

The Liberal

"In Essentials Unity; in Non-Essentials Liberty; in all things Charity"

VOL. 93, NO. 48.

RICHMOND HILL, ONTARIO, THURSDAY, MAY 28, 1970

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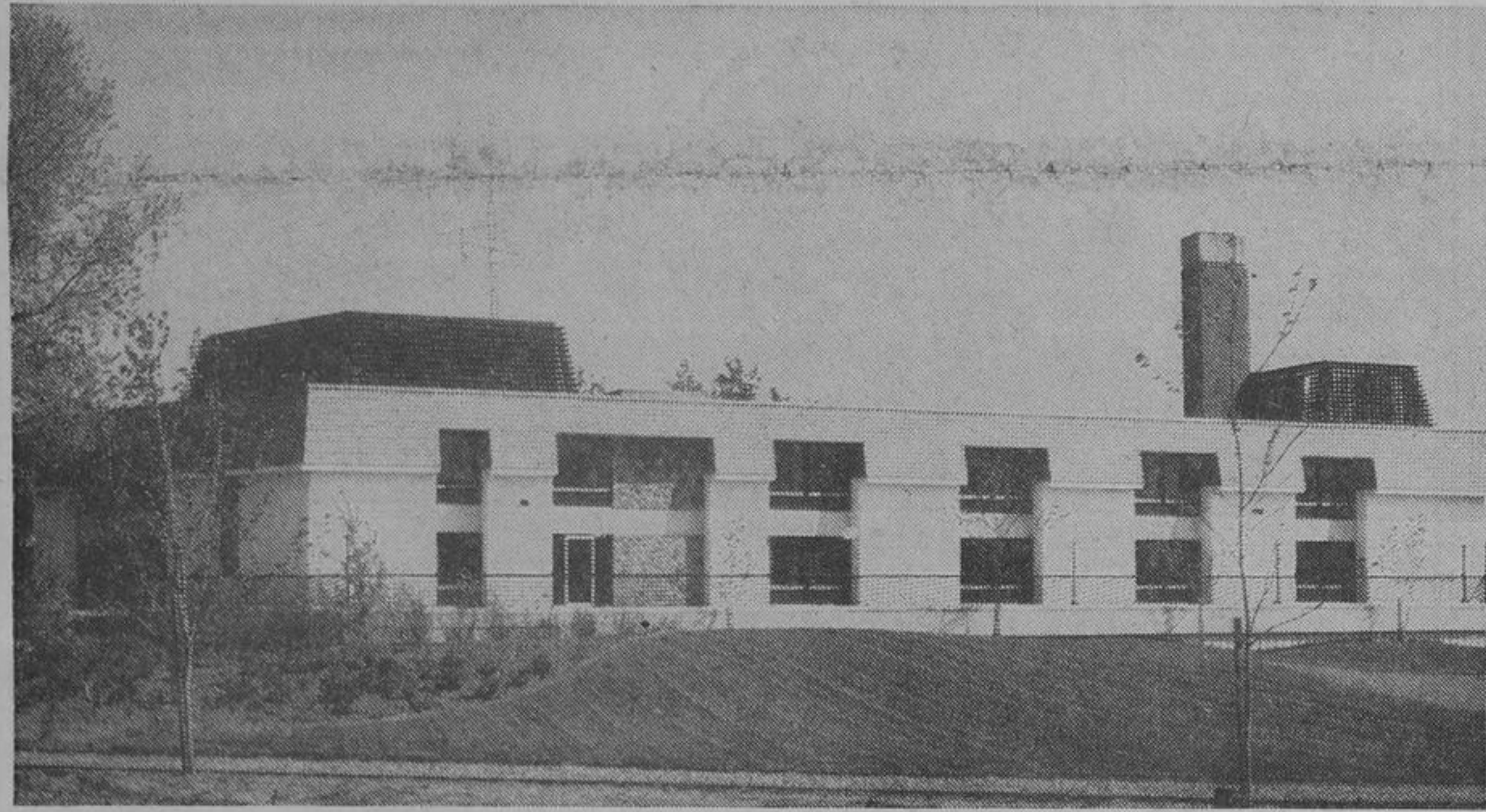
SHOULDICE HOSPITAL OPENS MAY 30



Shouldice Hospital In Park-Like Setting On City Fringe

The new Shouldice Hospital is situated in park-like surroundings in Thornhill, a suburban Markham Township community in Southern Ontario's York County. The hospital has moved from the downtown of Canada's burgeoning major urban centre, Metropolitan Toronto, to the city's northern fringe. Shouldice Hospital is a specialty surgery where as many as 20 operations per day are carried out to repair discomforting and potentially dangerous hernias. Patients come mainly from the United States and Canada.

The new hospital combines the graciousness of the original country estate with the modern decor of the recently completed 88-bed addition. This privately operated hospital has been designed to provide patients with the most up-to-date facilities. Particularly important is the provision of space and ample opportunity for patients to move about and resume regular living patterns.



