



CANADIAN MILITARY HEADQUARTERS.

2, COCKSPUR STREET,

TRAFALGAR SQUARE,

LONDON, S.W.1.

Friday May 24th 1940

File.

Dear Mde:-

We have arrived and are attached at headquarters for the present. Had it not been for the convoy, the black out and military routine it would have been the usual crossing. There were enough civilian passengers on board our boat to soften regime somewhat. Mrs Anderson a very charming older woman, an aunt of Harry Thrights, was widely travelled wise and sixtyish Mrs Schueyler, and Mrs Pace and her step ladder family of freckled faced youngsters were good companions. The medical load was not heavy. Captain Anslie, a Western graduate who interned at the M.G. It took the daily sick parade for the most part. Daily inspection of the mess quarters and ship either Collins or I had done. A heavy plank fell down a hatch onto the head of one of the ranks. I closed the lacerated scalp with an unorthodox technique and kept him at absolute bed rest with neck immobilized because he had tenderness over the 2nd cervical with some palpable irregularity, numbness of the hands with some weakness, and Horner's syndrome. He has been doing well and I was glad since it did happen that the resulting injury was up my alley. The final diagnoses I made were (1) Contusion

were adopted. Do get more information about the set up here. Two civilian hospitals are under control
- reaction for the Civilians do not like the English ones and refuse treatment & resist the div. of generally
unless they have their own doctors. Of course there is to avoid get. as to our existing headquarters. The
situation is changing so fast and furiously that serious plans for sites are all so ended.
with my warmest to you, Helen & the young ones.

of the spinal cord ② probable dislocation or fracture dislocation
of C₂ on C₃ ③ Rerection of the scalp. When we landed he
was to be sent to one of the civilian hospitals to
be treated by the civilian regimented staff and
this brings up some important points which
you must weigh now.

① ③ In England because of the heavy load
of injuries to the civilian population all hospitals
are under the minister of health and he has
selected civilian doctors as either advisers
or consultants or both. Gordon Holmes for
example is carrying a very important and
big load though he is carrying on with his
teaching and practice. Jefferson is a consultant
in neurosurgery and carrying on as a civilian at
Manchester. As far as I have been able to deter-
mine Cairns is serving in a triple capacity
adviser, consultant and is also connected with
the army. I am not sure of this. The point I want
to make is that the scheme seems to be working
out well for the English, special military hospitals
are not necessary, there is no upset in their
usual organization, ^{except in the work - lots of it,} the wounded men
being sent back from the base or even from
a casualty clearing level directly to one of the
civilian hospitals. Therefore would it not be wise
for you and the rest to sit tight for some such
situation could be worked out there. The only ones
needing to be connected with the army would be
those actually in the field. Of course, I hope we can
exchange as planned but you would have a
tremendous responsibility if such a scheme through
which you would have direct access to the minister of health

June 6th 1940
Canadian Military Hdq
Medical Service
Dunlop Bldg
7 Yorkspur St
London

Dear Sirs:-

2) The unit is to come shortly. Where it will be located is not yet decided. It will probably be placed under canvas and the equipment left packed until we move on over there. The nursing and medical staffs may be assigned to some other hospitals in the mean time.

3) Since the Emergency Medical Schedule (E. M. S.) has covered the situation so completely in England neither the Royal Army Medical Corp nor the R.C. A. M. C. has so very much to do here. The R. A. C. men assigned to the E. M. S. hospitals are concerned chiefly with discipline and documentation while the civilian staffs carry on. This is an example of how it is working. At Ashridge Lord Brannelow's old estate bought some time ago by Donald Ross and given to the Conservative party for the establishment of a school of citizenship the E. M. S. has taken over. The manor house is used for both personnel and patients and there are about twelve large huts each holding from 36 to 40 patients. They can handle about 700 now and it is to be enlarged.

4) The staff of Charing Cross Hospital is in charge. They take care of both civilian and military patients both the routine things and the wounds

They house the medical students of Charing
Cross out there too and carry on with
the usual teaching - Pathological Lectures
in a crypt built by the monks in 1400
the wine shelves holding museum specimens
now, taken out from London and there
are other just as strange situations -
a women's ward in a huge ball room
with a brilliantly colored mural on
its thirty or forty foot high ceiling.
Their equipment is really splendid
The students say they are getting much
more out of the work than they did
in London. The staff seems to be enthus-
iastic about the set up too. I have
never seen such beautiful grounds.
Even with the wounded coming in it
is difficult to believe there is a war
on and the tempo at which they work
does not suggest it either. A major
in the R. A. M. C. flutters about
with his small staff of orderlies to
see that the necessary papers are
filled out for the army medical corp.

5 This is not an unusual set up
Every place I have gone is doing
much the same way. St Bartholomew's
Hospital is running a similar
show. Circus and others are doing
the same thing at Oxford except
that they are carrying on at their
own stamping grounds and have
taken over some of the newer
colleges as well. At Oxford there

there is certainly a great collection of talent. Denny Brown, Simmonds, Ascroft, Pennybacker and others. They are not too busy clinically to prevent going on with investigative work. Brown is playing with concussion and Simmonds is investigating the post traumatic syndromes. Only Brown Ascroft and Simmonds are in uniform but they are exempt apparently from the usual R.A.M.C. routine. Cairns is not in uniform. He is adviser to the War office.

Stop

Jepperson is adviser to the ministry of health. He has, I should judge, very considerable influence and Holmes' backing. He is trying to arrange it so that he will have access to more of the E.M.S. set ups than the one which he is running in Manchester. There are a very few R.A.M.C. hospitals staffed by permanent force men and he thinks the E.M.S. staff should be allowed to work there too. He is suggesting that licenses to practise in England be granted to medical men from the Dominions so that they will be able to work in the E.M.S. hospitals for the duration too.

omit

The two Canadian hospitals - just being built and nearing

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completion (they should be ready about
June 15th) are at Taplow and
Bramshot. I hear these are lovely.
The 15th General, the Toronto unit
is to take over Bramshot and
the Winnipeg unit Taplow. Both
units have been here since early
in February and the staffs are
very anxious to reassemble
and get busy at their own
work.

Stop To fill in during our waiting
period we are going to see
what pure powdered sulpha-
pyridine does in the brain.
Queen Square has been cleaned
out but Carmichael has arranged
it so that we can do some work
on cats with makeshift equip-
ment. The forms to permit me
to do this I filled out in great
detail but neglected to include that
venipunctures would be necessary
to determine blood levels so
Carmichael who has a covering
license will have to be responsible
for this part. May & Baker the
firm supplying the M.B. 693 will
do the chemical studies. They were the
first to place the drug on the market
since it was originally made in
their laboratories. It is already

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being used in wounds to a certain extent. Of course every wounded man gets it by mouth and since there have been few serious cases of sepsis the general opinion is that it is of great value even in gas infections. Placed in soft tissues of the extremities it is said to be non irritant and to be absorbed to give an even blood level for a prolonged period to produce the general systemic action what ever that is and to act locally because of its great concentration as it does in vitro. It will be great fun to see what it does in the central nervous system, what blood levels are reached etc. It is so insoluble in water I should not have expected it to get into the blood stream from a wound.

Here are 3 references about it I wish you would look up and maybe one of the fellows could get busy on it too.

Nitti - Elimination of sulphamamide after application to wounds, Its protective action - *Revue medicale* 1939 no 15-29th page 1577

Jensen et al - Sulphamamide in compound fractures - *Surgery* 1939, 6 - 1-166.

This was abstracted in *JAMA* Sept 9th 1939 page 1074

(Martin Nichols, Fellow at m n j last year)

P Henderson and Nichols, took a lead team and special truck over and though they have not returned probably staying with their wounded it is said they did some splendid work - most of it general surgery - only 16 leads. It is not known that they moved at all after getting settled and the practicality of the 5 ton truck and trailer was not proven except in the initial move. Until things settle down and we know more about the situation to be faced we can not plan much for decorations such as special trucks for transportation. Fortunately we can move in any truck if we send out teams - our equipment is planned for this. We may all end up however in field ambulance work.

Print

9 The city is strangely quiet. It is clear, cloudless and not too warm. Old Ben says 4³⁰ through my office window and that is tea time. Imagine it when such an emergency exists

Love to you Helen
and the good folks
Bill

London
July 19th 40.

Dear Hede:-

The enclosed letter and curriculum vitae are self explanatory. Both has not written. I have just acknowledged the letter and said I was sending it on to you. The appheant is 46. Dont the readjustment this war is demanding and will require in the future appalling?

Roosevelt's speech of acceptance was published in part in today's papers and did much to cheer us up. Conditioned to it and anxious for it it seemed a second Gettysburg address. It may go down in history as a masterpiece may it not? At any rate it stirred me up and I am anxious to study it in toto.

//
I am going to try and send sections from our cats as soon as the last ones (30 days P.O) are ready. All the ones with sulphapyridine got along very well clinically and adreans studies on rabbits showed

Dr. Hede

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that sulphapyridine did not upset
the electrical activity of the cortex,
sulphamylamide in large amounts
reduced it slightly but not enough
to suggest any permanent injury
while streptocide (a complex sulphan-
ilamide) caused a considerable
and probably harmful depression
within 5 to 6 hours. In one group
he dusted the powder on the archi-
noid. In another he incised the
archinoid. ^{also} The electrical responses
were alike whether the archinoid
was open or closed. What possibility
is there of late tumor producing
effects from retained drugs of
the sulphanilamide group? Aren't
they aniline derivatives related to
carcinogenic substances. Three
of our sulphapyridine animals
are still living and I'd like to let
them go three months - it is 5 weeks
P.O. now but Hurteau must be
almost up to this schedule and
perhaps we better sacrifice them
sooner. I miss you, the lab and
the work.

With my love to Helen and W.R.M.
S.P. and you
Bill.

Quote No.....



CANADA

CANADIAN MILITARY HEADQUARTERS

TELEPHONE: ABBEY 2401

TELEGRAPHIC ADDRESS: "CANMILITRY" LESQUARE

CABLE ADDRESS: "CANMILITRY" LONDON

2, COCKSPUR STREET

(TRAFALGAR SQUARE)

LONDON, S.W.1

July 17th 1940.

Dear Sir:-

This is a hurried note since I have just been notified that a mail is going out in a few minutes. Both of your letters arrived and I was very glad to have them. My letters have been full of details about the E.M. S organization because I was so anxious for you to fully understand the trend of medical military affairs. Even now the situation here remains unsettled and military and Ministry of health need to conclude final negotiations so that a final working policy goes into force. I don't know how it will work out.

We are still unsettled and the men are restless though well. Our equipment is not all here yet. That which has arrived is fine and we are glad to see that our work on it was worthwhile for it is hard to collect it here.

Miss Lewis wrote me that she is going to try to get back to Canada and today she is coming up to London so a telegram says to try and arrange passage and straighten out the red tape associated with leaving now.

What would you think of Carmichael as a possibility for the chair of physiology at McGill. I believe he might consider it now. You remember he is said to have turned down the offer at Hopkins for Neurology. He is in charge of Research at Queens Square, the younger men love him and he gets them all and puts them to work. Greenfield says this is his chief asset but that he is a bit difficult for his equals to get along with. With his background in general physiology he would be good all around and very valuable to us if he would cooperate. He is a bit pessimistic about the future at the National Hospital. Finances + factions make its running difficult and from what I have observed this is a general situation in the army + med scene too.

