

TEACHER KEY

Unit 5: Treatment

Activity 2: Write a Letter home from the ‘San’

Description:

Students are asked to explore the Treatment section of the exhibition, to imagine what it may have been like being treated for tuberculosis in a Sanatorium in the 1930s, and to compose a letter to a friend or family member as though they were a patient in a Sanatorium. Alternatively, students may be asked to compose a diary entry. Topics addressed might include their daily activities, treatments, hopes and fears, or friendships with other patients.

Time:

Exhibition review: 20 min

Discussion: 10-15 min

Written composition: 45 min

Objectives:

- To demonstrate comprehension of life in a sanatorium.
- To creatively express knowledge using appropriate vocabulary and writing style.

Curriculum Links:

Reading	1. Reading for Meaning	1.4 demonstrate understanding of a variety of texts by summarizing important ideas and citing supporting details
		1.6 extend understanding of texts by connecting the ideas in them to their own knowledge, experience, and insights, to other familiar texts, and to the world around them
Writing	2. Using Knowledge of Form and Style in Writing	2.1 write longer and more complex text using a variety of forms

Materials:

Online exhibition Fighting for Breath: Stopping the TB epidemic :

<http://museumofhealthcare.ca/explore/exhibits/breath/>

Pen and Paper

Procedure:

1. Ask students to read through the exhibition section Treatment – Rest Therapy – Sanatoria.

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2. Briefly discuss key themes, such as daily routines, treatments, or social roles (patient, friend, physician), with the class.
3. Ask each student to imagine that they were being treated for tuberculosis in a Sanatorium in the 1930s in Canada. What would a day in their life in the San have been like? How might the world look like to you? What are you missing being in the Sanatorium? How are you treated by fellow patients? By nurses?
4. Have each student write a letter to a friend or parent explaining their 'news' (activities, treatments, hopes/fears) as a Sanatorium patient.

Background Information:

Sanatoria

The idea that climate could improve the health of **consumptives**, an idea that had been around since the time of the Ancient Greeks and Romans, set the foundation for the creation of sanatoria. After himself being cured by the invigorating air of the Himalayas, Hermann Brehmer established a centre in Prussia in 1854 where **consumptives** could benefit from exercise in the open air. In the 1870s another German, Peter Dettweiler, opened a sanatorium but ordered his patients to stay still and rest. Yet another philosophy was taken at Dr. Otto Walther's sanatorium in the Black Forest of Germany; he insisted that overfeeding would build the body's resistance, and instructed his patients to consume pints of milk, cheese, butter, and fatty meats. Several sanatoria were also established in the Swiss Alps, where it was believed that the altitude and brisk air would bring improved health to the sick. The ideas underlying these sanatoria, namely rest, fresh air, and regulated diet, would influence treatment regimes at sanatoria in North America.

Inspired by such centres, and his own improvement in the Adirondacks, Edward Livingston Trudeau opened the Adirondack Cottage Sanatorium in 1885, the first of its kind in North America. The Cottage San was based on open-air treatment, with six to ten patients living in each cottage, spending much of their day resting outside. Patients followed a rigid schedule of rest, eating, and small labours.

Influenced by the Adirondack Cottage Sanatorium, Mr. W. J. Gage proposed the first institution for **consumptives** in Canada in 1893; however, the Muskoka Cottage Sanatorium only opened in July 1897. Shortly thereafter, in 1902, the Muskoka Free Hospital for Consumptives was opened to care for patients unable to afford the cost of a dollar-a-day facility. By the First World War the number of sanatoria across Canada had increased to thirty, with 1800 beds, across seven provinces.

Kingston provided care for TB patients through several institutions over the years. The Sir Oliver Mowat Memorial hospital opened in 1912 as the first sanatorium in Kingston, but it closed in 1925 due to financial problems. Although the Kingston General Hospital ran a tuberculosis ward for many years, Ongwanada opened as a sanatorium in 1944 and operated as such until 1965.

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In the early days, typical stays in the sanatoria lasted only three to nine months, but by the 1920s, as society became increasingly concerned with isolating the contagious, stays were often between two to five years.

Life in “the San” was routine. A balance between rest and exercise was sought, but many patients found the hours sitting still tedious and boring. Some tried to liven things up by sneaking out of the San at night or pulling pranks on other patients. For the most part, though, the rules were followed and those “taking the cure” were made to rest upwards of five hours a day.

Rest hours often took place outside, combining fresh air, rest, and [heliotherapy](#) treatments. Early sanatoria treatments often had patients sleeping on verandas or in tents to maximize patient exposure to fresh air. Many sanatoria required patients to sunbathe for several hours a day in the belief that the sun would improve their condition.

Also important was sanatoria’s ability to educate patients on hygiene to stop the spread of TB and to provide occupational training. As sanatoria grew and expanded over the first half of the twentieth century, they added recreational halls, craft rooms, barber shops, libraries, and schools to help make stays more bearable.

Sanatoria began to decline in the 1950s and 1960s after the discovery of several drugs effective against TB.