

412
民國二十四年度

上海市立滬北戒烟醫院年報

吳鐵城



總 理 遺 像



總理遺囑

余致力國民革命凡四十年其目的在求中國之自由平等積四十年之經驗深知欲達到此目的必須喚起民眾及聯合世界上以平等待我之民族共同奮鬥

現在革命尚未成功凡我同志務須依照予所著建國方略建國大綱三民主義及第一次全國代表大會宣言繼續努力以求貫徹最近主張開國民會議及廢除不平等條約尤須於最短期間促其實現是所至囑

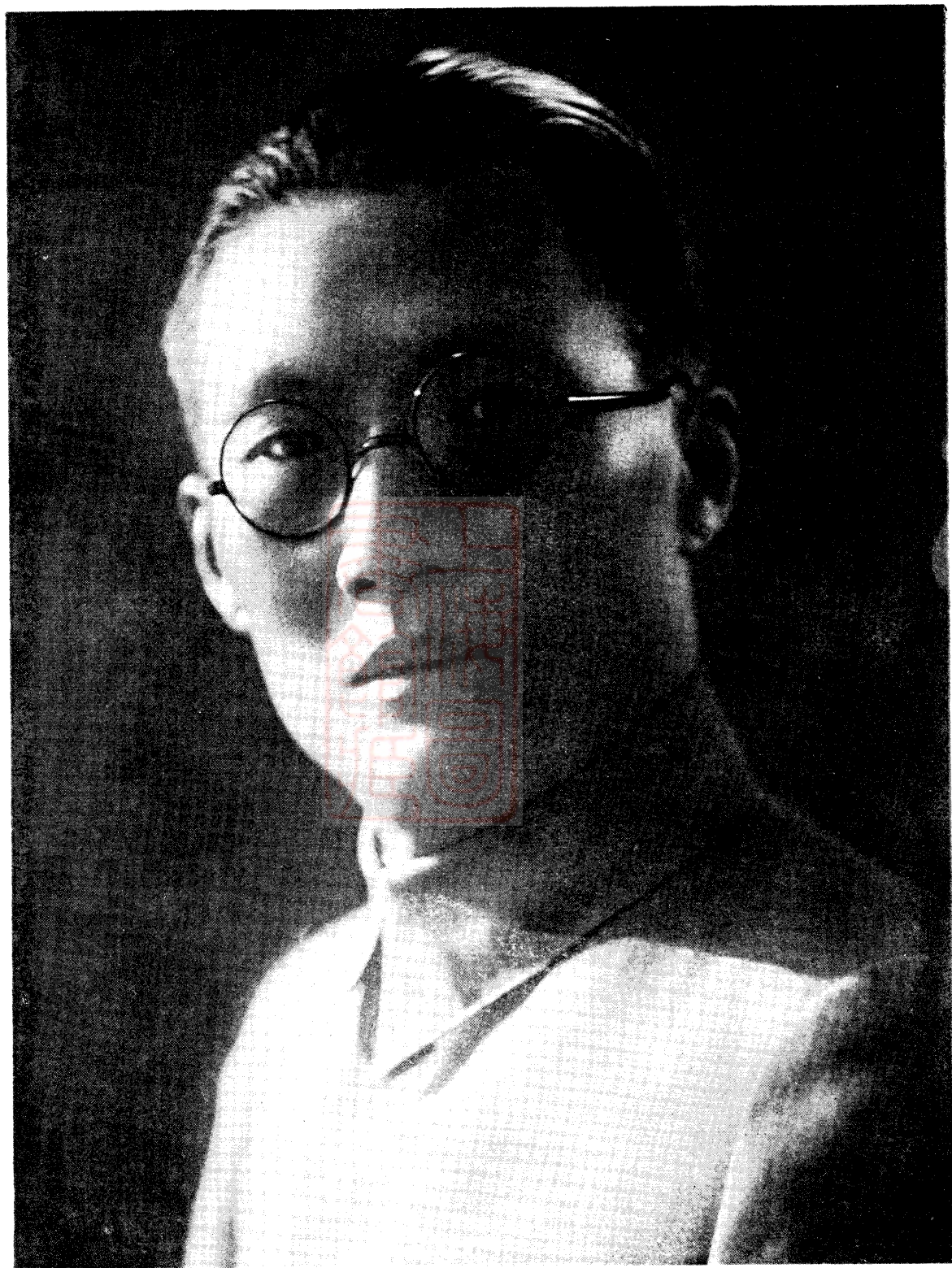
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上海图书馆藏书