Yours with love to Han the youngsters + you
Bell

Canadian Military Headquarters
Medical Services
2 Cockspur St
London W.C.
July 1st 1940

Dear Hyde:-

We are still at loose ends. No suitable place for our unit has been found. The men are under canvas with nothing to do from the medical standpoint. The situation we have to face is no worse than that of the Royal Army Medical Corp. Back from France, now it is at loose ends with the men clamouring for work and a place to do it. The E. M. S. is in the saddle and can not be dislodged. They control the hospitals and staff them and do the work both civilian and military. The Canadians have two hospitals - one at Bramshot built by the Canadian government (600 beds) and one at Topley on Lady Astor's estate built by the Red Cross also 600 beds. We may find something yet but it takes so long under present conditions to get anything built or altered here I wonder if it will be in time to be of value. Today for the first time I was ready to recommend that the unit be broken up and men assigned to the two hospitals now almost ready to go. They are all ready over staffed and would not

welcome us very enthusiastically. They are guarding their set ups jealously and it is understandable for they have been waiting here since January, watching Canadians being treated in E.M. & hospitals where they were anxious to be working themselves.

I said today that I hoped they would not let any more Canadian medical units come over until they could show they were equipped, were needed and had a place to work. I am afraid Red Londons No. 1 General will come shortly and will have the same long period of waiting. I am so glad our nurses are not here.

We have made brain wounds in six cats and filled the defects left by large removals with sulphapyridine. The drug is not absorbed in the amounts used. The reaction to it is relatively mild - Polys near the drug, phagocytes, ^{some with multiple nuclei} next, with some lymphocytes and plasma cells and then fibroblasts. And I am

not sure the local application of
the drug prevents infection. Two
animals were killed one at 8 days
and one on the 14th day. The 3rd
died. It had distemper and perhaps
meningitis. The other 3 are living.
Only a small amount of the
drug is absorbed. The highest blood
levels are reached 74 hours
after operation (1.5 milligrams)
percent. On the second and
third days the blood concentrations
fall to 0.5 mgms % and thereafter
run at 0.3 mgms % - levels so low
they are difficult to estimate. The
three animals are enough to
show it can not be used in the
brain in large amounts and
I am inclined to feel it should
not be used in any amounts
though Adrian has shown it
does not upset the brain waves
in rabbits when it is sprinkled
on the surface or placed in the brain
through tiny puncture holes in the
leptomeninges. In any case no
one has proven conclusively

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that it is valuable in wounds. Colebrook who did so much to introduce sulphamide initially, has recently advocated its use directly into wounds and his word has carried so much weight it is being rather widely used. Several men have already put it in in human brains.

at a meeting of the Brain Inquiry Committee the value of electroencephalography was being considered. I promised I would write you for two articles. Could you see that the manuscript of Eledyges, Keshumans and Jaspers paper on the findings in acute head injuries is sent on - this must have an extra copy and would it be possible to have a copy of the chapter of your book not yet in print dealing with electroencephalography? Adrian and Critchley were particularly anxious to have them and soon. The mail is very irregular and I expect some has not

reached its planned destination.
At any rate no mail has come
from you and I would welcome
a note.

If any previous letters did
not reach you they may have
been confiscated by the censor
though of course there was
nothing more in them than in
this one.

With much love to you
and Helen and the youngsters

Bill.

Letter No. 4

Letter No. 4

Dr. Wm. V. Cone (con't)

the Fellows of the Royal College. I have had April 23rd, 1940.
responses from the Fellows - some of them in approval and
some of them sharply critical. I suppose you can't do any-
thing without bringing down on your head some criticisms.
Letter No. 4. I am also enclosing a copy of an editorial which I have
submitted to S.G. & O. They have asked me for editorials.

Dr. Wm. V. Cone,
Canadian Military Headquarters,
Medical Services,
2 Cocksbur Street,
London, S.W. England.

I wrote you in my last letter that I had
been busy with experiments upon the effect of
sulphanilamide, sulphapyridine, and sulphathiazol upon the
control of infection of the brain. It still seems to
be evident that

I have just received your letter of
July 1st. I am shocked to hear that you have not received
any letters from me as yet, although I suppose they may
travel pretty slowly. I wrote you my first letter from New
York early in June. I have written you two letters, I think,
since. That would make this letter number four. In the
future I shall number them if I possibly can. I have forward-
ed to you the previous letters through the Base Post-Office in
Ottawa. This was the address that you gave me when I saw you
and Colin the last time in Ottawa. This one, as you see, I
am sending direct to London.

I do not blame you for feeling a little
fed up that there has been nothing official for you to do as
yet. It was, of course, impossible to foresee the turn the
War has taken. I should hate to see the unit broken up, and
to see you divided up among other Canadian Hospitals, as you
suggest, but I suppose this may yet become necessary. I was
absolutely horrified to discover from Col. Cross's letter that
some of the essential instruments and operating material had
not even been ordered yet at the time that the unit left Ottawa.
You may not feel very useful now, but you will become suddenly
very useful, and we here feel altogether ineffective all the
time. I am enclosing a copy of the letter that I sent out to
at support in Fred Anderson's mail to get some

Letter No. 4

Letter No. 4

Dr. Wm. V. Cone (con't)

the Fellows of the Royal College. I have had a good many responses from the Fellows - some of them in approval and some of them sharply critical. I suppose you can't do anything without bringing down on your head some criticism. I am also enclosing a copy of an editorial which I have submitted to S.G. & O. They have asked me for editorials in the past and I thought I would try this one on them. I do not suppose they will accept it. Hurteau is going ahead with experiments upon the effect of sulphanilamide, sulphapyridine, and sulphathyrasol upon the wounded brain. We have not undertaken any experiments on the control of infection of the brain. It still seems to be evident that amnioplastin is quite different if it is boiled, and it is also evident that the amnioplastin which is simply autoclaved gives rise to adhesions.

In regard to your request that the work on electro-encephalography in brain injuries be sent to you, and also Jasper's chapter for the Epilepsy book - I have gotten into touch with Jasper immediately and he is forwarding to you a copy of the paper, and any things that are ready in the chapter. Unfortunately this chapter is not yet completed, but he will send you along stuff as soon as it is ready. Thomas has agreed to publish the book, and it is really almost in hand. I think it would be a good idea if you could number your letters as well. I think I wrote you that Jasper and Miss Goldie are to be married next month.

As you know Helen joined me in Spokane after she had visited her Mother. We came back by way of Bayport, Minn., and stopped with Fred Anderson, an old friend, of ours there, who took us out on the St. Croix river in his houseboat for 2 days. Bill Chester of Milwaukee and Bob Johnson of Baltimore came up with their wives to join us on the houseboat. They then went on up into northern Wisconsin to get some fishing, while we came back. Wilder is working at Bayport in Fred Anderson's mill to get some experience.

the bottom of

Dr. Wm. V. Cone

Letter No. 4

Dr. Wm. V. Cone (con't)

Ruth Mary is taking care of things down at the Farm. We have Miss Lewis's niece and nephew there and we are expecting Adrian's twins in a few days, and I suppose, Betty Greenfield. The twins are going on to Bronk presently. We offered to take the Holmes family but they have decided not to come out. We are about to send out the second Bulletin for the unit. So far as I can discover the nurses have left. I hope you are all set before trouble begins. I am holding my breath for you all.

Yours sincerely,

WGP/HO
encls.

Letter to Lt. Col. Cone, continued:

I think he is trying to set something for you to shoot at.

As I wrote to you, the United States has changed its whole attitude completely. We learn that Ford is actually starting out to copy aeroplanes and will be able to do what he boasts of, namely a thousand a day, in six months.

June 21st, 1940

Helen and Avis had lunch together yesterday and Avis said that everything seemed to be going all right there apparently. She was having some work done down at the place in the country. She told Helen that your car was not yet sold.

Lt. Col. W. V. Cone,
No. 1 Neurological Hospital, R.C.A.M.C., of the departure of
c/o Base Post Office, Canada. to Martin and friends. We asked

Dear Bill: that he is trying to arrange a passage. We also
called to Holmes to see whether he would like to send out any
of his family.

We have gradually straightened out the question of
the camera. The D.G.M.S. tells me that the unit got a moving
picture which was given to them and I learn that General
McDonald "secured from the Red Cross" a still camera which is
to be sent to you within a few days. However, when it came
to paying for the camera the Red Cross of Montreal evidently
intervened and told the national organization that this was
something that they would like to pay for. Consequently, they
apparently took over the pleasure of helping out No. 1 Neuro-
logical Hospital. They want to have a plate put on it and
I promised to forward their request to Dr. Cliddon. If the
plate appears on the camera you will understand why. to have
two lecturers appointed to give lectures at the annual meeting
in Ottawa I have learned by telephone from Mrs. Humphreys
today that those who were accompanying Storer have arrived
after a wonderful trip. I wonder if you are with them now.
The Institute is very busy. They have promised to put in
the elevator now and now the question comes up as to whether
it is to have a dual automatic control and also the question
of where to put all the things that are in the place where
the elevator ought to be. Britain by twelve months from now.

Tell Arthur Elvidge is having lots of work taking care
of the wards. He still doesn't own a watch. He told me the
other day that he only needed one when he lectured and then
he could just as well buy one each time. The Institute is
full up; there was a time when the private floor had a tendency
to have some empty rooms in it, but at the present moment we
are overflowing into the Ross. Arthur Elvidge operated upon
a gunshot wound in the head the other day in which the bullet
entered in the parietal region and left in the temporal region.
He used the retractor in the approved manner and got
scalp healing without reaction. Curiously enough there is
almost no mental disturbance in the man and no paralysis.

Letter to Lt. Col. Cone, continued:

I think he is trying to set something for you to shoot at.

As I wrote to you, the United States has changed its whole attitude completely. We learn that Ford is actually starting out to copy aeroplanes and will be able to do what he boasts of, namely a thousand a day, in six months.

Helen and Avis had lunch together yesterday and Avis said that everything seemed to be going all right there apparently. She was having some work done down at the place in the country. She told Helen that your car was not yet sold.

I am sending out a little account of the departure of the unit and its safe arrival to Martin and friends. We asked Greenfield if he did not want to send Betty out to us and we got a cable that he is trying to arrange a passage. We also cabled to Holmes to see whether he would like to send out any of his family, but have had no answer.

Evelyn Russel called me on the telephone when she had a letter from Colin and I was very glad to get word from him indirectly. Eddie Kahn, as I think I wrote you, has started off flying on the Clipper to work in the American ambulance. Cuthbert Bazett is very keen to get over in any kind of an outfit any time. I have been trying to get him some job among the Canadians.

We had a meeting of the Council of the Royal College the other night in Toronto and they passed an arrangement to have two lecturers appointed to give lectures at the annual meeting in Ottawa and then have each of them give one lecture west of Toronto and one lecture east of Montreal, and at the same time to try to give them a certain amount of prestige by calling them the annual lecturer for the year, and so on. I think I talked to you about the scheme. Both No. 1 and No. 14 General Hospitals are being mobilized. If this is the last real step that the Germans make, I have an idea that there will be lots more people helping defend Britain by twelve months from now.

Tell Storer that we find that boiling removes all the stainable fat from the amnioplastin, whereas putting in alcohol and then autoclaving
We do not know yet whether this is the answer.

July 31st, 1940.

Letter No. 5

Lt. Col. Wm. V. Cone,
Canadian Military Headquarters,
Medical Services,
2 Cocksbur Street,
London, S.W.

