APPENDIX No. 4

be done in centres organized on a permanent basis, and it is suggested that such work should logically be carried out as a definite part of the functions of the neuropsychiatric centres.

- (c) Organic disease of the nervous system. Two cases. One of them has been diagnosed as cerebro spinal syphilis, and has also club foot, which has been variously described as organic and functional. The other case has not been diagnosed. Both require further medical observation and probably treatment.
- (d) Dementia praecox. Two cases. These are both straightforward cases requiring continued psychiatric supervision. With the psychiatric centres fully organized, occupational therapy and systematic daily employment in prescribed occupations will naturally constitute a major feature of the care and treatment. Such arrangements exactly meet the needs of cases such as these, which require at the same time a certain amount of safeguarding, and whose condition is likely to become aggravated at any time and require in-patient treatment. In fact, it is a doubtful policy to allow patients of this sort to go about the city alone. Before such freedom is allowed, a very full knowledge of the patient's mental disability, reaction and potentialities should be presupposed.

RECOMMENDATIONS.

1. Maintenance of high disability pension for longer periods after discharge from

sanatoria of cases of pulmonary tuberculosis.

2. That cases of aggravation of pulmonary tuberculosis be recognized to have a different standing as regards aggravation pensionability, and that as a general rule no distinction be made between aggravation of this disease and that wholly incurred on service.

3. That provision under P.C. 2328 be carried on as a temporary measure as long

as is necessary for the purpose of classification for final disposition.

4. That the Committee define to the department the intention as regards interpretation of terminology of cases to be considered under P.C. 2328, i.e., that the interpretation already made by the department be adhered to, which includes any case that the department considers could efficiently be dealt with under such provision and not necessarily purely nervous or mental.

5. In many of these problem cases, the amount of pensionable disability is negligible. The question then arises, shall the Federal Government assume the whole responsibility or only that portion due to service, and leave the balance to the pro-

vinces.

FACIAL CASES.

While in the majority of these cases, there is no pensionable physical disability, or if there is one, it is almost negligible, yet there is a serious handicap in obtaining employment owing to facial appearance. There is also a certain sensitive feeling which produces more or less mental suffering, all of which should be pensioned ranging from 100 per cent down.

In determining the pensionable disability in these cases, one should not be influenced entirely by sentiment but by comparison with a real pensionable disability such as loss of arm or leg or valvular disease of the heart, or tuberculosis, etc.

ARTIFICIAL LIMBS.

This branch has given full consideration to every device known to artificial limb manufacturers, and have made many improvements. There are three experts engaged in research work along this line and any suggestion sent in from the branch depots and from outside is given careful consideration. We are fully convinced there are no better artificial limbs made anywhere.

J. W. BRIEN,