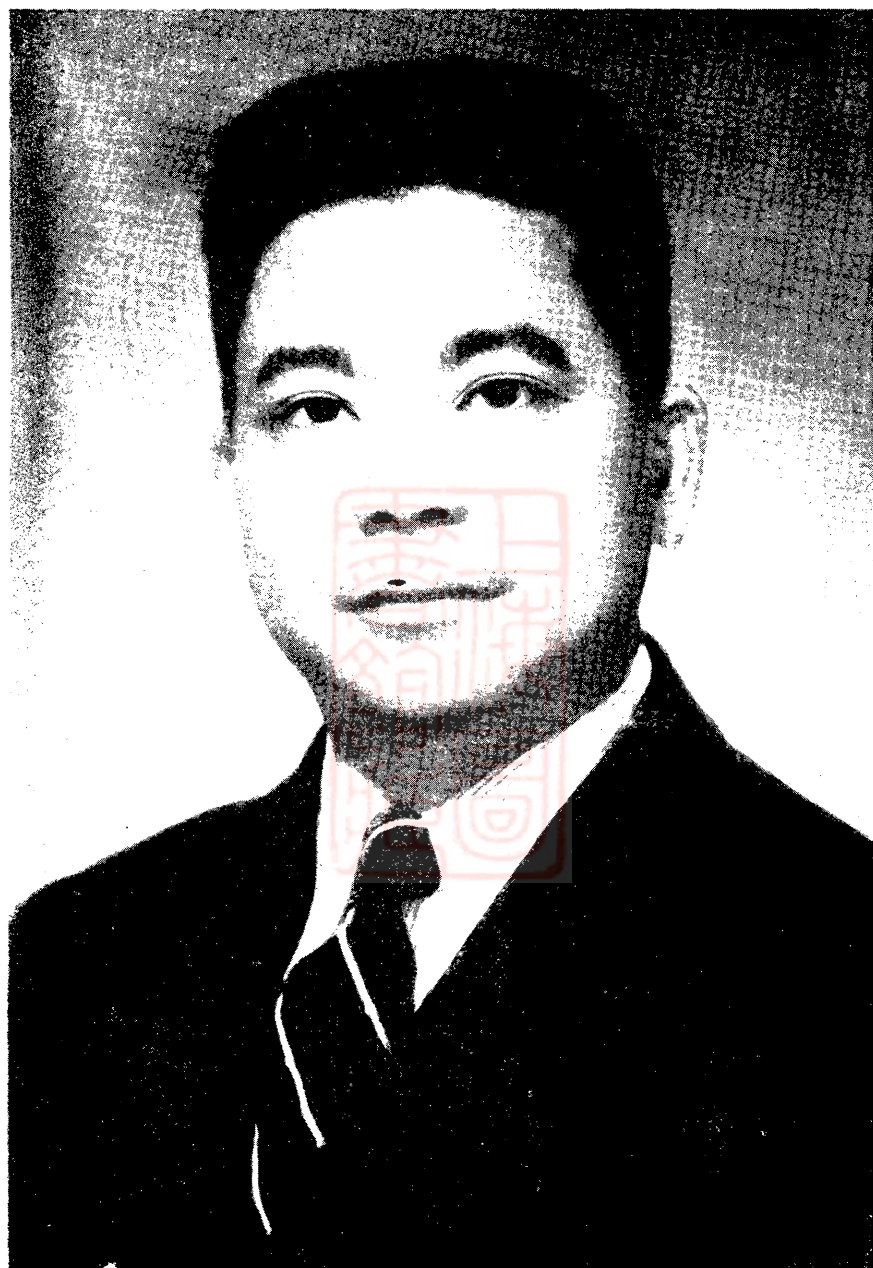


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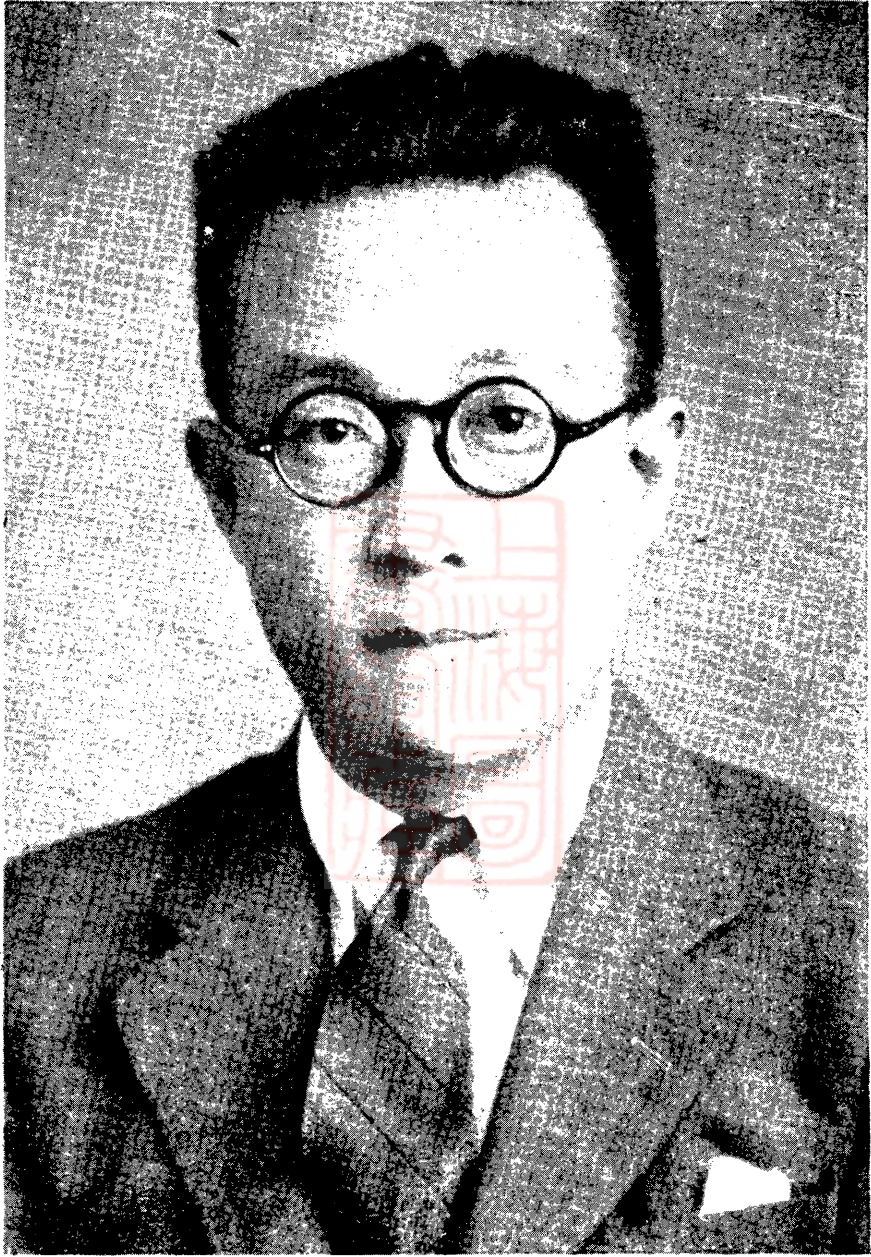




