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Annual Report of the Salem Association for the Prevention of Tuberculosis

Salem Association for the Prevention of Tuberculosis

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ANNUAL REPORT

OF THE

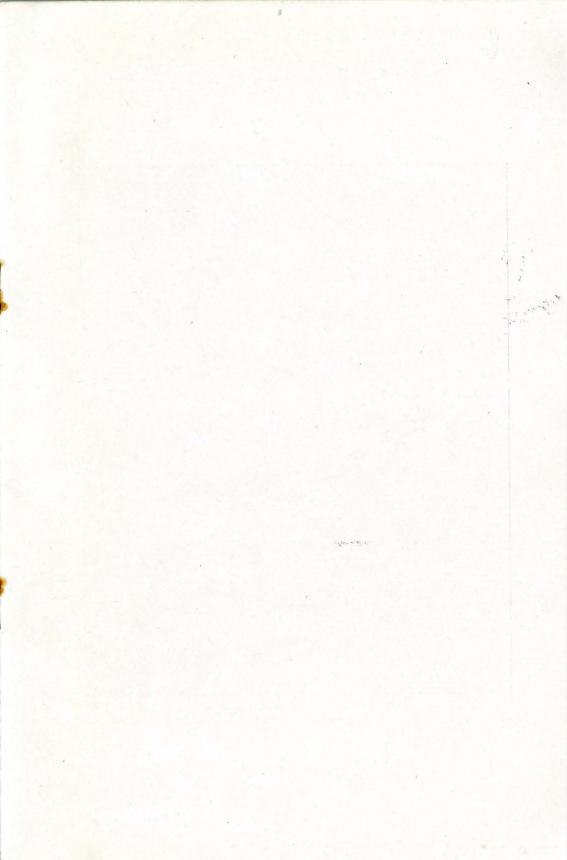
SALEM ASSOCIATION FOR THE PREVENTION OF TUBERCULOSIS

NOVEMBER, 1916

INCORPORATED JANUARY, 1914

Office Hours Daily 1.30 to 5 P. M. Dispensary Hours Wednesday and Saturday, 1.30 to 3 P. M. Friday, 7 to 8 P. M.







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DISPENSARY OF THE ASSOCIATION

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Printed at the Industrial School for Crippled and Deformed Children 241 St. Botolph St., Boston. It has been the intention of this Association since its beginning in 1907 to conform in every possible way to the general policy of the state and country regarding the treatment of tuberculosis. This disease, more than any other communicable disease, requires time, time, and again more time to combat the various problems it involves. For years this Great White Plague has been continually, unrelentingly pursuing its destructive course, claiming its victims in the best years of their lives.

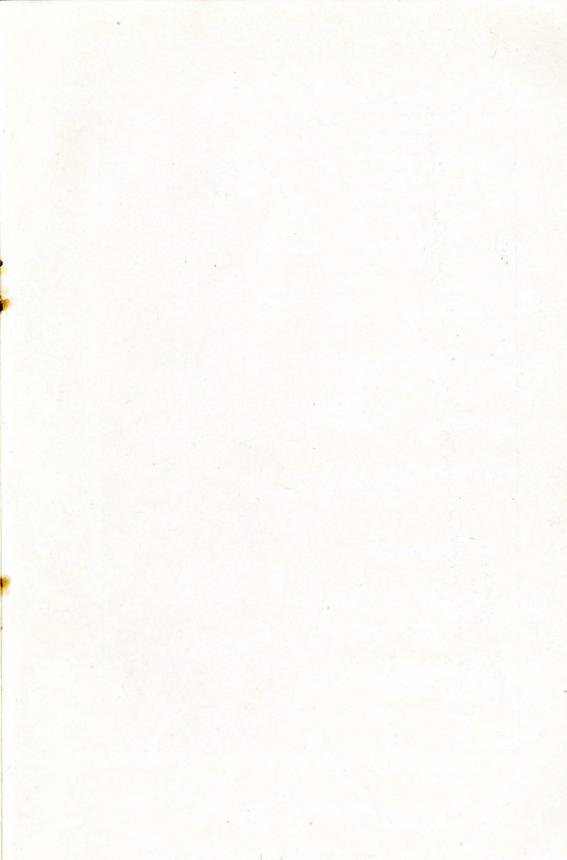
It is already a known fact that nearly all deaths from tuberculosis occur between the ages of fifteen and forty-five, a most productive period of a person's life. To combat this disease seems simple and easy, and so it would be easy, if we had in our power the means of controlling ignorant, careless and wilful consumptives. Nevertheless, this can be done in time.

