 2, the restoration and renovation of level 1,

is continuing in partnership with Parks Canada. This will include: restoration of the external wood work, doors and

windows; restoration of internal elements; and renovation of mechanical and electrical services. Part 2 is being staged as funds become available. Restoration of two rooms on level 1 was completed in the fall of 2008. Restoration of three rooms on level 1 will be completed this fall with funding from Parks Canada and the Trillium Foundation.

These restorations are essential if the Ann Baillie Building is to be available as a symbol of the importance of nursing to our society today and in the future

Re-adaption of the Ann Baillie Building

The Ann Baillie Building is one of 956 National Historic Sites in Canada; 167 administered by Parks Canada and the remainder by other levels of government or private entities. The Ann Baillie Building is owned and on the property of the Kingston General Hospital.

These symbols of our past must be preserved for future generations. In many cases, this will require re-adaption of the role of the building by government, institutions or private individuals. Thus it is also important that the Ann Baillie Building as a National Historic Site have

a valuable continuing role for society. The Museum of Health Care is ideal for this purpose. The Museum serves two roles:

1. A building that served the education of nurses is now being used for public education of the history and science of health and health care. To enhance public understanding of the history and science of health and health care is important because:

As health and health care become

more complex, it is vital that individuals acquire the skills they need to make decisions that will enhance their health and to

advocate for policies and practices that are needed for the improvement of health in our society. The public must understand the history of health care and the consequences for tomorrow of decisions made today.

"History gives perspective to the present and insight into the future".

History helps us understand the social attitudes and beliefs that have influenced health and health care through the ages. It provides the foundation for understanding modern day prevention and treatment of illness and political influences on health care policies.

"Much to learn from past accomplishments ... and mistakes."

2. This National Historic Site recognizes the role of nursing in our society today. Public understanding of the significance of this site is important to nursing and the role of women in Canada.

To this end the Museum of Health Care in partnership with the Kingston General Hospital is responsible for communicating the significance of this site to the general public. The professional staff of the Museum of Health Care is ideally prepared to assume this responsibility.

These restorations are essential if the Ann Baillie Building is to be available as a symbol of the importance of nursing to our society today and in the future.

WELCOMING NEW FACES



Laura Ludtke was this summer's Curatorial Assistant. When she was not down in 0010—the only air-conditioned room in the Museum—she

could be found in the Artefacts room researching patent medicines, digitally editing photographs, or compiling profiles for a new website features project. Laura holds an M.A. in Classics from Queen's University and returned in September to complete a second M.A. in English literature.



Morgan Copeman joined the Museum this summer as a Public Programs Assistant. In September she returned to Queen's as a fourth year Classics

major but continues to volunteer as a docent at the Museum. In the future she plans to go into museum studies. While her major is Classics, she entered Queen's as a Biology major and so she is also interested in the history of medicine. She was especially excited to work on the Ancient Civilizations education program teacher's kit, which combined the best of both worlds.



Richard Huang is working towards a Master's of Anatomy at Queen's University. He got involved with the Museum as a

volunteer docent because he believes health education is one of the most important aspects of our health care system, and what better way is there to educate ourselves about health care than to take a trip back in time and start from the beginning? When he is not telling people about health care's days of yore, he likes to go sailing, horseback riding, and even do some marksmanship!



Nicole Belej-Corrigan worked at the Museum as a Public Programs Assistant this summer and continues on as a volunteer docent. Nicole never thought

she'd get to handle amputation knives and real life (although very much dead) cadavers! She recently entered her fourth year at Queen's in History and Drama. She hopes to be accepted into a History graduate program in 2011. She loves to spend her spare time reading and watching movies.



Bani Falcon graduated from the University of Waterloo with a degree in Biomedical Sciences and is completing an MSc degree in the dept. of Anatomy

and Cell Biology at Queen's. Her research interests revolve around understanding the pathophysiology of recurrent miscarriage. Bani is thrilled to volunteer as a docent at the Museum. She enjoys communicating her passion for science and health care to children in fun and educative ways!