上海市长吳鐵城



安廷李長局局生衛市海上



上海北滬戒烟醫院院長梅卓生

上海滬北戒煙醫院一年來之概況

自政府勵行禁煙以來，本市衛生局即積極進行戒煙事宜，先後設立龍華戒毒所及滬南戒煙醫院，廣收煙民，嚴限戒絕。後因煙民投戒者日多，原有兩院房舍不敷收容，衛生局，乃復租賃滬北區天通庵路七二二號民房（原係開辦絲廠），添設本院。即于廿四年五月十五日開始工作，凡房屋之修繕，水電之裝置，及衛生器具之設備等項，一一趕速完成，同月廿六日正式成立。初時部署未定，以急於成立，祇得一方修理房屋，一方收容煙民，故五六兩月，煙民人數僅得二十一人。迨至七月，本院規模稍具，遂逐漸增設病床二百張。初時來院之煙民，均係自動投戒，只須經過登記覓保對保等手續，即可收容，俟戒絕後，轉送警備司令部具結開釋。自同年九月公安局實行煙民登記後，煙民入院，先由公安局辦妥登記手續，然後送來。是時煙民紛紛聲請投戒，較前愈多，原有病床，復感不敷。同年十一月，再添置病床五十張，現時本院所有之煙民床位，共二百五十張。茲將本院內容及一年來概況，分別說明如左；

開辦日期：二十四年五月十五日。

經費：開辦費一萬八千元，經常費每月六千二百五十七元。

房屋支配：病房四大間，（內附設重病室三小間，）（附圖十一第一病室，）（十第二病室），（廿一第三病室，）（十二第四病室。）護理室四小間，（附圖十七，廿四）。辦公室二間。病人入院記錄室一間（附圖八）。門診室一間，（附圖廿八，）。傳達室一間，新病人整理室一間，（附圖九）。配藥室一間，（附圖五）。貯藏室二大間。職員宿舍。分男女兩部，（附圖四）。工役宿舍二間。盥洗室六間（附圖十五）。廚房一間，（附圖六）。試驗室一間，（附圖廿三）。

病房設備；病房四大間，分置病床二百五十張，每間附設護理室一間，重病室一間，盥洗室

一間。每一煙民，各有鐵床一只，草墊一張，蓆子一張，棉被一條，褥子一條，被單三條，枕頭二個，枕套二個，單白布衣褲三套，衛生衣褲二套，夾襖褲二套，長棉袍一件，襪子二雙，布帽一頂，拖鞋一雙，面盆一只，漱口杯一只，面巾一條，浴巾一條。凡面盆杯子等物，均編有與床號相同之號碼，以資識別。每星期更換被單衣服二次。

工作人員：（附圖二三）院長兼主任醫師一人，醫師四人，事務員五人，護士長一人，護士十六人，練習生三人，警士三人，工役二十一人，廚役七人。

煙民待遇：醫藥膳宿，完全免費，並有娛樂及各種消遣之設備，如無線電（每日上午十時至十二時，下午二時至四時，及七時至九時，放送三次）各種棋子，乒乓球，書報等，（附圖十六）。每日下午，每一病房輪流開放，煙民可隨意至院內花園及運動場散步，或運動一小時。時間分配；上午六時半起身，七時試體溫，（如有發熱者，每隔四小時試一次，）七時半早餐，八時發藥，九時醫師在護理室按照床號挨次診察，並參酌夜班護士報告處方，十一時半午膳，下午一時至二時散步，二時發藥，四時試體溫，五時半晚餐，八時發藥，九時值日醫師查察病房，十時熄燈。