Dear Bill:

I wonder if you are in the Hospital as yet. Surely you must be by now. I have been visualizing the position of the Unit on the map, and suppose that your Hospital will be somewhere in the vicinity. It seems to me the best thing for you to do is to make a complete statement of what you have done in regard to sulphanilamide et al., and let us carry on exactly where you left off. We can work ahead at it as we are already doing, but do give us your ideas so that there will not be any lost motion. Also send along any other problems that you think ought to be worked out.

I have been urging Arthur Elvidge to review all of the cases of head injury that were treated properly by radical extirpation, from the point of view of their seizures. As I remember you did do this several years ago, but perhaps it would be well worthwhile reviewing your cases and any others that he may have in hand. What do you think about this? Would not a timely statement on the subject be well worthwhile using the material which is certainly available here.

I have had in mind also the possibility of trying to work out a better material for putting into wounds and locking up there for days and weeks much as you have handled Alphamel. Obviously the virtue of Alphamel lies in its high glucose concentration. However, it ought to be possible, I should think, to combine pure glucose in some

(2)

Letter No. 5 (con't)
Letter No. 5 (con't)

Lt. Col. Wm. V. Cone
Lt. Col. Wm. V. Cone,

getting out this issue of the Interia Report of No. 1 Neuro-
10 other form and thus to hit upon some better bip. I do not
e know what you think of the way wounds are to be handled in
the War to come but certainly if there is any very large
engagement it would be a great convenience to have materials
that could be sealed up in wounds over long periods of time,
and then be removed to leave a granulating bed behind. I
had a chance to get hold of a good organic chemist who wanted
to come to work here, but I had no problem to put him on ex-
cepting that and I was not quite clear of my own ideas in
regard to it. As you know Cherkoveth has
resigned and Dr. Stevens of Winnipeg is taking his place as
of the 1st of August.

We are continuing our course, although
as you probably know I have been away almost three weeks out
of it. I understand an examination is coming at the end of
the week. Nevertheless Miss Flanagan pointed out to me that
I have already been gazetted. Rabinowitch gave us a lecture
on gas last night and most of us were almost overpowered by
a smoke screen of rapid fire inflammation. All very good and
all to the point, but somewhat bewildering.

The Adrian twins arrived today quite
happy. They brought word that Professor Adrian had seen you
and Colin, and was very much pleased at the opportunity. He
sends along a letter in which he said they had been much im-
pressed by yours and Colin's presence at their head injury
Committee. I wish we could keep the twins with us but Bronk
is coming after them on Sunday. Dr. Maude Abbott is in the
Hospital having had a cerebral accident and she is not doing
very well. I am rather concerned about her. Dr. Archibald
has now gone on full time service in Ottawa. We are running
full blast at the Institute, as usual, and Montreal is hot
as can be. Avis has now gone down to the country. If I can
get there for longer than a few hours Helen and I will go
over and see her. Norman Petersen's foot has come along
slowly. The first incision which Arthur Elvidge carried out
has healed nicely. The second one which was carried out on
his left metatarsal phalangeal joint has healed slowly.
Armour & McKenty came over and did it with Arthur while I
looked on. There was an enormous tophus. He will have a
good foot to walk on I am sure. Unfortunately, however,
another tophus is breaking through in his left heel and he
has had some increase of gout in some of the other joints.
Do drop him a note sometime and get him up a bit. He is

(3)

Letter No. 5 (con't)

Lt. Col. Wm. V. Cone

getting out this issue of the Interim Report of No. 1 Neuro-
logical Hospital. Be sure to let us know and ask anyone
else in the Unit to let us know anyone they would like to have
this sent to. Col. Cross' report is humorous and extremely
well done and expressed his inimitable style. Arthur Elvidge
is continuing in charge of the wards and seems to be enjoying
it very much. Francis McNaughton has been in charge of the
Neurological Service while McEachern was on his holidays.
Jack Kershman has made a financial analysis of the relation-
ship of the Institute and the Royal Victoria Hospital. It is
in very great need of change. As you know Chenoweth has
resigned and Dr. Stevens of Winnipeg is taking his place as
of the 1st of August. We shall be very glad indeed to have
Stevens here, to put the situation mildly. Do let me hear
from you whenever you have the chance and put in details.
The announcement went out about your departure and I enclose
one. Good luck to you and dodge anything you see coming.

Yours,

WP/HO

Letter to Lt. Col. Cone continued:
Letter to Lt. Col. Cone continued:

many of them evidently still take the attitude that the struggle which is going on is one that they can look at as though they were in a grandstand and in which they are not directly involved. To me it has become almost completely a moral issue as well as a struggle for life and death. It seems to me that the one thing to be hoped for is that a real league of nations come out of the whole thing, a League that has control of the air and of the sea and with a police force that is not allowed to any other unit. If Germany should win, the possibility of such a League would be put back centuries, no doubt, but actually the United States is not ready to accept or to work for such a thing yet.

August 21st, 1940

Letter No.6

Lt. Col. W. V. Cone,
#1 Neurological Hospital, RCAMC, CASF.,
c/o Base Post Office,
Canada.

Dear Bill:

I received your letter of July 19th and the enclosed curriculum vitae. I have written to the man that it might be a good idea for Mr. Dott to write to me, but did not encourage him very much. We certainly have no place for a man of that sort. Poor devil! It is hard for these people who are displaced but it is a lot harder on some of the others who have to live on in the same country with the Germans, to be humiliated and to starve.

I agree with you that Roosevelt's speech of acceptance was splendid. I cannot help feeling that he measures up as a very big man, yet everyone I have talked to from the United States feels that he is an imbecile and a thug. I got a very different point of view of him, however, from Gil Winant the other day. Winant is head of the International Labour organization which was in Geneva and which has now cleared out of Geneva altogether. Winant is bringing it here to Montreal and McGill had offered to take them in. Winant knows Roosevelt quite well, although he is a Republican. He feels he is a really fine man with lots of capacity and with complete sincerity. I have no doubt that Wilkie is also a good man but he is not broken in to the situation. Wilkie has the advantage of being a younger man and very energetic and capable; also he would come into the President's job without the adverse prejudices that Roosevelt has acquired; there is a pretty strong feeling against the third term idea.

I talked with some Americans yesterday who did not sound as hopeful about the United States coming in as some others have. They pointed out that many people down there are saying that in case the United States were at war they doubt very much whether England would come to their rescue. A good

Letter to Lt.Col. Cone continued:
Letter to Lt.Col. Cone continued:

many of them evidently still take the attitude that the struggle which is going on is one that they can look at as though they were in a grandstand and in which they are not directly involved. To me it has become almost completely a moral issue as well as a struggle for life and death. It seems to me that the one thing to be hoped for is that a real League of Nations should come out of the whole thing, a League that has control of the air and of the sea and with a police force that is not allowed to any other unit. If Germany should win, the possibility of such a League would be put back centuries, no doubt, but actually the United States is not ready to accept or to work for such a thing yet. Perhaps if they are involved with Japan in a struggle, their point of view may change. We seem to be back in the early uncivilized days when there can be no law but martial law and when it requires real might to make right right.

When you send your sections of the sulfanilamide work, be sure to send real descriptions along. I have been suggesting to Hurteau that he should try to devise some test for determining whether there is sulfanilamide or sulfapyridine left in the tissue which he removes from the animal, that is, that he take part of the tissue and put it in to water and then test the fluid for the presence of sulfanilamide or sulfapyradine. He finds that covering the drug and the wound with amnioplastin gives an excellent result as far as adhesions are concerned and the dura peels off without any attachments. I do not believe that there is very much chance of the drug producing a tumour eventually; it seems to me that it is too soluble for that. However, because of your suggestion, Hurteau is going to run some animals over a long period.

I am glad to know that you are going to be in permanent quarters before very long. I understand that you will have your proper supply of nurses before this letter reaches you. I am expecting momentarily that the great need for your hospital activity will come. When it does, I shall be in figurative tears not to be there. As it is I am working along here with a sort of dissatisfied intensity. We have made a great step forward now because of the arrival of Dr. Stephens in the office of the Superintendent. He immediately took a different attitude toward the continuation of the bridge to the Ross tunnel and Mr. Harry Bronfman, who has been my patient, offered the other day to pay for this continuation. It will cost in the vicinity of \$8,000.00, done in stone like the rest of the hospital, and Mr. Bronfman is pleased to go ahead with it. Sir Edward has expressed himself in favour of it and we shall hear from Sir Herbert before long. They will start putting in the second elevator in about a month, so you will see some changes when you get back. The fourth floor of the Ross is not very full at the moment, perhaps due to the summer holiday.

Helen has had a sprained ankle for the last six weeks.

Letter to Lt.Col. Cone continued:

which does not seem to get any better, but otherwise everything is going along all right. Wilder is working hard in Minnesota and will be coming back soon. Ruth Mary is hoping to go in for the work of a V.A.D. when she comes back to town. Jeff is building a log cabin down in the country, practicing on his violin, and doing other things with the usual intensity.

I have been hoping to get over to see Avis, but actually I only get down to the Farm on Sunday. Guy Odom stopped with her at the lake when he went on his holidays.

Arthur Elvidge is going to camp for a few weeks with Ross' Field Ambulance. Erick will take over the wards for the time being.

Please give my best to all the boys,

As ever yours,

WGP/AD

No. 8.

October 15th, 1940

Dieut.-Col. William V. Cone,
#1 Neurological Hospital, RCAMC, CASF,
c/o Base Post Office,
Canada

Dear Bill:-

I have not heard from you since before the 1st of September. Do write and tell me all the things that you are doing and what is happening. Do not let the fact that you are busy or distraught keep you from setting pen to paper. I understand from others that you and Botterell made a report in Oxford, and that Hurteau has been working very hard and doing good work. I have been over his sections with him. I cannot see that these use of these chemicals is dangerous in lacerated brains. Write to me about your work, but also about the play, and what you are thinking and experiencing. Helen and Jeff and I are going down to see Avis tomorrow, this is her last trip down to the country. I will write to you after I return. The United States is going through a very rapid metamorphoses of opinion. It seems to me they are drifting away from Wilkie and toward Roosevelt. They seem to be realizing that Japan is bluffing in the East, and that there is only one course for them, and that is to join forces with England, one way or another.

Yours sincerely,

WGP/MM

Letter to Lt. Col. W.V. Cone continued:

I have not heard from you for a long while. I have been wondering what you are doing and where you are during this time of tremendous air activity. I do hope that the hospital is actually going and has beds and such things.

our emnioplastin
something definite to report very soon. September 14th, 1940
away at camp for three weeks attached to
rushing around and trying to find the book which is
really in its final stage. I have arrived here and has
come on as special secretary for a month or so to work full time

Letter No. 7.

Lt. Col. W. V. Cone,
c/o The Bank of Montreal,
9 Waterloo Place,
London, England.

Dr. Wade Abbott died the other day after a pretty long
he had an intracerebral haemorrhage about the size of
a walnut; this gave her an initial aphasia and weakness

Dear Bill:

Have you done anything about the manuscript of an
outline of routine treatment for head cases and also spine
and peripheral nerves which the D.G.M.S. wanted us to prepare.
I have been rather expecting that, during this period of in-
activity and when you are pretty closely placed to both
libraries and the military problem, you might perhaps write
this or that at least you would send me a draft of it. Do
let me know if you have done anything about it or if you
intend to do anything about it.