Hospital Founder Was Surgeon And Lecturer



Dr. Edward Earle Shouldice, an innovative surgeon and long time medical lecturer at the University of Toronto, was the founder of Shouldice Hospital.

"You hesitate to try anything new. It lays you open to criticism," says his son Dr. Byrnes Shouldice.

But the elder Shouldice went ahead anyway, developing hernia surgery. First came early ambulation getting up right after the operation.

Secondly came development of the operation itself.

In 1932 the late Dr. Shouldice noticed an especially good recovery from an appendix operation by a little girl who managed to elude the usual routine and run around right away after her operation.

This reminded him of intestinal obstruction operations which he had done on dogs in the 1920's. The dogs got up, ran around right away, and were fine.

In 1936 Dr. Shouldice happened to operate on a group of four executives who were used to giving orders and having their own way.

They refused to use bed pans, got up against orders, and were fine.

Dr. Shouldice thought about this. He remembered the number of pulmonary embolisms suffered by patients lying prostrate for a long time, even after very good operations. He thought of the pneumonia, phlebitis and other complications that sometimes followed surgery.

Then in 1939 Dr. Shouldice joined the army. He was too old to go overseas, but served in the Army Medical Corps in Toronto.

He noticed the great number of recruits that were turned down because of malnutrition and hernias. They were healthy, otherwise.

Dr. Shouldice, aided by his friend, the late Charles Rathgeb who paid all hospital charges,

offered to provide these men with hernia operations if they would go into the army. He did about 80 such operations.

The army could not take these men for four months after the operation. While they were waiting to enlist, they told others what they had done. The result was that by war's end Dr. Shouldice had a list of over 200 men waiting for hernia operations.

But there was no hospital space, and a hernia was an elective operation that could be allowed to wait.

One morning Dr. Shouldice was sitting at the breakfast table and started to think about having his own hospital for hernias. He started in July 1945 at Church and Charles Streets in Toronto with a little house, a nurse, a cook, and a housekeeper.

He actually started doing operations August 3 and had done 196 by December 31.

Early in 1946 the present director of nursing, Mrs. Caroline Martin, joined the staff. Then came the hospital's present chief executive, Dr. Nicholas Obney, in May.

Dr. Shouldice continually ran out of space and kept adding houses to his little hospital. But in 1953 he decided he wanted to build his own hospital and get lots of space.

He bought the present site in Thornhill and took four months to organize the new surgery. Then he found he had too big a backlog of patients waiting for operations and would need both the old and new sites. In 1963 there was no room left again.

Dr. Shouldice died August 20, 1965, just two months before his 75th birthday. He had a coronary in his own room at the Thornhill division of his hospital while talking to Mrs. Martin.

During his last four years he had been beginning to think about expansion. He had two meetings with architect Don Jackson to talk over plans. Mrs. William Urquhart, the

Health Minister Wells To Cut Ribbon

Toronto's Shouldice Hospital is quite unique. In the past twenty-five years, this specialized medical institution has repaired by surgery the discomforting and potentially dangerous hernias of 60,000 patients. Five days a week in four operating rooms, its totally specialized surgeons perform up to twenty operations and all the patients walk back to their beds.

The Shouldice Hospital techniques of surgical, pre-operative and post-operative care have evolved over a quarter-century of research, cautious innovation and methodical follow-up. Where recurrence was a bugbear of much herniorrhaphy, it is much less of a problem today.

This hospital has attracted patients to Toronto from all over North America and, on invitation, doctors have demonstrated surgery throughout the Americas, Europe and Asia. Favourite anecdote of the hospital's 100-man staff is of the visiting Russian scientist who, having officially observed an operation one morning, requested the doctor to work again that afternoon on the visitor.

The oldest Shouldice hospital in Toronto occupied a group of converted homes on downtown Church Street. Now a major new hospital with its eighty-eight bed capacity and five centrally-monitored operating rooms incorporate the modern facilities. It began operation in 1969 and the official opening ceremonies will be held Saturday, May 30th at 2 pm.

There's always a waiting list for hernia operations because, apart from coughs, colds and influenza, hernia may well be the most common affliction of western man. At any one time, perhaps some six millions or more North Americans suffer the condition, which is male-predominant by a factor of about twenty-four to one. For a variety of reasons however, not all sufferers have their hernias corrected surgically. Some men won't admit that they have the condition for they feel it reflects on their masculinity. The irritating recurrence rate discourages many while others cannot afford to take long periods off work. Today a hernia repair at some centres has a recurrence rate of less than one per cent and patients are often back at their jobs within ten days or less of surgery.

SUCCESS FACTORS

The success of this Toronto hospital is due to a combination of factors:

- except in an emergency, Shouldice doctors ask most of their patients to lose superfluous weight before their operations. Almost all patients are asked to lose some weight under prescribed diets and some have taken off as much as 100 pounds. This weight reduction gives surgeons more tissue to work with in suturing, reduces the pres-

sure of the incision, improves the patient's general health and eases the strain on his heart.