入院處置：煙民由公安局登記後，每日下午送院受戒，入院後，先記錄其姓名、籍貫、職業、年歲，並詢明其吸食鴉片抑其他毒品，以及吸用量之多少，並用何種方法服用（如吞、吸、注射），成癮時期，成癮原因，以前曾否戒過，入院前已否服用毒品，並有何種痛苦，一入記錄單上，然後印指模，磅體重。再由醫師檢查體格。根據記錄單及身體狀況處方後，送入整理室，剃頭沐浴，換穿本院衣服，（其原有衣服，裝入編號之布袋消毒後，收入貯藏室，待出院時，交其更換）。然後按照病床號數，送入病房，（第一病室，由一號至八十五

號；第二病室，由八十六號至一百七十號；第三病室，由一百七十一號至二百號；第四病室，由二百零一號至二百五十號。）

施戒方法

：本院施戒方法，採用發泡及遞減法。在施戒期內，並用興奮補血等紗藥劑及各種注射。入院煙民，非因重病或年齡過高（六七十歲以上）身體衰弱者，一律于當日下午六時發泡。用班整膏（夏天一〇%，冬天一五%—二〇%），在十公分見方大小消毒紗布七八層上，塗成圓形，直經約四公分，厚約二公厘。先于受戒者前胸部左或右側第二至第四肋骨間，用困及酒精拭清，然後將塗就之紗布貼上，用橡皮膏固定之。並囑其動作時留意，不可擦破。約隔十二小時左右，至翌晨七八時許，抽取泡漿（五西西至三〇西西不等，平均約一〇西西），將抽得之全量，施行筋肉注射。由塗膏發泡至抽取泡漿之時間，或因皮膚狀態不同，有需候至十二小時以上者；總以酌量情形而定。至于煙民服用之代癮品，係百分之一嗎啡溶液及雅片酞（合百分之一嗎啡），約吸雅片一錢者用二西西至四西西之分量（表十），視乎各人體格狀況而酌量增減之。若該煙民係以吞服方法成癮者，則代癮品之分量必須加重三四倍。惟初入院時，代癮品之分劑，頗難絕對準確，須由護士特別留意該受戒者實際狀況，隨時報告醫師，以便根據處方，故初次以施用少量為宜。

在施戒時，凡用代癮品者，同時並用輔助劑（五）。

處方

Tr. Hyoscy. 5.0

Tr. Gent. Co. 15.0

Tr. Valer. 10.0

Ephedrin. Hcl 0.15

Sod. Bromide 10.0

Aq. Dest. 100.0

Dose: 4 c c, T. I. D.

又並用興奮劑 (S 1-5) (Strychnine 0.001) 一西西，皮下注射，此藥刺激神經，富于興奮作用，可每日增加至 5.000 (五西西爲止)。俟停止服代癮品後，則用補血劑 (C) Sod. Cacodylate 10% 注射或繼續用 Strychnine，至出院時止。

煙民受戒時，通常發生之症狀，爲失眠，遺精，抽筋，四肢酸楚，惡寒，冷汗，下痢，心臟弱等。如患呼吸器病者，常易引起咳嗽；患腸胃病者，發生嘔吐下痢。

對於酸痛及抽筋之處方：

Rhm (Rheumatism Powder)

Caff. Sod, Benz. 10.0

Sod. Salicylate 25.0

Sod. Bicarb. 25.0

Antipyrine 20.0

1/50 T. I. D.

對於惡寒及冷汗之處方：(Ca) (Sol Calc. Chloride 10%) (10 c. c.) 十西西靜脈注射，

對於咳嗽之處方：

C. M. (Cough Mixture)

Syr. Polygal. 2.0

Tr. Scill. 2.0

Tr. Ipecac. 1.0

Ammon. Chloride 1.0

Aq. Dest. ad. 12.0

Sig. T. I. D.

對於下痢之處方：

D. M. (Diarrhea Mixture)

Album Ten. 25.0

Bism. Sudcarb. 25.0

Animal Charcoal 25.0

Sod. Bicarb. 25.0

Salol 25.0

1/50 T. I. D.

對於消化不良之處方：

G. P. (Gastric Powder)
 Ext. Belladon. 10% 10.0
 Sod. Bicarb. 25.0
 Bism. Subnit. 7.5
 1/50 T. I. D.

or

P. D. S.
 Pancretin 25.0
 Disstar 25.0
 Sod. Bicarb. 25.0
 1/50 T. I. D.

對於心臟衰弱之處方：

3 H. Tr.
 Tr. Strychnine 2.0
 Tr. Digit. 2.0
 Tr. Strophanth. 0.5
 Aq. Dest. ad. 12.0
 Dose: 4 c. c. T. I. D.

4 H. Tr.
 Tr. Strychnine 2.0
 Tr. Digit. 2.0
 Tr. Strophanth 0.5
 Tr. Canph. Co. 3.0
 Dose: 4 c. c. T. I. D.

如有其他病症發生，則再予以相當治療。

每一病房，有日班護士三人，工役三人，夜班護士一人，工役一人。護士除處理普通工作外，尤須注意新進院及將出院之煙民，有否發癮現象，及其他特殊情形，而詳細記錄之，報告醫師。凡已停給代癮品後，在七天之內，根據護士報告，倘無發癮及其他症狀發現，則認為完全戒絕，即將其送回公安局，具結釋放。