They have gone on to New York and Wilder and Ruth Mary have just
flown down. Hurteau has worked out a method by which he can
examine the cerebral tissue from a brain wound chemically
to see whether any of the drug is left behind. He has it
working quite well and fairly accurately and will gradually
discover how soon the last trace of the drug has disappeared.
We are unable to be sure of this histologically. We have
tried using sulfapyrazol in a case of osteomyelitis of the
skull, which was infected by staphylococcus, which seemed
to work well. All the specimens of the drug which we have
had Murray make cultures of so far have proved to be sterile
and I understand that they are sterilizing them with alcohol
and ether at the factory. As soon as Hurteau has reached a
conclusion, which should not be very far distant, I would
like to have him summarize it and send the manuscript to you,
have you amplify it and publish it at once in England if you
feel that the work is timely and worth while. I am not doing
very much on it myself so that it is hardly worth my being
even a junior author. Possibly, however, I can help him write
it up. Your work, however, ought definitely to be incorporated
and your name must be on it. Please let me know whether you
think it ought to be published and where.

Letter to Dt.Col. W.V.Cone continued:

I have not heard from you for a long while. I have been wondering what you are doing and where you are during this time of tremendous air activity. I do hope that the hospital is actually going and has beds and such things.

our amnioplastin
Guy Odom and I are going over/sections now and will have something definite to report very soon. Arthur Elvidge has been away at camp for three weeks attached to an ambulance. I am still rushing around and trying to find time to finish the book which is really in its final stages. Miss Lewis has arrived here and has come on as special secretary for a month or two to work full time on the book. I have got her a job with Gil Winant who is an old friend of mine and is the director of the International Labour Organization which is moving from Geneva to Montreal.

Dr. Maude Abbott died the other day after a pretty long illness. She had an intracerebral haemorrhage about the size of a walnut; this gave her an initial aphasia and transient weakness of the right side. After that, however, she also had blood in her spinal fluid. There was no sub dural collection. She seemed to go with evidence of failing cerebral circulation. She had had a hypertension which was a little lower during the time she was in the hospital and I attribute the gradual failure to lack of circulation. A good many of us went to the funeral.

Fred Anderson, our friend out in Bayport, Minnesota, has been here for a weekend with his son, who is just Wilder's age. They have gone on to New York and Wilder and Ruth Mary have just flown down following them to spend a few days with them in New York and see the Fair. Wilder will then go back to Bishops College while Ruth Mary will become a V.A.D. here. Priscilla is going off to school at Netherwood in New Brunswick.

a hopeless prognosis and I did not hesitate to do it for that reason. Hurteau has included a small bottle of sulphathiazol in the can that he sent you. If the can has not reached you with the manuscript in it, or if it has reached you, please cable and say whether you want to use this material in connection with the work which you have done, and want to include Hurteau with you in No. 9 publication there, or whether you think it would be better for him to publish it here. To my mind this is work that is helpful in deciding the handling of certain types of brain wounds, and therefore worth publishing.

October 18th, 1940

I am sending this letter by both air mail and Lieut.-Colonel William V. Cone, #1 Neurological Hospital, RCAMC, CASF, Cape/ East Post Office, Canada. I have been trying to trace down the source of the rumour but although Meakins made that statement in a lecture he gave the other day, he himself does not know who it was who told him. I have a further note on amnioplastin, sending a copy both to Storer and to Dorothy Russell. I think we may yet get a form of amnioplastin. Two weeks ago Hurteau forwarded to you in a can sections which show the results of his work, and also a manuscript entitled "Two Experiments on the Local Application of Sulphonamide to Brain Wounds". His paper shows clearly, it seems to me, that these chemicals do not injure the lacerated brain. He has forwarded the material to you in accordance with my letter to you of considerable period back. I suppose you have answered in regard to that, but I have never received any reply. He has also described a method for determining the persistence of the drug in a brain wound chemically, rather than simply by histological examination. This makes possible to state the rapidity with which the drug disappears. The method is accurate in detecting qualitatively the presence of less than 5/10 of a milligram of these drugs in the brain. Sulphapyridine is the slowest of the three to be absorbed, but cannot be detected after thirty-four days. Sulphathiazol cannot be detected after seventeen days, and sulphanilamide cannot be detected after eleven days. Hurteau has a feeling that sulphathiazol is perhaps the best to use before one has the culture but the difficulty of having sterile chemicals made him hesitate. Yesterday I placed sulphapyridine directly in the bed of a brain abscess. I was operating on a group of multiple abscesses which I removed from the centre of the left hemisphere of the patient. I put it around the tube, and placed more of it with a gauze drain in the tube so that it will gradually permeate there. It was one of those metastatic abscesses which I think has

a hopeless prognosis and I did not hesitate to do it for that reason. Hurteau has included a small bottle of sulphathiazol in the can that he sent you. If the can has not reached you with the manuscript in it, or if it has reached you, please cable and say whether you want to use this material in connection with the work which you have done, and want to include Hurteau with you in the publication there, or whether you think it would be better for him to publish it here. To my mind this is work that is helpful in deciding the handling certain types of brain wounds, and therefore might be worth while publishing.

I am sending this letter by both air Mail and ordinary mail. I think you must have written me but I have not heard for a long time. Rumour has it that you disapprove of the use of these drugs on the brain. I have been trying to trace down the source of the rumour but although Meekins made that statement in a lecture he gave the other day, he himself does not know who it was who told him. I have forwarded a further note on amnioplastin, sending a copy both to Storer and to Dorothy Russell. I think we may yet get a form of separation which will be satisfactory.

It begins to look now as though no effort will be made at an invasion, and that the long war that we have all predicted will actually come. I cannot see the set-up over there. You will have to write me. Please let me know whether I should propose next spring that Harding takes the place of Childe. I am incidentally not quite sure whether Harding is willing to go. Is there a place in the Unit for Don McEachern? Or for Art Young? Does Colin Russel intend to stay on in active work there, or is he going into a consulting role? Please give my best to Colin and to everyone there.

Yours sincerely,

WGP/MM

Letter to Lt. Col. Cone continued:

We shall all miss you very much at Christmas and shall be thinking of you each and every one.

At the Wednesday afternoon meeting, Souder, of the Presbyterian Hospital Notro New York, was to give a blood transfusion. He arrived by plane and was an hour late. Consequently, to partly fill in the gap, I showed some of the coloured films which Stewart sent over with pictures of members of the hospital. The photograph of you and Colin and Hatteral in front of the sun-dial called forth cheers. At Lt. Col. William Cone, #1 Neurological Hospital, RCAMC, CASF, c/o Base Post Office, Canada. November 8th, 1940

Dear Bill: Stephens told us at the Board Meeting yesterday that

Allan had given Revenscrag to the Hospital. I have it from other sources. I am enclosing a letter which was received by Mr. W. N. White of the Young Men's Christian Association here in Montreal. He wired Mrs. Nichols at once. I suppose you have had word, of course, by now that he is all right, but I think you would like to see this letter in any case. Do get in touch with Mrs. Nichols yourself. Communication seems to be so difficult now that, if you get this letter, it would do no harm to communicate with her. I have not heard from you for at least two months, and am anxious to get some word. In my last letter I asked you to cable. It had to do with the communication of Hurteau. I am expecting a cable any time now, and if it does not come will think that my letter had not reached you.

There is a great stir in the Institute at present, getting ready the Christmas boxes to go over to #1 Neurological Hospital. Everyone works at them with such a will, and the packing and collection goes on during the day in all free time and also far into the night. Miss Fanning has worked especially hard and has taken into her hands a great deal of the detail of the packing. Miss Montgomery and the others have all helped, and of course always Miss Flanagan. Many of them have made marmelade and candy. Molly Harrower has worked with Mrs. Petersen and others collecting the books and composing limericks. Helen spent two days on end making candy, and I suppose everyone else has been doing the same sort of thing. Ruth Mary is taking the boxes down to be mailed tomorrow, and Art Young has done a lot in organizing things. Mr. Duggan has called up wanting to do something and also Miss Isabella McClennan. Mrs. Hodgson has sent a lot of stuff in and has everyone in her household and elsewhere knitting away at a great rate.

Letter to Lt. Col. Cone continued:

We shall all miss you very much at Christmas and shall be thinking of you each and every one.

At the Wednesday afternoon meeting, Scudder, of the Presbyterian Hospital in New York, was to speak on shock and blood transfusion. He arrived by plane and was half an hour late. Consequently, to partly fill in the gap, I showed some of the coloured films which Stewart sent over with pictures of members of the hospital. The photograph of you and Colin and Botterel in front of the sun-dial called forth cheers. At the end I showed the picture of the nurses in their blue uniforms, and I may say that the cheers were increased. I tell you this so that you may get a proper perspective of the interest taken in the different branches of your hospital.

Dr. Stephens told us at the Board Meeting yesterday that Allan had given Ravenscrag to the Hospital. I have it from other sources that Ravenscrag was costing Sir Montague about \$30,000.00 a year to keep it in its present condition of resigned splendour. Allan tried to get the University to buy it so that it could house the International Labour Organization there, but that organization is to be housed by McGill in the McGill Alumni Buildings, or whatever they are called, on University Street. Stephens has brought up the proposal for a sort of sickness insurance for members of the University to be applicable to each of the University hospitals. It seems to me to be an excellent scheme. All those on the teaching staff of the University who want to take part in it will be able to get a certain amount of time at a flat rate of \$6.00 a day, which will cover semi-private accomodation and all of the examinations, such as x-ray and so on. By an addition of \$3.00 they can secure a private room with all the extras. It has not gone through yet but is a step in the right direction. They have begun construction of the bridge extension. Harry Bronfman, together with his brothers, is providing the money. The extension will be the property of the Royal Victoria although the money was given to the Institute.

I gave Dr. Stephens a copy of the Foundation Volume of the M.N.I. and received rather an extraordinary letter back. I am enclosing a copy of it. As you see, we have a Superintendent now who, in addition to having insight and ability for organization, has a background in medical experience, which is rather extraordinary. Holmes might be interested in what he said, provided you don't quite it leterally!

Letter to Lt. Col. Cone continued:

Well Bill, I wish you a Merry Christmas wherever you may be. I look forward to the time when the war will be over and we can be associated in the old way again. This Spring you must get ready for me to take your place when the year is up. I don't say that you won't wish that you were back again sometimes.

Give my best to everyone, especially to Colin and Botterel, and Humphreys and Stewart. Incidentally, I wonder why I have never heard from Humphreys at any time. I would recommend reading the Christmas Carol as the best way of reproducing a proper atmosphere, even in the surroundings of a hospital.

As ever yours,

WGP/AD
Encls.

P.S. I am enclosing a copy of my introduction of the Governor-General at the dinner of the Royal College of Physicians and Surgeons. It was rather a struggle, but everyone said that it was a success and the afternoon meetings were a great success, Gordon's and Gallie's papers being extremely good. When I can get hold of copies of those two papers I will forward them to you.

Letter to Lt. Col. Cone

I have had a meeting with the ... and with Dr. ... to understand the problem of patient's files and I think would do very good work. Let me know your reaction to this. I have hoped also to bring Bob Podens along. He is at present doing an M.Sc. and is summarizing all of the recent work on reaction to injury and on wound healing in connection with war injuries. That sounds broad, but actually his thesis is pretty broad. Ted. Rasmussen is off from service for six months and January 10th, 1941. We are trying to establish just how much spinal fluid can be displaced from the cerebrospinal system at varying pressures. When we have done so we hope have Frank apply his pneumatic suit to a man down here, and I think that probably we can demonstrate that the amount of cerebrospinal fluid to be displaced from the cerebrospinal system is ... applied. In other words, I feel that the ... I am sure you do, but ... on the floor of the skull when the ... number ... is increased. Lehman is working on methods of anaesthetizing the individual convolutions of the brain without injuring it.