Nikki Scott recently worked with the Museum as a Curatorial Intern as part of a placement through Algonquin College's Applied Museum

Studies program. Prior to Algonquin, she studied History at Wilfrid Laurier University, with a focus on the First and Second World Wars. Nikki is very interested in medical history and greatly enjoyed working with the Museum's amazing artefacts. She hopes to pursue a career in the collections management and exhibition field so that she can share her passion for history with others.



Sarah Xiao is the Museum's 2010 Research Fellow. Her project focuses on the historical evolution of electroconvulsive

therapy (ECT), the uses and efficacy of ECT, and the future of ECT in medicine. She recently completed her Master's degree at Queen's University on weight management among persons prescribed antipsychotic medications. With her background in nursing and mental health research, she is fascinated with the historical contexts of psychiatry and the evolution of shock therapy.



Sophie Malek is very excited to join the Museum as a Curatorial Assistant. She looks forward to cataloguing and photographing

the recently acquired dental collection. Sophie studied Medieval and Renaissance history at the University of Toronto, and was fascinated by a course on the history of medicine. She holds an M.A. in Public History from the University of Western Ontario and hopes to continue working in museums. She will probably not be visiting the dentist while working on this project!



Jenny Brown is the Museum's new Administrative Assistant and will share the office burden with Museum Manager Catherine

Toews. Jenny graduated from the University of Ottawa with degrees in Fine Arts and Communication, and has since done a variety of work in the cultural sector, with previous experience at artist-run centers and the National Gallery of Canada. She is thrilled to be surrounded by such bizarre and incredible artefacts and bizarre and wonderful colleagues. Jenny is always happy to help you out, whether you're renewing your membership or have a question for the Museum; she'll likely be your first point of contact if you call or visit. She hopes you will drop in and say hello!



Special events volunteer **Kelly Buckholtz** is a high school student with a passion for science, books, and obscure trivia. She has spent several summers at her grandparents' house

performing odd chemistry experiments in the backyard with her grandfather and reading books or volunteering at animal shelters with her grandmother. Some of her favourite books as a young child were the Magic School Bus series, where she gained an early interest in science. She hopes to attend the University of Guelph and become a veterinarian when she graduates.



Danielle Bentley recently joined our team of volunteer docents. As part of her supportive role she helps out with the implementation of

many of the Museum's summer, as well as year round, programs and tours. Currently entering into the second, and final, year of her Masters degree in Anatomical Sciences, Danielle really enjoys getting children genuinely excited about learning, especially learning all about their own bodies!! Her favourite muscle in the body is the popliteus muscle and she hopes to one day teach her very own university level musculoskeletal anatomy course!

Today, we often attribute feelings of fatigue and exhaustion to the pace of modern life; however, these feelings were first identified and treated over a hundred years ago. While photographing artefacts from the Museum's pharmacy collection, I came upon two unique items that tell an interesting story about the origin and development of fatigue-related illnesses in the 19th century. Both **Wood's Phosphodine** and **Bitro-Phosphate** are symptomatic of an unregulated pharmaceutical system in which manufacturers were not obligated to list their compounds and ingredients.

At the time, many patent medicines, also known as *nostrums*, purported to provide 'cures' for general fatigue and nervous exhaustion. This prevalence reveals an obsession with preventing the natural decay and aging of the body that dominated 19th-century medical diagnoses. The unregulated promotion and consumption of *nostrums*, marketed to a public and medical profession naïve about the diseases they purported to cure, accompanied this obsession.