增設門診

凡戒絕烟民出院後，因心理作用，或飲食不慎，間或發生失眠酸痛下痢等症狀，易引起再犯之觀念。故于念五年四月特闢門診部，以便已出院之烟民，每日上午九時至十二時，憑出院時所給予之號牌，來院就診。並免費給藥，至現在止，共計門診人數，三百九十六人。

研究工作

本院自廿五年三月起，添設研究室，試驗各種施戒方法，及施戒對於人體究生何種變化。此種實驗，即世界各國，亦無確切報告。現可供研究者，僅一百五十例，一俟整理完畢，再行詳細報告。



(一圖) 觀外之院醫烟戒北滬立市海上

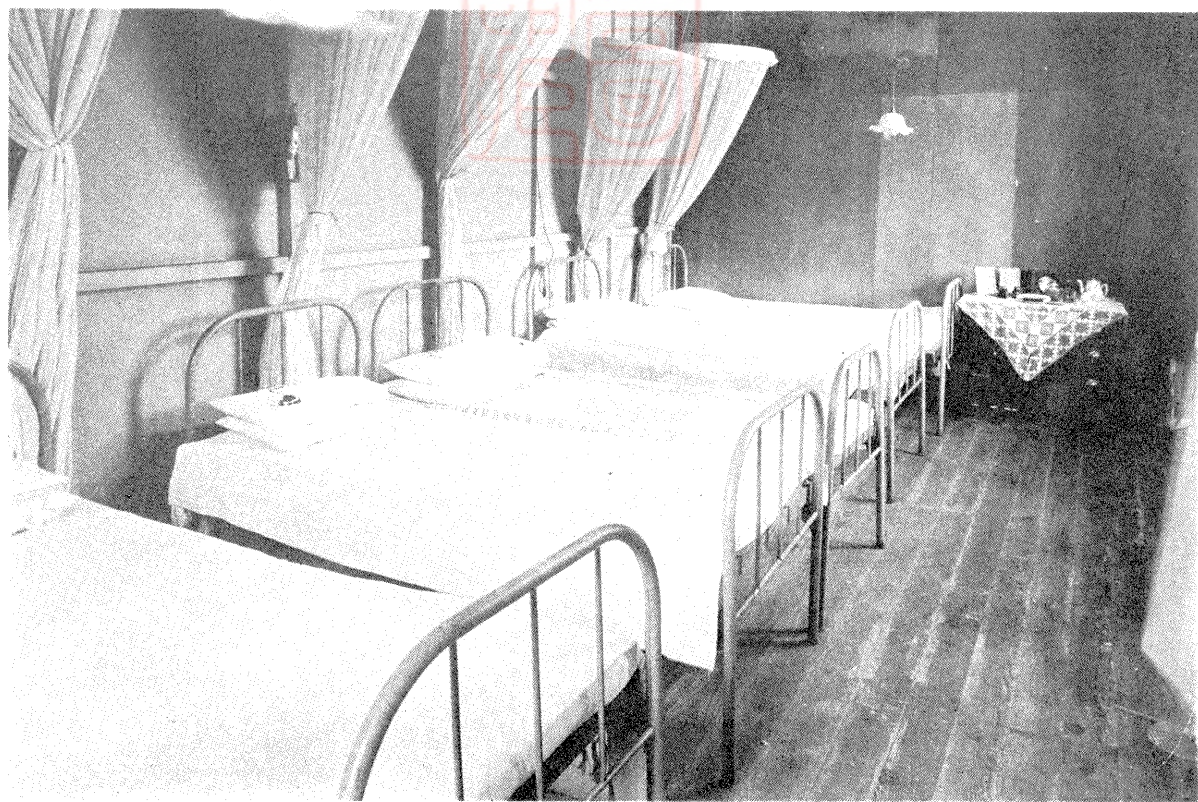


(二圖) 攝合員職體全院本



(三圖)