Lt. Col. William Cone,
#1 Neurological Hospital, RCAMC, CASF,
c/o Base Post Office,
Canada:

Dear Bill:

Your voice came over the radio on Sunday. I was up skiing at Shawbridge and came in to hear the broadcast. It lasted a half hour and was made up of a lot of messages from the men to families and sweethearts, but your voice came in at the very end and was extremely well done. That was the only intelligible message of any general sort that has been received or could be understood properly. We understood that Col. Cross and Colin were going to speak, but I suppose that they must have cut them off. I saw Hartland MacDougall. He did not hear the broadcast but had been told about it and was somewhat disturbed because he said he had not given the nurses any silk stockings but that it was a good idea and thought perhaps that was what you meant!

This letter is No. 7, Bill, in the new numbering. The last one I wrote to you was on the 12th of December. I am sorry it has been so long because I made up my mind to write regularly without waiting for replies from you. That does not mean that I do not want any.

I have mentioned my plans to you several times, namely that I would approach Col. Gorssline and tell him that I was ready to go whenever he wanted me, but that the Neurological Institute could not be run unless you returned. I am anxious to have your reaction to my plans of movement; you have not mentioned it in any letters that have arrived. I am going to propose to him that Harding also replace Childe. I am not quite sure yet whether Harding is willing to go, but it seems to me that it is very desirable for Childe to be back here for a year. His family need him rather a good deal. Harding has come along and is doing good work. His general experience is not up to that of Childe, of course, but he seems

*I have just talked to Harding & he is unwilling to go for 18 months, i.e. 1 yr from next June!
I don't know whether I can train anyone else or not. I have written A return*

Letter to Lt. Col. Cone

I have had a meeting with the Principal and with Dr. to understand the problem of patient's films and I think would do very good work. Let me know your reaction to this. I have hoped also to bring Bob Pudenz along. He is at present doing an M.Sc. and is summarizing all of the recent work on reaction to injury and on wound healing in connection with war injuries. That sounds broad, but actually his thesis is pretty broad. Ted. Rasmussen is off from service for six months and is working on blackout. We are trying to establish just how much spinal fluid can be displaced from the cerebrospinal system at varying pressures. When we have done so we hope to have Frank apply his pneumatic suit to a man down here, and I think that probably we can demonstrate that the amount of cerebrospinal fluid to be displaced from the cerebrospinal system is less with Frank's suit applied. In other words, I feel that the brain does not float in the spinal fluid, as I am sure you do, but that it is actually resting on the floor of the skull when the numbers of G is increased. Lehman is working on methods of anaesthetizing the individual convolutions of the brain without injuring it. I was delighted at Roosevelt's speech, and at the way in which they are moving along down in the States.

We have ended year in practice. Erickson has taken in just the amount that is allotted to him in the partnership agreement. My total income is a little lower than that of last year, but only a little, so that I have not done as well as I hoped to do, but you will find things not too bad. We will continue exactly as we have during the past year until your return. I cannot ask about myself and yourself because I do not know. The book manuscript will go out in the next day or two. The title will be Epilepsy and Cerebral Localization. I suppose that it will appear in the press in about four months. I hope to have it come out before I leave this county, but it does not matter as Erickson can put it through. It seems to me that when it does come out it may attract some attention to the problem of focal epilepsy and that, from the point of view of practice, Erickson will be able to handle this and will capture some income for the firm.

Yours,

I am in doubt about what to do about advising Arthur Elvidge to go overseas, also Donald McEachern and Young. I do wish that you would give me your reactions by letter right away. Is McEachern needed? He certainly is needed here, but I fancy he is getting a little restive. There is no one there at the Hospital that could alternate with him. Elvidge is mixed up with one of the organizations here; as you know he went to camp this summer. If Bob Pudenz came over now could he replace Stewart, or could those men not be spared? I recognize that you cannot decide these things any more than I can, and yet want very much to have your reaction to them. Do write to me right away. None of us has heard yet as to whether we passed this last Common to All Arms examination. It was a very difficult one, if I do say it. McEachern, Harding and I took it; the others seem to have passed the first time. If you were here you would see me blushing now before the dictaphone!

Letter to Lt. Col. Cone

I have had a meeting with the Principal and with Dr. Stephens and we have arranged to appoint Kershman Executive Assistant. The full title is "Executive Assistant to the Director". He will come below Petersen in rank, of course, but he will take over the supervision of our financial relations with the Royal Victoria. They are very much in need of some help as we are running behind steadily. There has been some definite reduction in the number of private patients, but that is only part of the answer.

All four children were home for Christmas and we had a very good Christmas indeed. We all thought of all of you very often. The news is full of exultation over the British success in northern Africa and the Greek success in Albania. For myself, I am rather exasperated by all this talk about things that matter very little. I wish to Heaven I could see what Germany is really planning and preparing for. The battle of Britain is certainly yet to be fought, and also the battle of the Dardanelles. We were perfectly delighted at Roosevelt's speech, and at the way in which they are moving along down in the States.

Bill, another thing I wish you would give me your reaction to, that is as to whether anyone leaving here would have to be there before his alternate was freed; I mean, if Hardingg was going over would we have to take care of the X-ray here for a period of a month or could the Unit there get along without the x-ray man. I cannot ask about myself and yourself because I do not know whether the D.G.M.S. would have me replace you, but, in any case, do you think that we could meet here for a turn over, or that we could meet there after I go over, or that we should make the change simultaneously.

I hope you and Colin are staying out of the Marble Arch these days. Give him my very best.

Yours,

WGP/AD

Lt. Col. W. V. Cone,
RCAMC, CASF.,
#1 Neurological Hospital,
Canrecord, London.

Interviewed D.G. today. Planning leave here in one month to replace you. D.G. will cable London shortly. Are you equipped for three possible mobile teams. Equipment must be requested from London. Please requisition necessities and inform me by cable. Have you written neurosurgical technique or shall I prepare pamphlet to standardize technique Canadian Hospitals. Pudenz accompanying me. Do you advise Stewart return now or December. Your last letter arrived October. Your return advisable before my arrival there. Institute can not stand long interim. Regards Colin. Cable reply.

Wilder Penfield

Feb 12. 1941

Cabled. - night letter

Feb. 17th, 1941.
E.F.M.

Lt. Col. W. V. Cone,
#1 Neurological Hospital,
RCAMC, CASF,
Canrecord, London.

Please cable some reply, even partial, to Wednesday's cable.

Wilder Penfield.

"Via Marconi"

FOR
SPEED
AND
ACCURACY

R.M.BROPHY
General Manager

POST-LETTER TELEGRAM



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WIRELESS



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DR CHILDER PENFIELD
MONTREAL

MAR 28
"Via Marconi"

x Day's

MY REQUEST FOR ARTHUR BILL AND COLIN CONSIDERED
REASONABLE IN LONDON STOP IF GRANTED YOUR FULL TEAM
EAGLESHAM BOB AND DON NECESSARY STOP PLEASE PERSEVERE
CONE

W. H. W. W. W.
ACCURACY AND SPEED FOR



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Condition that it
subject to the
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been received
This message has

Transfer prevented postponed at
three months reason board my
my plat roentgenograms decision
absurd question Pyles reconsidering
after three months Feel fine if
Sorry am helpless feeling perfect

Decisions
Board concerning my Roentgenograms
postponed three months confidential
Feel fine but furious, unable alter decision
Will try substitute another autumn
~~idea stop team substitution, not~~
approved. Transfer impossible before July
Substitution as team imperfect refused
~~At~~ Ottawa refuses substitution of whole
team ^{writing} ~~but~~ will try for
individuals later. ~~I~~ Talked Baker.
Please write, ~~fully~~ ~~with~~

W.P.

Col. Cone
Hackwood Park
Basingstoke.
Engl.

March 14th, 1941

Lt.Col. William Cone,
Hackwood House,
Basingstoke, England.

D.G. resents further demands. Colin must approach London. Seeking satisfactory substitute for Arthur. Cable opinions Eaglesham substitution.

Wilder Penfield

~~ExMrs.~~ Night letter.

Lt. Col. W. V. Cone
#1 Neurological Hospital
R.C.A.M.C.
Canadian Army Overseas.

BASINGSTOKE, England

HAVE YOU RECEIVED MY TWO CABLES

WILLIAM CONE

Have discussed with D.G. who only
Two cables received D.G. only interested
considers
~~in your~~ our exchange no one else
now. Am finishing neurosurgical
manual. ~~Do~~ am ignorant why D.G.
will request exchange cable London.
Wilder Reayfield

Y Batecaple Antisciq and Terectiae Vilmeisra Collectioe

HYDROXXI

MOBKHUONE

37 38 39 30 31
50 51 52 53 54 52 50
12 14 12 12 17 18 19
6 7 8 9 10 11 13
2 M T W T F S
1940 OCT 1940
NEXT MONTH

37 38 39 30 31
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2 M T W T F S
1940 OCT 1940
NEXT MONTH

HYDROXXI

LAST MONTH

1940	AUG.							1940
S.	M.	T.	W.	T.	F.	S.		
				1	2	3		
4	5	6	7	8	9	10		
11	12	13	14	15	16	17		
18	19	20	21	22	23	24		
25	26	27	28	29	30	31		

1940 SEPT. 1940

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
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29	30					

NEXT MONTH

1940	OCT.							1940
S.	M.	T.	W.	T.	F.	S.		
			1	2	3	4	5	
6	7	8	9	10	11	12		
13	14	15	16	17	18	19		
20	21	22	23	24	25	26		
27	28	29	30	31				

WEDNESDAY

18

HYDROXYL

MORRHULONE

HYDROXYL

A Palatable Antacid and Laxative Alimentary Corrective.

[Faint handwritten notes and bleed-through text from the reverse side of the page, including words like 'MORRHULONE' and 'HYDROXYL' written upside down.]

"Via Anglo"
FOR
SPEEDY
SURE
SECRET
SERVICE

The All British Cable Route
**ANGLO-AMERICAN
CABLEGRAM**

ESTABLISHED 1866

CLASS OF SERVICE

This is a full-rate Cablegram unless its deferred character is indicated by one of the following signs preceding the address.

LC = Deferred
NLT = Cable Night Letter
Ship Radiogram

DIRECT CABLE SERVICE between THE DOMINION OF CANADA and EUROPE

Received at Cable Office, 140 Notre Dame St. West, Montreal. Tel. MARquette 4241★ (Always Open)

M 011 BASINGSTOKE 28 7/24OP

1941 MAR 7 PM 12 54

WILDER PENFIELD MTL=

PLEASE DEMAND COHN ARTHUR AND BILL NOW FOR I CANNOT MAKE
THINGS GO THERE WITHOUT THEM TO HELP CABLE ME HACKWOOD HOUSE
BASINGSTOKE=

WILLIAM CONE.

Further
Dg resents demands
Demands for others ~~for class~~
~~exchange possible later~~
Arthur's ~~possibility~~ when substitute ready
Colins ~~recommendation~~ must
Substitute when secured could possibly displace
Arthur. Collier must apply London

Dg resents further demands Stop
Seeking satisfactory substitute for Arthur
Collier must approach
London. Eaglesham willing cable Arthur's
Opinion of Eaglesham
Wilder Peafield

Cable opinions Eaglesham substitution.