Wood's Phosphodine was marketed in the 1880s-90s as "the Great English Remedy" in newspapers and periodicals across North America as a cure for:

"all forms of Nervous Weakness, Emissions, Spermatorrhea[,] Impotency, and the effects of Youthful folly and the excesses of later years."ⁱ

The blue and gold cardboard packaging from our collection indicates that **Wood's** was also 'specially' recommended for: "Constipation, Deranged Digestion, Inflammation of the Kidneys ..." (and here the label fades, as if to suggest the great number of diseases it purports to cure).ⁱⁱ

This particular 'preparation' originated from the Cook Medicine company in Toronto and contained "1/4 Grain Powdered Hyoscyamus Leaves" in each dose—presumably the active ingredient. *Hyoscyamus niger*, also known as henbane, belongs to the

**WOOD'S PHOSPHODINE.
THE GREAT ENGLISH REMEDY.**

Used for 35 years by thousands successfully. Guaranteed to cure all forms of Nervous Weakness.



all the effects of Youthful folly and the excesses of later years Gives immediate strength and vigor Ask

Nostrums and Neurasthenia

By Laura Ludtke, Curatorial Assistant

nightshade family.ⁱⁱⁱ Known for its psychoactive and anaesthetic properties, ingesting henbane can, in some cases, cause vivid hallucinations and, in extreme cases, even lead to death.

Bitro-Phosphate was an equally ineffective 'cure,' though its constituents were less harmful. Recommended for similar nervous conditions, **Bitro-Phosphate** purported to cure:

"neurasthenia, nervousness, irritability, depression, brain-fag,^{iv} insomnia, debility, excessive thinness, general weakness, lack of physical energy, and the usual ailments arising from nerve weakness and tissue wastage."^v

When the American Medical Association tested **Bitro-Phosphate** in the early 1900s, it discovered that it was "essentially a 5 grain tablet of calcium glycerophosphate," a compound now found in most toothpaste.^{vi} While early tooth decay was considered a disease of modern life, calcium glycerophosphate could hardly be considered an effective treatment for the long list of symptoms **Bitro-Phosphate** claimed to cure.

During this period, consumers and medical professionals were unsure about the relationship between the body and the mind, as they were only beginning to understand the difference between physiological and psychological

disturbances. This misunderstanding is particularly evident in the prevalence of *neurasthenia*, best described as nervous exhaustion.

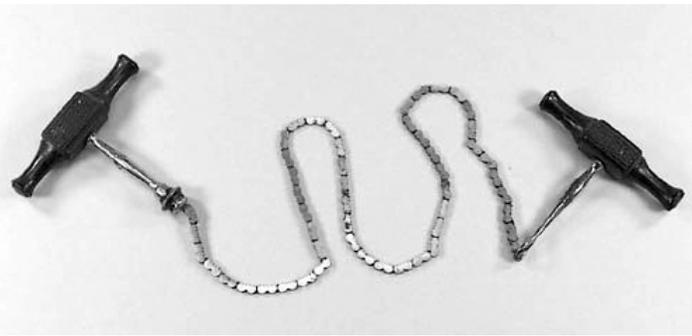
Neurasthenia was first diagnosed and treated by the American neurologist, George Miller Beard at the end of the 19th century. At the time, physicians believed its somatic origins were caused by a "functional lesion of the nervous system," a microscopic physical injury precipitated by the increasing demands of the modern world.^{vii} As the advances of the modern world requisite to this period of rapid innovation threatened an individual's life energy, modern life therefore depleted an individual's limited reserves of energy with its chaos, speed, and excitement.

For Beard, certain elements contributed to the increased pace of modern life, including "the steam engine, the press, the telegraph, the sciences, and the mental activity of women," all of which represent the most consequential advances of this period.^{viii} While *neurasthenia* was more frequently diagnosed in those considered the most susceptible to the threat of these

As the advances of the modern world requisite to this period of rapid innovation threatened an individual's life energy, modern life therefore depleted an individual's limited reserves of energy with its chaos, speed, and excitement.

innovations—women and the wealthy and privileged members of society, in reality, the symptoms of *neurasthenia* were diverse and imprecise, presenting unpredictably in patients. Physicians

>> *Continued on page 7*



Gigli saw for cutting bone, MHC COLLECTION 1976.6.37

admitted to the St. Andrew's Ward for children in the upper storey of the Watkins Wing. Dr. Anglin describes in detail the severity of the boy's wounds and the extreme deterioration of his arm and upper extremity. The next day we learn that Bennie was wheeled into the recently constructed Fenwick Operating Theatre. Complete amputation was the only option if the boy was to survive – grim, but effective

treatment. News reports of the emergency amputations required to save lives of victims of the January 2010 earthquake in Haiti spring to mind.