When I look back on the six years of my service with your association and see what has been accomplished all over the world, I am of the opinion that the immortal Pasteur is right when he says, "The elimination of tuberculosis from this world is possible."

THE DISPENSARY

The term Dispensary itself is quite significant when we realize that our Dispensary is the place from which advice, diagnosis, and medical aids are dispensed to the patients.

The Dispensary is the centre upon which most of the winter's work is focused. It is here that the diagnoses are made; where many of the early and suspicious cases are discovered soon enough to save the life of the patient himself, perhaps, and in time to safeguard the family against infection; where arrangements for sanatorium treatment are made, and, in fact,





DAY CAMP, FORT LEE

a place where the patient can learn what is necessary to know about tuberculosis. Provisions are also made at the Dispensary for the patient during the interval that he may be waiting for admittance to a sanatorium.

The medical and social records of each patient are here on file; and, in fact, all other data pertaining to those under our supervision.

With our splendid new quarters in the Donahue Building, the Dispensary work is much more simplified, for we now have adequate accommodations for clinical examinations as well as for clerical work, and a splendid waiting room for the patients.

We are very happy to say that our Dispensary now ranks first in the State, according to the statistics of the State Health Department, and I feel that I am justified in saying that the Salem Dispensary is living up to the standard which the State Department of Health has set for us.

We realize more each day, however, how much of this credit for the success of the Dispensary belongs to the physicians of the city who have co-operated with us. I also wish to express my appreciation to those who gave so generously to the Dispensary during the year, sending clothes, books, games, and other things.

HOME VISITING

The rôle of the visiting tuberculosis nurse in home visiting is a most interesting and yet rather a varied one.

As you already know, in our work the keenest of supervision must be kept on all of our patients. There are some patients who are conscientious and unselfish enough to observe the instructions of the nurse, but there is a large percentage, who are known as the incorrigible consumptives, who demand most of our time and efforts. It is this class whom we must watch and for whom we must be ever on our guard. No matter how fruitless our endeavors may seem for the first few visits, it is our work to preach fresh air, open windows, hygiene, sanitation, good diet, clinical examinations, etc.

To gain the confidence of the patient himself is one of the hardest tasks which the nurse has to confront; for, as you know, it is not always easy to encourage a patient for whom you know there is little hope and who himself is suspicious as to his chances for recovery. This confidence in the nurse and in her instructions comes alone through sympathy with the patient and by gaining his trust. Having once gained his confidence, however, we are sure of his co-operation, and our work with the family is comparatively easy.

It is here with the education of the family in regard to hygiene, sanitation of the home, importance of clinical or physical examinations, etc., that our work in the home begins. In most cases we find that it does not require much effort, but in others and usually in the cases where infection is liable to spread, it is no easy task to convince the family of this obligation to themselves and to the community.

I am happy to say that the new homes where a great many of our patients are now housed have certainly raised their standard of living.

THE DAY CAMP

After a very successful four months, the Day Camp at Salem Willows closed after its twelfth successive year. Each year the attendance at the Camp has gradually increased, and this year we have been able to keep as many as sixty-four patients at one time. The average attendance for the summer has been fifty-four, which shows an increase over the average of any of the preceding summers.

The types of patients at the Camp this summer have been varied, and many different forms of tuberculosis have been

treated : such as Pulmonary Tuberculosis, Tuberculosis of the Bone, Tubercular Glands, etc.

Despite the rather discouraging wet weather during June, we were able to hold all of our night patients, but more than ever did we realize the necessity for permanent shacks for patients taking whole time treatment. It is very evident that with one small building it was rather difficult to cook, dry clothing and do various other things for the night patients who were remaining. But in spite of all the little discomforts, our patients stayed through the rainy spell, and none seemed to have suffered from colds or other illnesses.

As the summer advanced more patients applied for whole time treatment, and, by the end of August, we were accommodating twenty-two night patients, some of whom were quite ill and required almost constant care.