Wilder P. 27.

CLASS OF SERVICE
This is a full-rate
Cablegram unless its
character is
indicated by one of the
designations above
indicated by the
initials of the
operator

ESTABLISHED 1852
DIRECTOR GENERAL
COMMUNICATIONS
AND EUROPE

Via Marconi

FOR
SPEED
AND
ACCURACY

R.M. BROPHY
General Manager

1342,

MARCONIGRAM



WORLD
WIDE
WIRELESS



CANADIAN **MARCONI** COMPANY
(LIMITED LIABILITY)

CLASS OF SERVICE	SYMBOL
Full Rate Message	
Deferred "	LC
Night Letter Message	NLT
Daily Letter "	DLT

If none of these three symbols appears in the address, this is a Full Rate message; otherwise its character is indicated by the symbol appearing as the first word in the address.

P.J. MURPHY
Traffic Manager

R28 GNKH BASINGSTOKE 11 3 1111

"Via Marconi"

161

MAR 3 2 20 PM 1941

WILDER PENFIELD MONTREAL

HAVE YOU RECEIVED MY TWO CABLEGRAMS

WILLIAM COVE

PHONED

MARK YOUR REPLY *"Via Marconi"* AND FILE AT ANY CANADIAN PACIFIC TELEGRAPH OFFICE
OR CALL MARQUETTE 8144

Form No. 200-17-M-10-40-4



MARCONIGRAM



**WORLD
WIDE
WIRELESS**



CANADIAN MARCONI COMPANY
(LIMITED LIABILITY)

R.M. BROPHY
General Manager
1912

CLASS OF SERVICE	SYMBOL
Full Rate Message	
Deferred -	LC
Night Letter Message	NLT
Daily Letter -	DLT

If none of these three symbols appears in the address, this is a Full Rate message; otherwise its character is indicated by the symbol appearing as the first word in the address.

P.J. MURPHY
Traffic Manager

L140 GOKC

BASINGSTOKE 58 24 2139

"Via Marconi"

193

FEB 26 1941

NLT WILDER PENFIELD NEUROLOGICAL INSTITUTE MONTREAL

YOUR CABLE 12TH FEBRUARY RECEIVED TODAY FEBRUARY 24TH ELEVEN
DAYS LATE WILL DISCUSS MOBILE TEMAS PAMPHLETS AND OTHER
THINGS WITH YOU IN MONTREAL PLEASE ARRANGE TO EXCHANGE
COLIN ARTHUR AND STUART IF I AM TO RETURN STOP DO NOT LEAVE
BEFORE YOU SEE ME MOST OF INSTRUMENTS HERE OTHERS ORDERED

WILLIAM CONE

MARK YOUR REPLY *"Via Marconi"* AND FILE AT ANY CANADIAN PACIFIC TELEGRAPH OFFICE
OR CALL MARQUETTE 8144

Form No. 206-21M-10-22 T.S.



MARCONIGRAM



**WORLD
WIDE
WIRELESS**



CANADIAN MARCONI COMPANY
(LIMITED LIABILITY)

R.M. BROPHY
General Manager

CLASS OF SERVICE	SYMBOL
Full Rate Message	
Deferred "	LC
Night Letter Message	NLT
Daily Letter "	DLT

If none of these three symbols appears in the address, this is a Full Rate message; otherwise its character is indicated by the symbol appearing as the first word in the address.

P. J. MURPHY
Traffic Manager

2250

R248 GOKC

BASINGSTOKE 43 22 1712

"Via Marconi"

FEB 23 12 59 AM 1941

WILDER PENFIELD MONTREAL

HAVE YOU TALKED WITH PHILIP WILSON STOP COLIN AND
I WILL GLADLY EXCHANGE STOP BUT MY ADVISE TO YOU IS
SIT TIGHT STOP IF YOU DISAGREE START WHEELS TURNING
AND I SHOULD LIKE A WEEK WITH YOU THERE.

WILLIAM CONE.

MARK YOUR REPLY *"Via Marconi"* AND FILE AT ANY CANADIAN PACIFIC TELEGRAPH OFFICE
OR CALL MARQUETTE 8144

*Bill this is a copy and my
only one. Send this back
at once to your answer.
W.P.*

Major Baker has arrived and I have had two long talks with him. He has, of course, given me a great deal of first hand information and more insight into situations than I have ever had before. I wonder if he is a little prone to exaggerated opinion. I will write at length, Bill. You have not written to me for a very long time and it is hard for me to keep in touch unless you do so. I know that there are times when you probably don't feel like writing but those times are busy, but, nevertheless, you can do it.

April 7th, 1941

I am very much concerned about some of the things which are going on together in regard to the Unit, and I don't know how much initiative I should take, if any. I wish I could go over now although I know I should not be able to straighten out anything. I don't know how you have been able to do unless it is that a new broom sweeps clean. Lt. Dr. W. V. Cone, when they refused me I thought at first of Hackwood House, Basingstoke, Hants, England, please you at once. After talking with them I don't think it is wise. I will get some sleep and get into absolutely top-hole condition so that I can see they saw in the plates will disappear.

I have just cabled you that a board was held on the x-rays taken of my chest and that they have postponed the decision for three months. You may remember that Arthur Childe made the suggestion when he took the plates in January 1940 that I have periodic plates taken. I was going ahead with my routine preparations for leaving and was called down by McGibbon for physical examination and told to bring plates of chest and urine, which I did, of course. I passed the examination quite satisfactorily but the plates were sent to Ottawa. They were then returned to Byers for an opinion. Byers decided to have a Board after going over them. The board was made up of Peirce and Meakins. Meakins, I think, felt that I could quite well go ahead without delay. Peirce was undecided, feeling that there was something new in the plates, and Byers, as you know being ultra conservative, decided to postpone decision. This report was sent to Ottawa. I called up Archibald to ask him to intercede with the D.C.M.S., which he did. The D.G. decided that they must abide by Byers opinion. Byers says he will reconsider the whole thing in July. He said the middle of July, but I shall have plates taken and go to him on the first of July. I was just on the point of buying my uniform and had made final financial arrangements and other things. I am sorry, Bill, but I seem to be helpless for the moment. I have not had a cold this winter and have been feeling quite all right, although perhaps not quite so full of energy on the skiing hill.

Please treat the reason for postponement of our exchange as confidential. I do not think anything is to be gained by talking about x-ray plates of the chest, and so on. You can explain it as you like, only don't spread it about that I have tuberculosis because I certainly haven't. I do not know what has been done. I do not know what

Major Baker has arrived and I have had two long talks with him. He has, of course, given me a great deal of first hand information and more insight into situations than I have ever had before. I wonder if he is a little prone to exaggerated opinion. Do write to me at length, Bill. You have not written to me for a very long time and it is hard for me to keep in touch unless you do so. I know that there are times when you probably don't feel like it and that times are busy, but, nevertheless, you can do it.

I am very much concerned about some of the things which I gather in regard to the Unit, and am in doubt as to how much initiative I should take, if any. I wish I could go over now although I know I should not be able to straighten out anything that you have not been able to do unless it is that a new broom sometimes helps. When they refused me I thought at first of suggesting that Arthur Elvidge replace you at once. After talking to Major Baker I question whether this would be wise. I will get lots of sleep and get into absolutely top-hole condition so that whatever it was they saw in the plates will disappear.

*What do you think?

I have seen Lieut. Jones. We have decided to have him spend the night to see whether he has an accumulation of fluid in his sinus after being all night in bed and, perhaps, to see the effect of blowing his nose during an x-ray.

In regard to the exchange of Arthur Childe, I had a very good letter from him which has helped a lot. It is obvious that he feels that he could have his laboratory in shape by the autumn and I will do everything I can to propose to the D.G.M.S. an adequate substitute for Arthur at that time. They are having a lot of trouble in regard to x-ray at the Children's. They are willing to take him back at any moment and will help me to bring pressure upon the D.G. to get him back. Eaglesham is now working at the Institute with Harding. You have not answered as to whether Arthur Childe thinks he could do the work, although you mentioned Eaglesham's name in your cable, which came, incidentally, in four days. Don McEachern is ready to go over, and Bob as well.

In regard to Colin, his first reaction was that your request for Colin's return was absolutely unreasonable. I have talked to the D.G. and so has Dr. Archibald, but I shall talk to him again when I go up next week and may learn a little more and will, at all events, do what I can. There does not seem to be much prospect of Bill Stewart's being called back.

If I go over, I shall be more concerned in trying to standardize the method of treatment of injuries of the nervous system in all Canadian hospitals than in regard to the details of #1 Neurological. I say I shall be concerned about it although I do not know whether they will let me do anything about it. You have never mentioned at any time anything about this sort of thing. I do not know what has been done. I do not know what

instructions are given to the British Medical Service or to the E.M.S. Please write to me in detail about this. After reading over a book like that of Jolly and some of the others, I realized that the general attitude toward head injuries is prehistoric as far as some circles are concerned. I have finished a Manual of Neurosurgical Treatment but am now tearing it to peices and doing it over again. I have made simple sketches. The D.G.M.S. was going to send it by bomber to England and I sent him three copies with this in mind. However, after keeping them about ten days he returned them saying that he had shown them to some members of his staff there and felt that it was satisfactory, evidently having decided not to send them. I will put it in shape and send it back to him and see whether he will change his mind about sending it over now. If so, I will see that you get a copy. Please work on it at once and write marginal notes and send it back. In the meantime, let us go ahead with our plans for exchanging in the summer and let us take up our correspondence again.

Baker tells me that Stewart and Humphreys are doing beautifully and that the neuro^{log}ical service is simply humming.

My best to everyone,

WGP/AD

April 22nd, 1941

W. V. Cone, Esq., M.D.
Hackwood Park,
Basingstoke, Hants,
England.

Dear Bill:

Here is the Manual. Please read, correct, and cable me whether or not you think we could go ahead with printing it. It would be a good idea if you would get into touch with Cairns and Jefferson and get their reactions to it also. Perhaps Dott also, but I do not know about that. I could add some more practical drawings of instruments, etc, as well.

With love,

Yours,

WIDE

WGP/AD

April 26th 1941

Dear Herb:- This letter is a very personal one which I'd rather you would not discuss and not take any action about. Things seem to be pretty well in hand now. If help and pressure is needed I'll cable. And please burn it. I dislike discussing personalities when the things I have to say are derogatory.

Your air mail letter came today opened by the censor as usual. I am relieved in some ways that you have to stay put. Your responsibilities are greater than my own are and your opportunities for doing greater good are better there than here. When I asked Phillip Wilson and others to talk to you I hoped their observations would make it clear that this was the case for you had not seemed to understand. It is not that I would not welcome the change over for I too feel I could be doing more valuable work at home. Incidentally neither of those bringing you direct news had any coaching from me. My request was only that they include in their discussions certain points giving their own impressions about it all - not mine and with some things they have told you I may not agree. Phillip Wilsons unit for example was not wanted at first and they were allowed to come because it was considered the diplomatic thing to do. The good work they have done is appreciated by most now but it is still not all clear sailing.