- the hospital is restrained in its use of anaesthetics. For many years it supported a specialized anaesthetics researcher and now, in all operations except on young children an severe incisional herniorrhaphy, it relies on a local infiltration anaesthetic.

- surgical techniques include the exclusive use of stainless steel wire for all sutures (except in young children and for ligatures in the hernial sac and near nerves or the skin surface). Thorough exploration and repair of all three layers of abdominal muscle are vitally important. (Detailed descriptions of the surgery are available in numerous medical journals).
- early ambulation speeds recovery, improves morale and reduces post-operative complications. Patients walk back to their beds from the operating table and the next day are embarked on a gentle exercise programme under the direction of the staff Physiotherapist.

- the hospital cultivates a club-like informal atmosphere. Patients are discouraged from regarding themselves as "sick" and they move about freely, play cards, sing around the piano in the evenings. Most enjoy their stay; so much so that a group once got together and asked Earle Shouldice to sponsor an annual reunion. The doctor agreed providing that all those who came to the dinner used the occasion for a medical check-up. That's how it came about that every year now the Crystal Ballroom at Toronto's Royal York is subdivided into temporary cubicles where twenty doctors examine as many as 1,400 former Shouldice patients before they all stroll next door to enjoy a banquet, a speech and a floor show.

ANNUAL DINNER

The annual dinner is only one element in the comprehensive follow-up plan. Patients are checked at travelling clinics or by their local doctor

for ten or twenty years after their operations. This procedure lets the staff analyze the results of any minor variations in procedure.

A basic reason for the high incidence of hernia in men is that, at birth, a male baby's testicles descend into his scrotum through an aperture in the wall of his abdomen at the groin. In later years, and sometimes even when the baby is young, that aperture will frequently tear or stretch and sometimes let some abdominal contents protrude. That condition is a hernia.

There are other places in the abdomen where a break can commonly occur and each is regarded as a different type of hernia: inguinal, femoral, umbilical, epigastric. Another common type is incisional — the breaking open of an old surgical wound. But wherever located and whatever the cause, the principle remains the same: something from inside the abdomen protrudes through a tear in the muscle wall. Sometimes the protrusion is as small as a thumb; sometimes larger than a football.

Many people, often with the aid of a truss or other mechanical device, learn to tolerate the condition. But as well as being uncomfortable, a hernia can also be dangerous. When, for example, a portion of bowel protrudes, and cannot be pushed back, its blood circulation may be cut off. Then it's "strangulated", a condition which can become deadly within a day or two if medical attention is not provided.

Women's abdomens in the groin area are much stronger than men's and Earle Shouldice used to suggest that this is why women in primitive cultures often tackled the heavy work: they wanted to save their men from the risk of rupture.

Some men seem to inherit a tendency to hernia. Other primary causes include: heavy lifting or pushing with legs apart, especially with one behind the other; chronic coughing; continuous standing — by a barber, for example — without exercising the abdomen. Perhaps the most common cause of all is "middle age spread" which can weaken the vulnerable groin area.

A man who does heavy manual work then graduates into a softer supervisory job is a

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Public Is Invited To Open House

The official opening of the Shouldice Hospital May 30 includes a six-hour open house.

The public is invited to attend and tour the new hospital. Former patients have been issued special invitations.

The hospital is located at 7750 Bayview Avenue, Thornhill.

The Honorable Thomas Wells, Minister of Health for the Province of Ontario, at 2 pm will cut a ribbon and declare the hospital in service.

The hospital open house begins at 10:30 am and will continue until 4:30 pm.

The building and the spacious landscaped grounds will be open for the public to inspect and enjoy. Members of the hospital staff will be available to point out highlights of the building and the services provided.

Local officials and dignitaries have been invited for the opening ceremony.

Platform guests at the half hour opening ceremony will include: Health Minister Wells; Reverend Irvine Perkins, minister at Donlands United Church, Toronto; Dr. Byrnes Shouldice, the hospital's first vice-president and surgeon; Reeve Stewart Rumble, bringing greetings from Markham Township; and Councillor Albert Laidlaw, representing Warden Gordon Cook, and bringing greetings from York County.

Health Minister Wells was born in Toronto and was first elected to the Legislature in 1963. He became a minister without portfolio in 1966 and minister of health in 1969. He represents Scarboro North.

His previous connections in the health field included a period as advertising manager for the Canadian Medical Association and membership on the Scarboro General Hospital Board. He was also a Scarboro school trustee for six years, and a member of the Metro Toronto School Board.

He attended Victoria College and Toronto University.



Wide Smiles From First Graduates Of New Hospital

"We're the first," this group of hernia operation graduates seems to be saying as the members exhibit wide smiles. Shown are the first seven people to have operations at the new 88-bed Shouldice Hospital addition in July 1969. Personally engraved tankards were presented to each member of the group. Handing out the mementos were the son and daughter of the hospital's founder, Dr. Byrnes Shouldice (third from left) and Mrs. William Urquhart (fifth from left).