Class work in English and Hygiene was carried out very successfully at the Camp this summer, and we feel that very good results were accomplished. Along with our regular class work we make it our regular endeavor to establish discipline in the dining room. And to teach good table etiquette, although by no means an easy task, became a very interesting one; for some of the children who had, as far as we could see, known only their ten fingers as table silver, soon found out the real use of knives, forks, and spoons.

This summer the guest-book showed a very large increase of visitors over last year. Many of these were members of our Association, neighboring Boards of Health Workers, and other friends. During August two large Conferences were held at the Camp. One was the North Eastern District of Public Health Nurses. This Conference was very well attended, nurses being present from almost every town and city in the State. The nurses were entertained at the Camp in the morning, and then were given a drive in automobiles along the North Shore. A clambake was then served at the North Shore Babies' Hospital, where the nurses were entertained for the rest of the

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afternoon. The Conference itself was a very successful one, and we feel that the publicity of the Salem Day Camp was heralded far outside the city. The results of the Conference were that two other Day Camps were started in the State, and also two other cities are planning to start them.

Another very important Conference was that of the Massachusetts Board of Health Association. This Conference was also held at the Day Camp, and proved to be a very successful and valuable one for those who attended.

Our little library for the patients was very well endowed this year with magazines and books given by friends, and we take this opportunity to thank those who contributed. Books and reading matter of almost every kind mean more to the patient than perhaps most of us realize. One can readily understand how much literature is in demand when patients are taking from eight to ten hours rest every day. Besides magazines and books, many of our friends donated fruit, ices, games, and doll clothes for the children, and delicacies for many of our very sick. All of these were greatly appreciated.

I wish to add that I think we are justified in saying that each patient left camp in an improved condition. Many of them ready for school work, others who had been built up so that their condition was improved enough for them to enter Rutland or other Sanatoria for the winter. We also feel that the Night Camp is not only an addition, but from the results shown by those patients taking whole time treatment, we realize that it is a necessary addition to the welfare of our preventative work.

CO-OPERATION WITH CITY AND STATE OFFICIALS

Our success is not alone due to our own activity, but is largely due to the co-operation of City and State Officials. To the Salem Board of Health we are largely indebted. Each year as we have taken on more work in this campaign against tuberculosis, the Board has assisted by assuming with us our added responsibilities. The dinners supplied for the camp this year, have been not only generous, but well cooked. As in former years, we have been supplied with sputum cups and disinfectant. Its teams have been at our disposal a great deal, carrying equipment from our office to the patients' home, and transporting patients to and from the bospital.

The Street Department has been generous in giving men to assist in making repairs at the Camp, also the use of its teams at various times.

To the Superintendent of the Alms House, who has transported our meals from the hospital to the Camp every day the four months we were open, we are greatly indebted.

The State Department of Health has been especially active the past year, and has in many ways been of great assistance to us. Its Conferences, which were held together with the Boston District Nurses' Association every month during the past winter, have enabled us to visit many institutions and dispensaries that are doing practical health work, and hear speakers on all subjects pertaining to tuberculosis. These Conferences have afforded us the opportunity to meet other people who are doing the same work, and to discuss with them ways and means of improving our own.

CARNATION DAY

The first Saturday in May has now been permanently established as Carnation Day. Although the weather the early part of the day was anything but ideal, it did not interfere with the workers being on the street as early as usual, selling their pretty carnations. The merchants, the press, automobile owners, the Electric Light Co., the banks gave their ready assistance. The luncheon at Dr. Edward L. Peirson's netted a larger sum than any previous year. The total sum received on Carnation Day was \$3700.

The sale of Red Cross Christmas seals during the Christmas holiday season of 1915 proved a very successful one, not only in Salem, but all through the country, and it seems that this is an evidence of the fact that the sale of R. C. S. seals, together with the knowledge of the tuberculosis campaign, must be growing everywhere. The total sale last year netted \$176.18 for Salem.

We earnestly hope that the receipt from this year's output of seals will be as successful, and even more so during the holiday season.