I wish that some of the details I have to tell you were not unpleasant ones. Here are a few. Arrangements which were considered adequate in 1914 are out of date now. It should be possible to have a much better set up in the field. The Americans have recognized how shifting modern warfare will be and with their completely mobile units fully mechanized should for certain types of action and locations be much better able to do good work. It doesn't do much good to have mobile operating teams if the facilities for the care of the patient after operation are lacking. Have you seen their small mobile hospital plans? So much needs to be changed. Adequate leadership would help a lot. In the present situation men with vision and of university caliber acting as consultants in the various branches of medicine would help a great deal,

that is if they were given adequate backing in the way of equipment and supplies.

It is a mistake to have a unit composed of men from two rival universities unless they are compatible or will forget politics for the time being. Before we left Canada for example judgment had been passed on the type of work we were doing at the institute. It was classified as "Loney" from the surgical standpoint and the research work as poor. Criticisms like this come in a quiet way by one who has an active alert mind and a superbly pleasing personality, does a lot of damage to the spirit of the unit and the service as a whole is difficult to coordinate. I can understand better now the letter you received from a Toronto man when Lord Tweedsmuir died. The incident about the anesthetic situation is another example. I believe this particular problem is straightening out. Admittedly there are many different ways to do things but if we had waited for complete accord on everything before moving ahead we would be no where. Next S. P. H. has not done and is not doing good work. He is careless, superficial and unreliable. Rex is McCormick a good man. Our first anesthetist an unstable inexperienced lad and very immature went home with a so-called ulcer - a fortunate break. We are better off in this respect now. It is inevitable that many of the first to enlist are unstable personalities who can not be expected to do a better job here than they have at home. These are things I have discussed with no one but Colin and your informants will not have known of them from me. I have not felt Bill B exaggerates things but he has a knack for picking out the unpleasant ones.

There are bright spots. Arthur Childs is a brick. Bill Stewart has done good thoughtful work. The laboratory is a blessing and Fred Hanson is running it well from the medical or chemical standpoint and Cliff Richardson is doing a good job in neuropathology. Most of the surgical equipment is here but we have no good anesthesiologists or nurses.

3.
Miss Mackay is in charge in the operating room and is doing a good job under some difficulties because of lack of support from higher up and some carry over of provincial rivalry. All the nurses have equal rank and for a time it was difficult to get responsibility assigned. This is straightened out now for the group is a good sincere one and most of the hatchets are buried.

I do not think it is unreasonable to expect the type of work in our military hospitals that one finds in civilian. With forecipient this can be accomplished. The rank of the younger men makes them feel in some instances that they have a much better hand than they should and the control we have over the patients is such that they have a tendency to regard the army as a place to try things out. With this attitude I can not agree of course. We see so much unessential work from the E. M. S. hospitals - some very sad things where a younger man has acted unwisely. Even this part of the picture is changing and sever gastrostomies, ^{for example} are being done for early ulcers etc than ^{some time ago} in the English hospitals. This ^{type of things} has never been so much of a problem in the Canadian units.

Distances are so short in England. It is 45 miles to one Canadian Hospital and 40 to another etc. There is no reason why all the Canadian head, spine and peripheral nerve injuries could not be transferred here at once. Gradually I hope this will be done but it could be facilitated if Colin & I had the kind of consultants the E. M. S. hospitals of our district are cooperating in this respect better than the Canadian ones thanks to Jefferson and we are notified of the neurosurgical cases and have the authority to transfer them here. We are acting you see as E. M. S. consultants for the district -

We have two ambulances - 4 patients each - to send out and bring casualties in.

Really we have had very little to do from the surgical standpoint. Usually there are about 30 neurosurgical cases in but we have had only 60 admissions to the service. We have really been running for ^{only} three months you know. There have been about 550 neurological admissions. Things have been picking up recently. The delay in our equipment gave us such a late start.

Now the huts are going up. By August the new operating rooms should be ready.

We have quite a collection of photographs of patients and wounds already.

I do hope this gives you more of the picture. I have faith that things will straighten out and that even those in whom ^{been} ~~we~~ disappointed will be happier and do good constructive work in the future. They all have the ability to do it. Criticism of almost every move and argument has stopped at least and as things are shaping up those who would like to have run things are beginning to feel perhaps that we are going to have a really good set up and get some good work done in spite of our McGill background - even such good work that they will want to be in on it. If we can all be loyal, cheerful, courageous and later very industrious and keep shooting straight things will go. You would expect that there should be the same

5.

control over the staff that is present in civilian practice. Army routine does make it more complete superficially but in ways that are not so important. It is easy in other words to live up to the letter of the Law than the spirit of it and if this is the aim familiarity with T.R. and O. will protect the individual from too much trouble.

I have asked that head injuries should be sent to us directly from the casualty clearing stations, that sulpho-amides be dusted into the wounds and pressure bandages be applied to control bleeding and supportive measures only be carried out there. Since this a few have been following out my request - it was a personal one not ordered by headquarters and we have been much happier about the situation. The end results are so much better than when the patient has been given an anesthetic, the wound inspected, debrided even though the standard method has been followed as they understand it from instructions and so on. Rather than have a manual for them to follow I would like to see more thought put on transportation of the patient back to a point at which the ultimate can be done or at least much more deliberate work. The E.M.S. through Colebrook's influence and others is doing this and the special centers are justifying their existence. Oh there are so many ways of doing things but there is one best way and it is not a slip shod one. So many of the

statements in this letter are general ones; nevertheless they can be backed up by specific examples. I hope you will not pass them by with the feeling they are just Bill's whims for they are carefully considered. On the other hand I would like to amplify many of them for I would like to give you a complete picture.

I was reassured by your cablegram that the rays were not alarming. Nevertheless if you need me ~~again~~ you can have regularity in rest periods I will gladly come for in this world of change certain aims and values have not changed for me and the work we had hoped to do and the service we had hoped the institute could render are just as big and important as ever. It will be lovely to get the old team work going again. With you here it would not be so necessary for the others to return. With out you I could not carry on with out them for the group there now has changed so and I would find it difficult to carry on with Don + Eric as I have in the past. Colin would gladly return if he could be assured that the retiring hint could be raised. I do so wish it could. He will add a lot to the spirit of the place for a long time to come. If you still feel you must come after this letter please struggle more to get Arthur, Bill and Jim back. The SMO here is quite willing that they should go back if I do. Remember that the army routine does block individual effort honors and that men like Carmichael are doing infinitely more out of the service than they can do in it.

Finally I do believe that we are doing good work here when we have it to do. Have you read our article on the Blessed Pheasant in Lonest? We are trying hard and sincerely and will continue to do our very best and trying to do it unselfishly.

My love to Helen the youngsters and you. Please please take care of yourself - there is still a lot we have to do together. Bill.

P.S. Please burn this letter. It is ^{an} unexpurgated spontaneous outpouring

"Via Marconi"

FOR
SPEED
AND
ACCURACY

R.M. BROPHY
General Manager



WORLD

WIDE

WIRELESS

CANADIAN **MARCONI** COMPANY
(LIMITED LIABILITY)



This message has
been received
"Via Marconi"
Subject to the
Condition that it
be delivered by
mail.

P.J. MURPHY
Traffic Manager

P544 GOKC SANS ORIGIN 22 28 PLT

MAY 1 1941
"Via Marconi"

WILDER PENFIELD
3801 UNIVERSITY
MONTREAL

SENT AIR MAIL LETTER TODAY STOP DO BE REASONABLY CAREFUL
STOP LOVE TO YOU ALL

CONE



POST-LETTER TELEGRAM



**WORLD
WIDE
WIRELESS**



CANADIAN MARCONI COMPANY
(LIMITED LIABILITY)

This message has been received
"Via Marconi"
Subject to the Condition that it be delivered by mail.

R.M.BROPHY
General Manager

P.J.MURPHY
Traffic Manager

P1770 HEB

MAY 18 1941

SANSORIGINE 37 15 1600 PLT

"Via Marconi"

┌ HILDER PENFIELD ┐
└ 3801 UNIVERSITY ┘
MONTREAL

MANUSCRIPT SPLENDID STOP PUBLISH PROMPTLY STOP
AUTHORITY HERE REAFFIRMS IT IS WILLING FOR EXCHANGE
OF TEAMS STOP OPPOSITION EVIDENTLY COMES FROM HOME
STOP PLEASE TELL ME MORE ABOUT YOURSELF LOVE
CONE

May 4th 1941

Dear Hide:-

In this beautiful quiet region where we are carrying on for the most part with a traumatic practice not much different than we have to handle in civilian life and where we are quite out of the dangerous zone time marches on in a direction we find it difficult to determine or predict. We have two traumatic spinal cord transections in, a basilar abscess, three subdural hematomas, a series of head injuries, several peripheral nerve injuries secondary to fractures and some infected scalp wounds. Cars and motorcycles are dangerous in the black out and boys will be boys when they don't have enough to do and so get smashed up. This is the situation in all the Canadian hospitals. We see more actual wounds incident to enemy action than the other units I am told. There we have had duplicates in most respects injuries we frequently encounter at home.

I am glad Hartman published the article on the sulphamerazine. Our paper is not completed yet. While we got much more of an inflammatory reaction in our experiments with large quantities of the drug in brain wounds of cats the drug did about completely and left no more scarring than I should have expected.

from the wounds alone. There was just a polymorphonuclear reaction, then phagocytic lymphocytes and giant cells and a connective tissue outgrowth encapsulating the dump.

Finally, the lymphocytes were replaced by plasma cells. As the reaction subsided with the absorption of the dump the connective tissue disappeared in large part and the 9.0 to 15 day scars were cystic with marked gliosis but not nearly as much mesodermal reaction as it would seem there might be in the late scars from the amount of outgrowth there was in the early ones. I certainly think now it can be used to great advantage. Some of the brain abscesses we have had have come amazingly well due largely I feel to the dump.

Now that sulphadiazine has come out I should like very much to have some to play with. Col. Colebrook whose baby has been sulphonamide has had some and reluctantly admits he is afraid it will supplant sulphonamide for most things. Sir Harold Gibbs has adopted the sulphonamides look but since and all in his plastic work. They even use it for powdering the hands when putting on gloves.

I wonder if you could arrange
some way for us to get a hold of
some alpha drugs. It is
made by the American Cyanamid
Company of Stamford Connecticut.
The work on toxicity, absorption
and chemotherapeutic activity was
done by Feinstone and others
of the Biological Laboratories of the
American Cyanamid Company at
Stamford and they reported their
findings in the Bulletin Johns
Hopkins Hospital Vol LXV II no 6
pages 427-456. Dec 1940. And
I wish Marteau could put some of
it in brain wounds too.

The various journals we have are
a great joy. Wish we had a suitable
place to keep them together - a reading
room but the spot we wanted has
been taken over for a chapel which as
I observe the activities going on in it
are so impregant that we still might
justifiably did not it for a library
with out disturbing the moral tone
of the unit. If there are any journals
in addition to those we are already
getting that you could arrange for
we would be glad to have them.

We lack S. G. + O., Johns Hopkins Bulletin
and lots of others. The Annals, Annals

of Surgery, Archives of Neurology & Psychiatry,
Surgery, Archives of Surgery, Archives
of Pathology, American Journal of Pathology
Journal of Nervous and Mental Diseases
are those we are getting now.

The letter to you was hurriedly
written but the points it brought
up and the situations it described
had been carefully considered over
a long period of time. Gradually
things are improving. We are
getting more general support and
more cases are being sent in promptly
before serious trouble or complications
have developed. For a time we just
got the hard ones - almost hopeless
things.

