

THE HERITAGE OF SIMPLE BEGINNING

Hospitals Combine Technology, Human Values

Dr. W. M. Peck, former associate superintendent and medical director of the North Carolina Sanatorium at near-by McCain, left recently for Raleigh to assume a position with the State Department of Public Health. He had resigned from the State hospital post effective the first of this month. In an article published last year, Dr. Peck commented on the past and present treatment of tuberculosis, revealing interesting information about the early operation of the hospital at McCain and paying tribute to the pioneer patients and physicians there, nearly a half century ago. At this turning point in Dr. Peck's career and in view of his wide acquaintance in the Sandhills, the article is of special interest at this time:

The last of the great private sanatoria has closed and the burden of controlling tuberculosis now rests on tax-supported institutions. Those great private institutions, for which the word "sanatorium" was originally coined, were constructed about the turn of the century, flourished brightly as purveyors of climate and hope and leadership; and then slowly declined in importance as increasing intricacy and expense of treatment outpaced their resources as well as the resources of their patients impoverished by disease.

Somehow the magic of distant, inaccessible places began to fail and so did the idea of health-

seeking at spas or sanatoria based on the spa principle. Thus the closing of Trudeau Sanatorium—just as the closing of private Asheville sanatoria 15 years or so ago—points up the reality of modern therapy: an effective sanatorium today must be a complex and highly organized chest hospital, with special emphasis on laboratory, X-ray, surgical and consultation services; treatment has become rational, scientific and demanding, and though it has lost some of its pastoral charm and quaintness, it has gained tremendously in achievement.

It is this evolutionary process, of this moulding from spa to chest hospital, which gives meaning and justification to the expansion program of our own State Sanatorium System, and through the years the innovations which accelerated this process have become the important historical markers.

Much of the drama and excitement came in the early years when hope and courage, just as the mortality rate, were boundless; so let us reflect on the manner of our own spa-like spawning.

Primitive Affair
Our first State sanatorium came into being in 1908 as a poor man's spa. Built on a sandhill in deforested wasteland of broom-sage and huckleberry, this first Sanatorium was a primitive wooden affair. Patients slept on open porches exposed to the weather, and the central meeting rooms were heated only by fire-

Even so, the facilities for proper treatment, as then visualized, were all present: fresh country air was unlimited, food was good and there were miles of space for exercise. Among the Nation's public sanatoria this must have rated high although in retrospect it seems little more than a brave new idea in a shanty.

There were familiar sights and sounds and emotions that former patients recall fondly and with amusement: the smell of the smoking oil lanterns that nurses carried along the windy porches, the thud of hotwater jugs—pigs they were called—falling out of bed, the rush of nurses to cover patients with storm sheets, but above all a wonderful feeling of oneness and hope in this brave little group fighting an unequal fight in a God-forsaken wasteland. Old correspondence in our files, falling apart with age, sounds strange and musty—Dr. Brooks begging an overcoat for a patient so he can get away from the fireplace and tramp the sand trails... a neighbor trying to prevent patients from approaching his property beyond a certain oak tree.

Patients Older Now
Even the meagre statistical data that has survived yields something of human interest. We have reviewed the first 216 records remaining in our files of patients who were admitted during 1911, 1912 and 1913. The average age of those patients was 27 years, whereas the average age of our present patient population is 45, thus illustrating the strangely

pervasive epidemiological phenomenon of tuberculosis retreating into older age groups. The average stay in the hospital of these early patients was two months, whereas the present average stay is a little over a year.

The mortality rate can only be estimated since our State Bureau of Vital Statistics was just beginning to operate at this period. From these original 216 patients the Bureau of Vital Statistics has identified 80 of them as having died from tuberculosis; however, the names of many patients sent home to die have not yet been located so it is probable that about two-thirds of these patients may have succumbed to their disease.

Such a high death rate should cause little wonder, since the fundamental concepts of treatment at that time—forced feeding, exposure to the weather and exercise—have all proved unsound if not actually harmful. The triumphs of these early sanatoria were clearly in the realm of the human spirit rather than in the

realm of medical science and it seems much fairer to gauge their success not in the actual number of survivors but rather in the subsequent contributions those survivors made.

A number of prominent and useful citizens of our State are ex-patients from these early years; specifically one may mention Mr. Wiley Rutledge, alumnus of 1917, who survived to become Justice of the Supreme Court of the United States.

Crusading Spirit
Then came decades of growth, expansion, new vision and new wisdom. Names, important names

—Brooks, McBrayer, McCain, Willis—changed but the essential impulse toward a system of chest hospitals continued. Progress was slow, painfully slow when awaiting a new technical development or a new concept that would permit the next step, but almost always the progression was in the right direction, and always there was a crusading spirit pushing it along and giving it polarity.

New State Sanatoria, modern in facilities and skills, were established at Black Mountain, Wilkes and Chapel Hill, and the present institution at McCain was completely renovated. Thus at

the point of extinction of the private sanatoria we find in our State Sanatoria a striking reaffirmation of guiding principles: a system of chest hospitals in which the newest technology and scientific principles are combined with those old ideas of compassion and human values, our heritage from a simple beginning.

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