本院護士全體合影



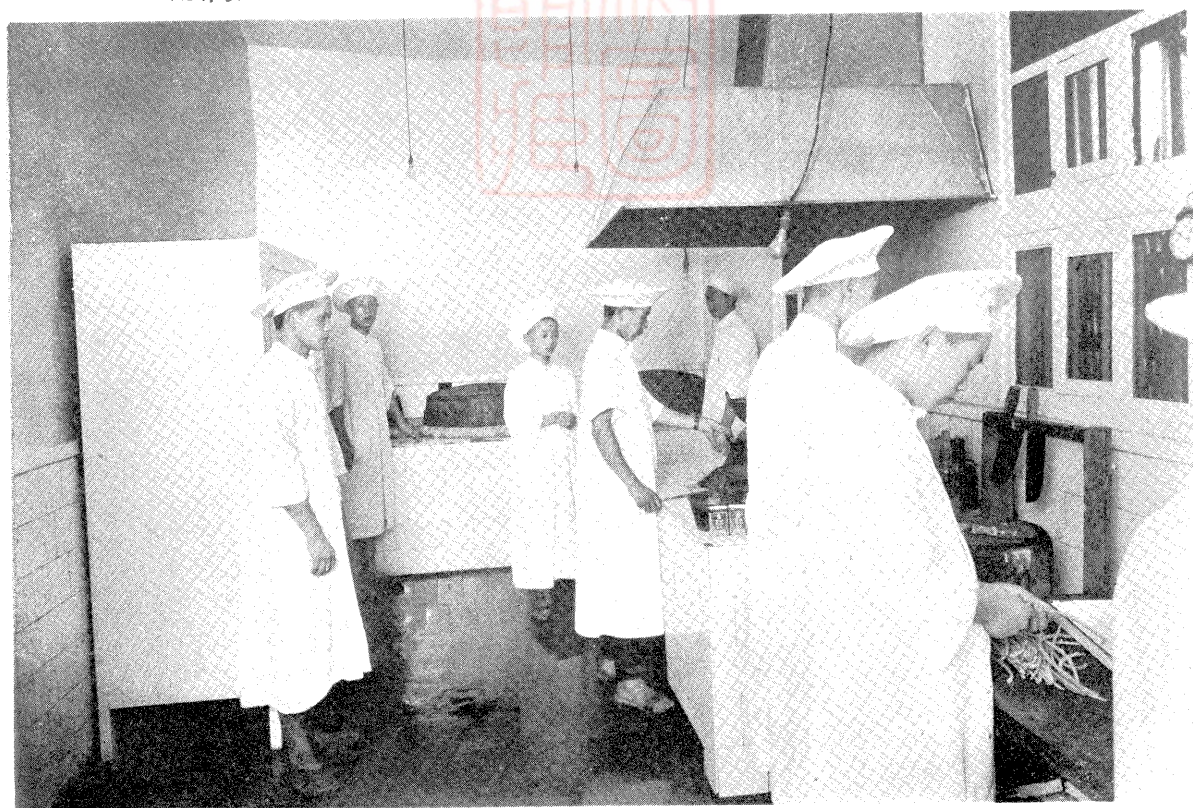
(四圖)

職員宿舍內之一角



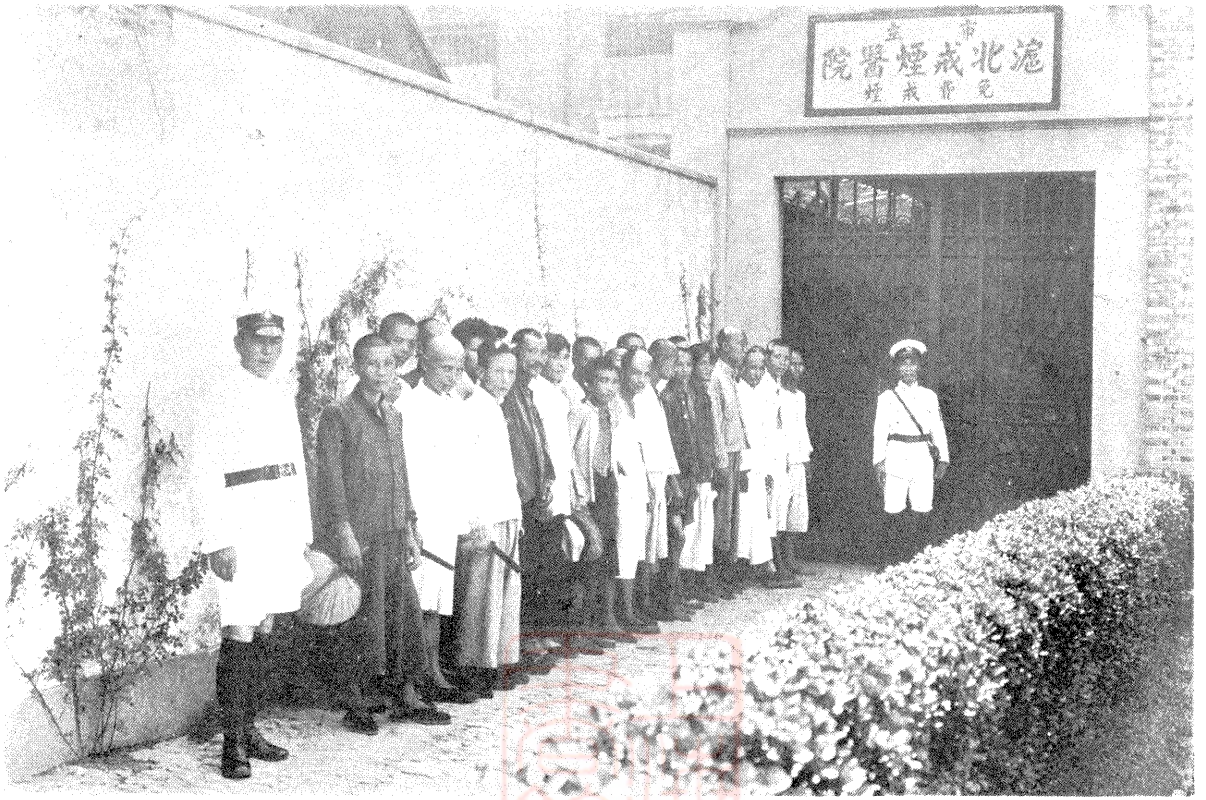
(五圖)