This quiet lovely Sunday has
spent doing fiddling jobs on the wards
that is up to seven o'clock and then
Colin and I went out to knock a golf
ball around on the lawn. It is perfectly
wonderful here now. I caught the air
was full of the odours of fields and flowers
and a cuckoo was rhythmically at it.
The trees about a little 350 years old
thatched cottage at one corner of the
estate are in blossom and it was all
so homely and nice. Just as we were
coming in a two engined bomber barely
visible except for the two trails of
condensation which followed it and gave
away its location was doing some
stunts above us just to keep us
from enjoying the situation to the full.
It was probably one of our own.

machines.

We have been getting some very nice myelograms with air recently and think now that if the films are taken with the patient in hyperextension deformities show up more clearly. Now both pain is a common cause of disability and we have found cause with discs which we have removed through a unilateral approach with out doing a laminectomy. We too have been trying to get some more information about the bladder immediately following transections. You don't sell our improved cystometrographic apparatus and are new and improved tidal irrigators. And our new dodges in dressing brain abscesses. We keep very busy though it is often little things I suppose that occupy our time but nevertheless keep the service in first class order. Now we think we can predict when undesirable reactions particularly as far as the kidneys are concerned are going to occur with sulphapyridine. By watching carefully the proportion of the drug given which is conjugated. Evelyn's photoelectric cell has helped so much with the ^{chemical} laboratory procedures. Our blood work is pretty good too and though we have no Ted though we do. Schelling shifts and what not. The period has been a great one for review at any

note. We are trying to get an animal
Experimental laboratory equipped and
will then apply for a license to work
here on animals. There are a row of
six stalls one for animal operating
room, one for animal quarters,
one for an autopsy room for patients
and one for a morgue and one for
a small chapel where a simple service
could be held. I hope our plans go
through all right and that we can
get some experimental work under
way. We would like to do some
things on consciousness, nerve
transplantation, hypernerve stimulation
of muscles including the bladder musculature
and so on.

The reasons assigned for your postpone-
ment are that I am putting in a full
year over here - starting around May 20th
I still have some time to do etc etc.
I am returning your letter with
this one. Do take care of yourself
and remember some of the things
I have written you.

And here is my love for Helen
Beth, Mary, Weldon, Russell, Jeff
and you.

Yours aye,

Bill

Col. Cone

Hackwood Park

Barrington, Nants

~~Board ~~is~~ does not~~

My condition unchanged

Board report definitely

negative Terribly

(helpless ~~Bill~~)

Sorry Will probably

~~come over~~ make

Short trip civilian
for Research Council
this summer

WIDE

T.



QUOTE NO. HQ.372-4-493 (Meds.)

Department of National Defence
-Army-

Ottawa, Canada, February 15, 1941.

Dr. Wilder Penfield,
Montreal Neurological Institute,
3801 University Street,
MONTREAL, P.Q.

Lt.

Dear Dr. Penfield,

In reply to your letter of February 13th, 1941, I notice that you have cabled Lt.-Col. Cone and before any action is taken from this side, I would be pleased to receive information as to Col. Cone's reaction.

I am afraid that I cannot arrange for Dr. Robt. Pudenz to proceed with you to England if you yourself go. I would suggest that if this doctor is interested, he should apply for a Commission. Being an American citizen will be no bar. If he is granted a Commission, there will be no difficulty in having him sent overseas as a reinforcing officer and the necessary information forwarded as to his capabilities and training, in order that he may be utilized in a hospital where his experience will be most valuable.

Regarding your proposal to spend a couple of weeks after reaching England, visiting various British hospitals, this is a matter which could be arranged with the Senior Medical Officer, Canadians, England, upon your arrival. There should be no difficulty whatever, as the same thing has been done with other Canadian officers when it was thought necessary to gain information from British sources.

I shall await further information from you before any official action is taken to suggest your proceeding overseas.

Kindest regards,

Yours sincerely,

(R.M. Gorssline) Colonel,
Director General of Medical Services.

Dom 28211
Govt
Local 2564

draft of it shortly to Colonel Archibald.

Form No. 100 (Rev. 1-1-44)

Department of National Defence
-Army-

Ottawa, Canada, February 15, 1941.

CANADA

Dr. Wilder Penfield,
Montreal Neurological Institute,
3801 University Street,
MONTREAL, P.Q.

Dear Dr. Penfield,
In reply to your letter of
February 13th, 1941, I notice that you have called
Lt.-Col. Cone and before any action is taken from
this side, I would be pleased to receive information as
to Col. Cone's reaction.

I am afraid that I cannot arrange
for Dr. Root. I would suggest that if this doctor is
you yourself go. I would suggest that if this doctor is

citizen will be no bar. If he is granted a Commission, there
will be no difficulty in having him sent overseas as a re-
tailoring officer and the necessary information forwarded as
to his capabilities and training. In order that he may be
utilized in a hospital where his experience will be most

Cone

Please cable that exchange is feasible according to
my cable of Satur

even partial

Please cable some reply to mine Wednesdays

Message cable.

WILDER Penfield

Yours sincerely,

Director General of Medical Services

MAY 20 1941

Letter to Lt. Col. Gorssline

If it meets with your approval, it might be worth while for me to spend a week or two shortly after arrival in England in learning from the different British neurosurgeons their conclusion in regard to routine treatment of neurosurgical cases. It might be well also if Pudenz could do this with me as he is at present making as complete a summary as possible of the literature of military medicine since the outbreak of the war. I should then like best to give me the authority to do so. I should then like very much to visit the other Canadian hospitals in the hope of standardizing the treatment of injuries of the head, spine and peripheral nerves along the lines which will be indicated in the neurosurgical pamphlet.

February 13th, 1941

Lt. Col. R. M. Gorssline,
Director General of Medical Services,
Elgin Building, Elgin Street,
Ottawa, Ont.

Dear Colonel Gorssline:

In accordance with our conversation, I am writing to you to request that Lt. Col. William Cone be returned to Montreal to resume his essential activities at the Montreal Neurological Institute. I am ready to go into service and could be prepared to leave Canada by March 15th. After careful consideration, it seems important that Cone should leave England at least by that time so that the interim of absence both there and in Montreal should be as short as possible. It would be better if he could be here before I leave if conditions over there permit this.

I shall await your instructions in regard to my entrance on military duties. I passed the "special examination" for advancement from Lieutenant to Captain last Autumn. I took the "common to all arms" examination for the same in December but have had no notification as to whether I passed this examination or not.

May I suggest that Dr. Robert Pudenz be given a commission as medical officer and be allowed to accompany me to England. Dr. Pudenz is an American citizen. After graduation from the university and internships and travel abroad, he spent the past four years at the Montreal Neurological Institute where he has finished his training as neurosurgeon. He has as yet taken no examinations either physical or otherwise for the Canadian service.

In regard to the pamphlet which should outline the routine treatment of neurosurgical conditions, this is already partly finished and I will forward a tentative draft of it shortly to Colonel Archibald.

Letter to Lt.Col. Corssline

If it meets with your approval, it might be worth while for me to spend a week or two shortly after arrival in England in learning from the different British neurosurgeons their conclusion in regard to routine treatment of neurosurgical cases. It might be well also if Pudenz could do this with me as he is at present making as complete a summary as possible of the literature of military medicine since the outbreak of the war. If you think best to give me the authority to do so, I should then like very much to visit the other Canadian hospitals in the hope of standardizing the treatment of injuries of the head, spine and peripheral nerves along the lines which will be indicated in the neurosurgical pamphlet.

If it is true that traumatic neurosurgical cases cannot be selected and sent to #1 Neurological Hospital, it becomes very important for the initial treatment in all Canadian hospitals to be similar so that when the chronic cases are later transferred for special neurological care there will be no break in continuity of policy. I believe that in such a way a great many cases could be saved from chronic post-traumatic complaints, such as headache, post-traumatic neurosis, post-traumatic epilepsy, and failure of regeneration of injured nerves as well as more immediate and dangerous complications.

I talked to Lt. Col. Cone last night in regard to our discussion.

Yours very sincerely,

WGP/AD

"Via Marconi"
FOR
SPEED
AND
ACCURACY

R.M. BROPHY
General Manager

POST-LETTER TELEGRAM



WORLD
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WIRELESS



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P. J. MURPHY
Traffic Manager

P543 GOKC SANS ORIGIN 20 7 PLT

"Via Marconi"

WILDER PENFIELD
3801 UNIVERSITY=ST
MONTREAL

JUL 11 1941

DISAPPOINTEDLY CONCERNED STOP TAKE CARE STOP WISH I
COULD RETURN TO HELP LOVE
COUE

November 17th, 1941

Lt. Colonel W. V. Cone,
No. 1. Neurological Hospital, RCAMC,
Canadian Army Overseas.

Dear Bill:

Will you please give the enclosed letter to Storer Humphreys.

I have been back in this country for about a month now. I was two weeks on the way in the Clipper, having been held up in Lisbon for ten days and in Horta for three days. Helen met me in New York and we took the train to Burlington where she had left the car. From there we motored back to Montreal.

Avis looks very well. I have talked to her about things and have told her about the possibility of your return. Principal James has written to Gorssline, as I have done, officially, indicating the need of your return. As you know, I wrote to Luton before I left stating that the Neurological Institute needed you. I do hope that you and Arthur can be coming back soon. We need you both very much indeed. There is a lot of work to be done here. I am anxious myself to get research work going forward on burns and want to interest as many people as I can in it.

After getting back I worked hard on the report, consisting of fifty-five memoranda, which I turned over to the Associate Committee on Medical Research of the National Research Council. At the meeting of the Royal College of Physicians and Surgeons I proposed the recommendation which is enclosed. This was passed and I am expecting to take it up to the Minister of National Defence this week myself.

I will write to you again soon. Don't forget to write to me.

With my love,

WGP/AD
Encl.

Letter to Mrs. William Cone:

decision of the board. His reply was simply, "Disappointedly concerned. Take care. Wish I could return to help. Love."

I hope we will see you soon.

July 17th, 1941

AS 2707,

Yours,

Mrs. William Cone,

Dear Avis:

WGP/AD

A lot has been happening that I want to tell you about and I hoped that Helen and I would be able to drive around to see you this week but we are going away down to Boston for a couple of days.

Last May, when the question came up of my going overseas and I was about ready to buy my uniform, they put me through a medical examination and held a medical board. The decision was to postpone for three months. This board has met again. They are unwilling to recommend my admission to the army. Dr. Byers, who is chairman of the board, admits that there is no definite evidence of anything advancing. It is simply that there is old evidence of trouble. I have told both McGibbon and the D.G.M.S. that I am willing to go over to take Bill's place in spite of the report of the board. They both have refused, although McGibbon said that perhaps it would only be postponed for six months.

This means that I cannot take Bill's place. It does not mean necessarily that his place may not be taken by someone else. I am at the present time trying to get them to send me over for a short trip of a month or two. In that case I will be able to see Bill and find out what the situation is, and may be able to make some suggestions which would help out. If I go at all, it will be as a civilian being sent by the Research Council. If I should go, I will try to get down and see you before.

I hope the lake is nice. I haven't seen very much of it on our side, although I have gotten down for an occasional weekend. I have had a cablegram from Bill in answer to my cable gram to him which I sent the other day announcing the

Letter to Mrs. William Cone:

decision of the board. His reply was simply, "Disappointedly concerned. Take care. Wish I could return to help. Love."

I hope we will see you soon.

AS ever,

Yours,

WGP/AD