In conclusion:

After six years of active work for your Association, I am convinced that this whole problem centers about just one thing education — and education must continue in the home, in the schools, in the factories, before any rapid results are reached in the extermination of tuberculosis. This is not a new or startling opinion, but is precisely the same view held by all workers doing practical tuberculosis work in this country. I wish to express to the friends who have been kind to this Association my deep appreciation. To you, the Directors, and members, I express my gratitude for your constant and ready support in all things for the best interest of the Association, without which my efforts would have been wholly useless.

> Respectfully submitted, E. JANET SHERRY.

STATISTICS

Continued from previous year	212	Cotton mill	59
Not T. B.	67	School children	59
Advanced	12	Not able to work	15
Moderately advanced	40	Clerk	2
Incipient	46	Laborer	I
Bone cases	2	Homework	- 5
Suspicious	36	Shoe factory	4
Arrested	9	Stenographer	2
		Danvers' Electric Light	I
NT	212	Wilkins' Paste Shop	. I
New patients examined	139	Odd jobs	I
Not T. B.	51	Dye shop	I
Advanced	7	Laundry	3
Moderately advanced	IS	Waitress	I
Incipient	15		1 39
Bone cases	Ĩ	Institutional care	
Suspicious	39		
Died	8	State Sanatorium, Rutland	10
T. B. glands	I	State Sanatorium, Westfield	2
Pott's Disease	2.	Salem Hospital	33
	139	Mass. General Hospital	2
New patients referred by	55	Salem Board of Health Hos-	
Physicians		pital Cinta Hamital	35
Out of Town Hospitals	44	Danvers State Hospital	I
Nurses	4	Total number of new patient.	s 82
Friends	41	Instructive visits to homes	
Board of Health	4 2	Instructive visits to homes Business calls made	1,484
Patients applied	42	a second s	1,822
Salem Hospital	42	Total	3,306
		Calls made to the office	1,957
T . 1 1 1 (C)! 1	139	DAY CAMP	
Total number of Clinic			
Examinations	334	Number of days opened	
Total number of cases		June 1, 1916, to Oct. 1, 1916	123
reported at Clinic	194	Number of patients admitted	63
Total number of Visiting		Male, 35; females, 28	
Cases	351	Number of patients under 15	
Number of deaths from		years	39
October 1, 1911, to		Average attendance	54
October 1, 1912	59	Loaned to patients	
Number of deaths from		Blankets	66
October 1, 1915, to		Chairs	11
October 1, 1916	39	Cot beds	3
The death rate has decrease	ed in	Mattresses	3
five years $\frac{1}{3}$.		Screens	4
Occupations of new patients		Tents	5
Housewives	10	Tent floors	2
Children at home	27.	Rubber blankets	14
Leather worker	3	Rubber rings	4
Beather worker	3	and the second se	4 1 1 1 1

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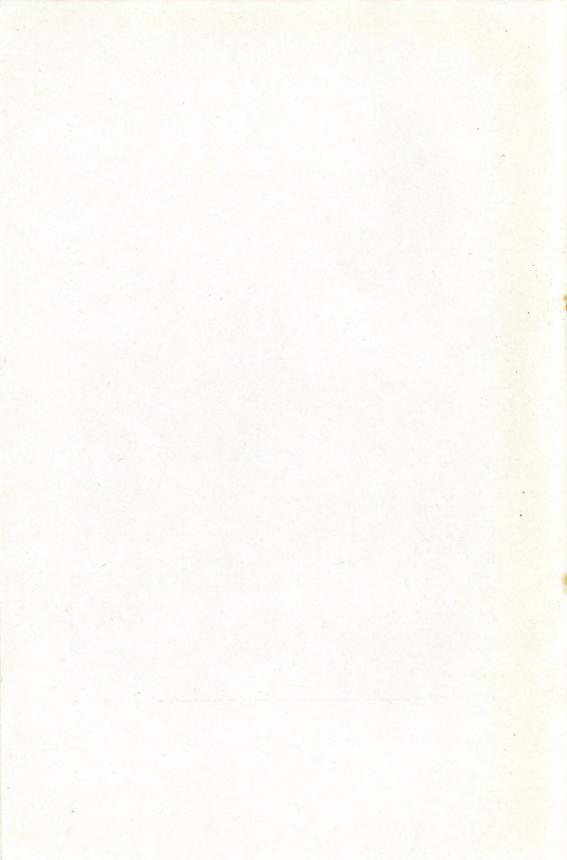
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