In his account, Dr. Anglin references an array of instruments and medications now found at the Museum (Gigli saw, aneurysm needle, pressure forceps, chloroform, hypodermic, strychnine, digitalis). To a curator, these real-life references

add invaluable context and relevance to our collections.

The doctor's description of Bennie's aftercare says much about social services of the day: "Our readers may be interested to know that having but one parent living, the little fellow has been admitted into that excellent institution the Orphans' Home in this city."

Dr. Anglin recorded that Bennie was an interesting patient and always quick and bright with his answers. He recounted the boy's encounter with Dr. Alan Manby, the physician accompanying the Duke and Duchess of Cornwall and York (King George V and Queen Mary) while on their 1901 cross-Canada tour. During a visit to KGH Dr. Manby told Bennie that he would be unable to visit him again because of the

great distance the doctor had come to be there. Bennie's quick and unexpected response is reported to be, "Well, I came nearly a hundred miles myself to get here." How medical journal articles have changed.

After his amazing recovery, Bennie grew up to have a full and productive life, first as a travelling ventriloquist and later an itinerant photographer. He married and had five children. After Bennie's death in 1940, his wife remarried and had a son named Jim Bremner. I thank Mr. Bremner and his wife Marianne who spent ten years researching Bennie's fascinating story for bringing it to our attention. This is what helps to make history real and bring museum collections to life.

Nostrums & Neurasthenia... *continued from page 6*

prescribed a variety of treatments and cures for their patients' fatigue—rest-cures, electrotherapy, and hydrobaths^{ix}—which provided temporary relief and proved unreliable at best.

Ultimately, *neurasthenia* soon became an outmoded diagnosis as the field of psychology developed. Its physical symptoms were at best a "cacophony of complaints [...] without any observable organic lesion."^x However, *neurasthenia* marks the first time society and civilization were considered the pathological influence of a disease in modern times. *Neurasthenia* precipitated the legitimacy of fatigue-related illnesses, without which we would not be able to identify nervous exhaustion and its host of symptoms such as chronic fatigue syndrome, sleep disorders, depression, anxiety disorders, and hypochondria.

Sources consulted:

- i. "Wood's Phosphodine: The Great English Remedy," *St. Paul Daily Globe*, April, 25 1891, 8.
- ii. MHC Collection (1977.12.72).
- iii. Timothy Field Allen, *The Encyclopedia of Pure Materia Medica*, vol. 5 (Philadelphia: F.E. Boericke, Hahnemann Publishing House, 1889), 25ff; Margaret F. Roberts and Michael Wink, *Alkaloids: biochemistry, ecology, and medicinal applications*, (New York: Plenum Publishing Co., 1998), 31ff.
- iv. An outdated term for mental exhaustion
- v. MHC Collection (1980.18.77); Arthur J. Cramp, *Nostrums and Quackery*, vol. 2 (Chicago: Press of the American Medical Association), 1921, 493.
- vi. Cramp 493.
- vii. Rafaela Teixeira Zorzaneli, "Fatigue and its disturbances: conditions of possibility and the rise and fall of twentieth century neurasthenia," *História, Ciência, Saúde—Manguinhos*. 136.3 (2009): 7.
- viii. George Miller Beard, *A practice treatise on nervous exhaustion (neurasthenia)*, (New York: William Wood, 1880), 176. This last element—"the mental activity"—is perhaps Beard's most chilling proposition, especially since *neurasthenia* was more prominent in women, who were often considered too delicate for the modern world.
- ix. Anson Rabinbach, *The Human Motor: Energy, Fatigue, and the Origins of Modernity*, (Berkeley and Los Angeles: University of California Press, 1992), 192.
- x. Rabinbach 154.



New offsite exhibit

Picturing the Body: Medical Art as Teaching Tools is the Museum of Health Care's most recent offsite exhibit, produced in partnership with the Royal College of Physicians and Surgeons of Canada and displayed in the organisation's Ottawa headquarters. Drawn from our collections, this exhibit showcases highly realistic wax and plastic models produced between 1850 and 1970, which were used for medical education.