份部一之房藥院本



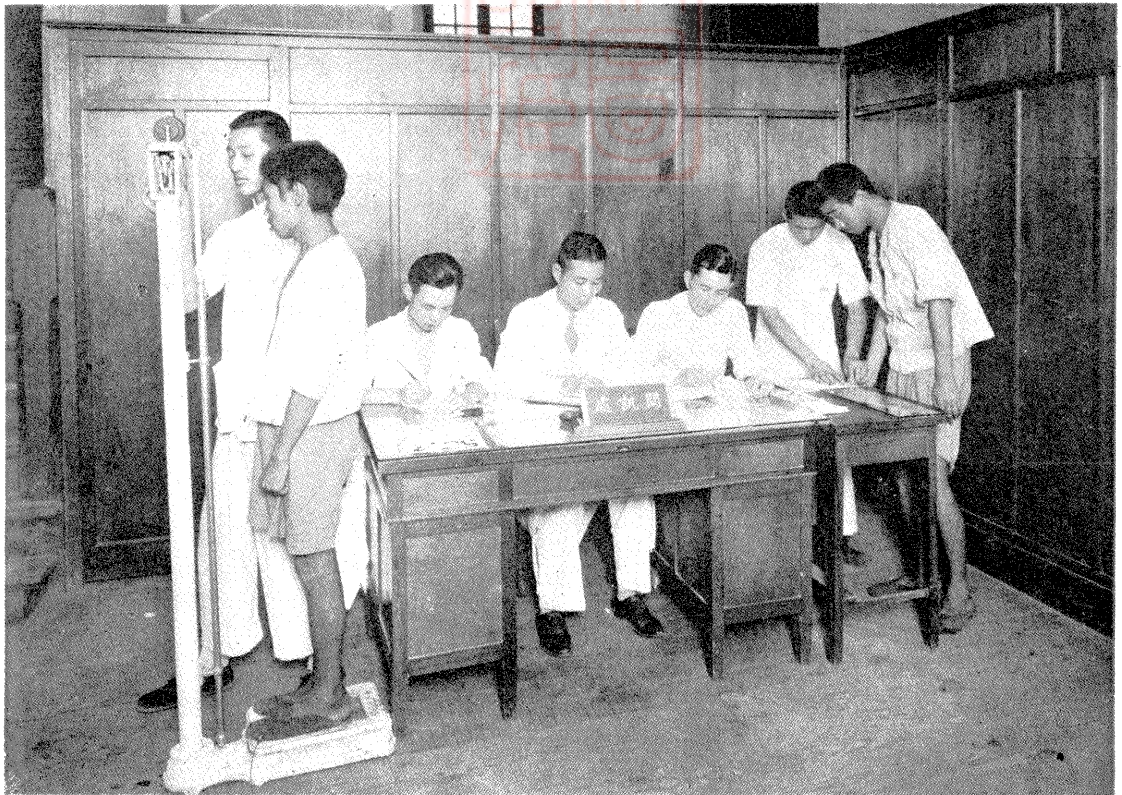
(六圖)