Saturday, February 19 ● 2:00 to 6:00 pm

You are cordially invited to the Museum of Health Care on Saturday, February 19th, 2011 for a lighthearted gala that is sure to restore your **strength and vigor**. Patent medicine-inspired cocktails will bring the **bloom of health** to the cheek and delight to the heart. Activities, prizes, musicians, live leeches, and turn-of-the-century reenactors are sure to **lift your spirits**. Immerse yourself in a veritable curative bath of medical history while expressing your support for the Museum. Proceeds to benefit the educational and public programs of the Museum of Health Care.

Total relief guaranteed with just one event! TICKETS GO ON SALE DECEMBER 1, 2010.

CALL (613) 548-2419 TO RESERVE YOUR PLACE TODAY! CHARITABLE RECEIPTS FOR TICKETS PURCHASED WILL BE PROVIDED FOR THE MAXIMUM AMOUNT ALLOWED BY THE CANADA REVENUE AGENCY.

THE NOSTRUMS AND NIBBLES GALA
An amusing afternoon of cocktails, cures, and consumption!

Contagious Diseases During the 19th Century: Kingston, a Canadian Case Study

A Lecture by James A. Low



Thursday, February 24 ● 7:00 pm

AT THE GLAXO WELLCOME CLINICAL EDUCATION CENTRE (LOUISE D. ACTON BUILDING, 31 GEORGE ST., QUEEN'S UNIVERSITY) FREE ADMISSION REFRESHMENTS TO FOLLOW AT THE MUSEUM, 32 GEORGE ST.

The 19th century was a great transition period in the knowledge and understanding of contagious diseases, and with this new understanding came many changes to diagnosis and treatment. James Low's presentation will examine the state of disease prevention and control at the beginning of the 19th century, the degree to which contagious diseases occurred in Kingston throughout the 19th century, and the local community's response to these issues. The presentation will demonstrate the level of control that had been achieved at the end of the 19th century, and how it was expressed in Kingston between 1900-1920.



Teddy Bear Hospital

Family Day Program
for Ages 3 to 8

Monday, February 21

10:30 am to noon OR 1:00 to 2:30 pm

AT THE MUSEUM (32 GEORGE ST.)
\$5/CHILD (NO CHARGE FOR ADULTS)
PRE-REGISTRATION REQUIRED

Bring your teddy bear or other special stuffed animal to the Museum of Health Care this Family Day! Our trained teddy doctors and nurses will be on hand to examine and treat your beloved toy's bumps, lumps, and bruises! Learn, laugh, and discover why doctors and hospitals aren't so scary after all! The event will include a special storytime, tasty snacks, and a hands-on craft activity. Suitable for ages 3-8, with adult accompaniment. Pre-registration required. To register call (613) 548-2419 or e-mail museum@kgh.kari.net.

(DRAWING BY LISA RAE SWAN)

**Temporary Gallery Closure for Renovations and Restorations
November 8, 2010 to January 31, 2011**

The Museum of Health Care's galleries will be temporarily closed to the public for renovations and restorations from Monday, November 8, 2010 to Monday, January 31, 2011. Our administrative offices will remain open during the closure. We will continue to accept bookings for in-Museum education programs and group tours from February 1, 2011 and beyond. We are also pleased to offer a variety of in-classroom educational offerings for schools and other groups throughout the renovation project. Call (613) 548-2419 for more information.

We are proud to be developing a new Children's Gallery-based learning centre devoted to children and their families/caregivers. The closure this winter will allow time for necessary renovations and restorations to the spaces needed for the Children's Gallery. The renovation and restoration will set the stage for the new gallery, to be opened at a later date.

The Museum of Health Care is grateful for the support of the Ontario Trillium Foundation, Parks Canada, and other individuals whose gracious awards have made this renovation and restoration project possible. The Museum's galleries will be closed only as long as absolutely necessary. We apologize for any inconvenience this may cause.