容內之間房廚院本



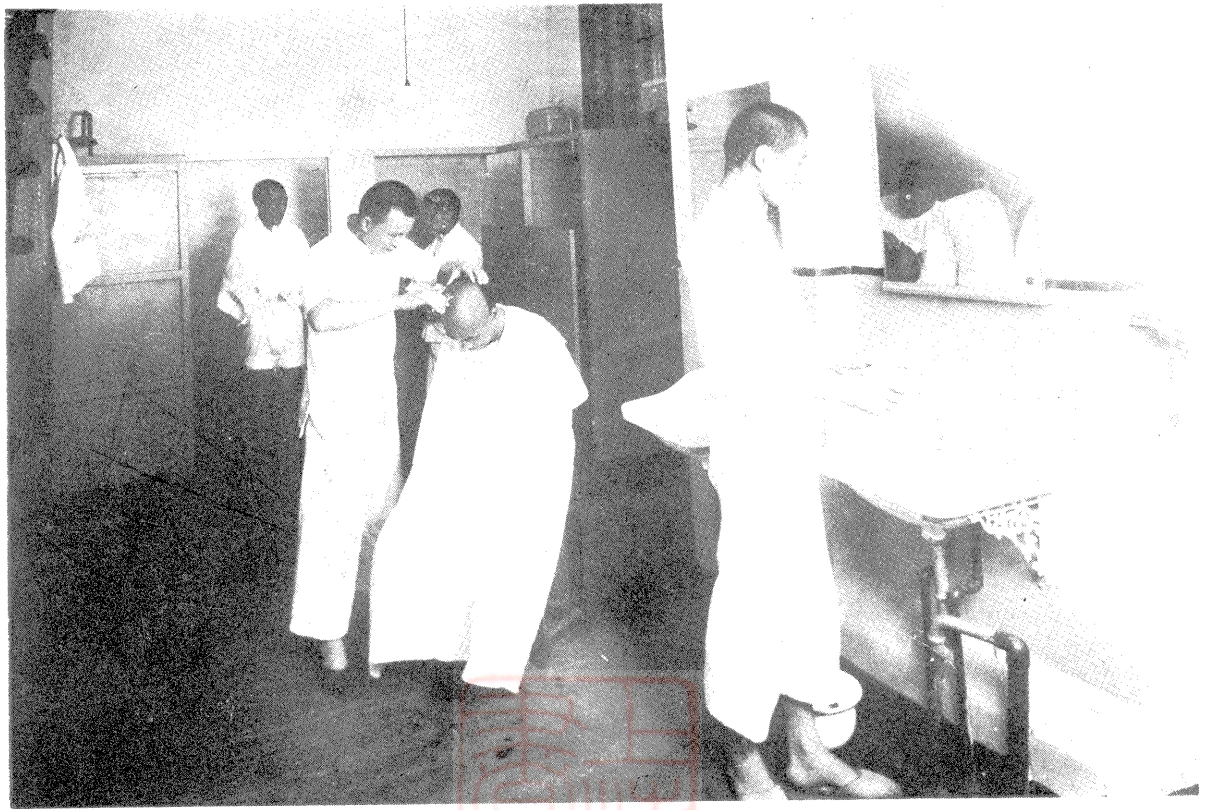
(七圖)

民烟之戒就院本來新

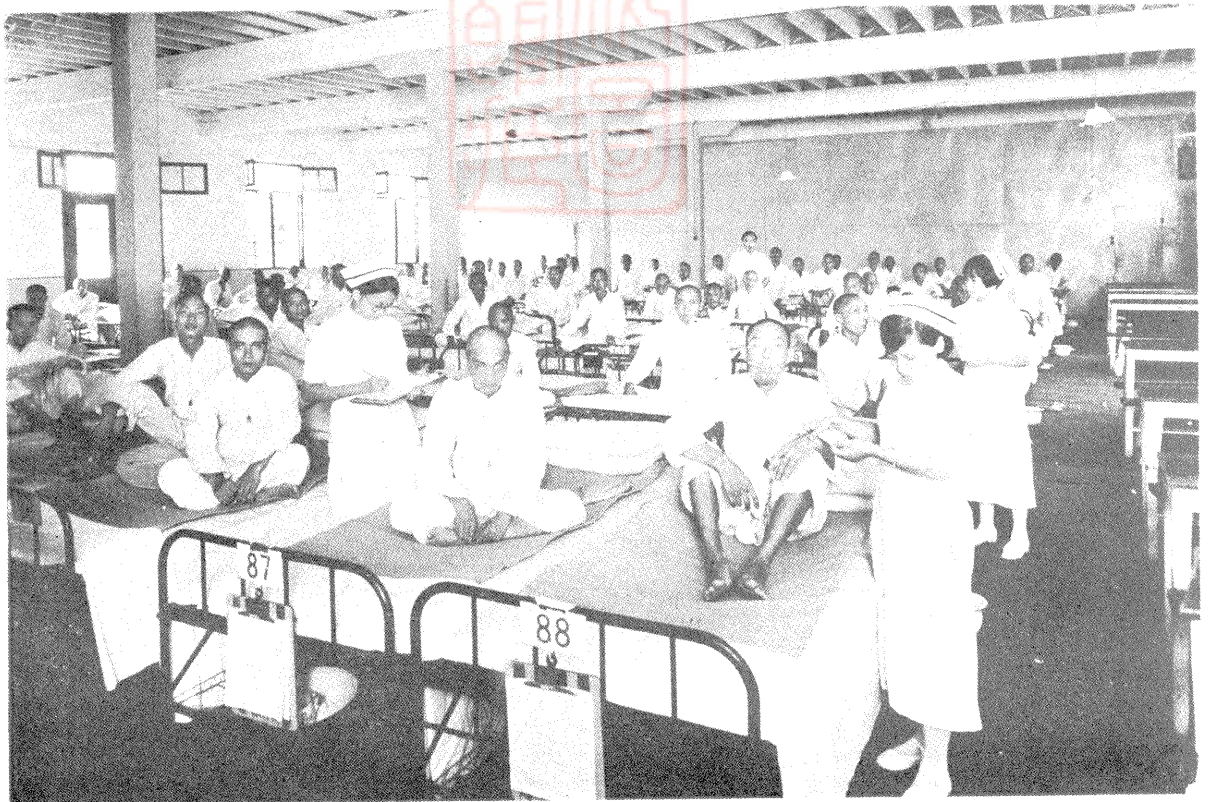


(八圖)

錄紀册註先須民烟之院本來初



(九圖) 服制院本換更髮修浴沐即後院進者烟戒

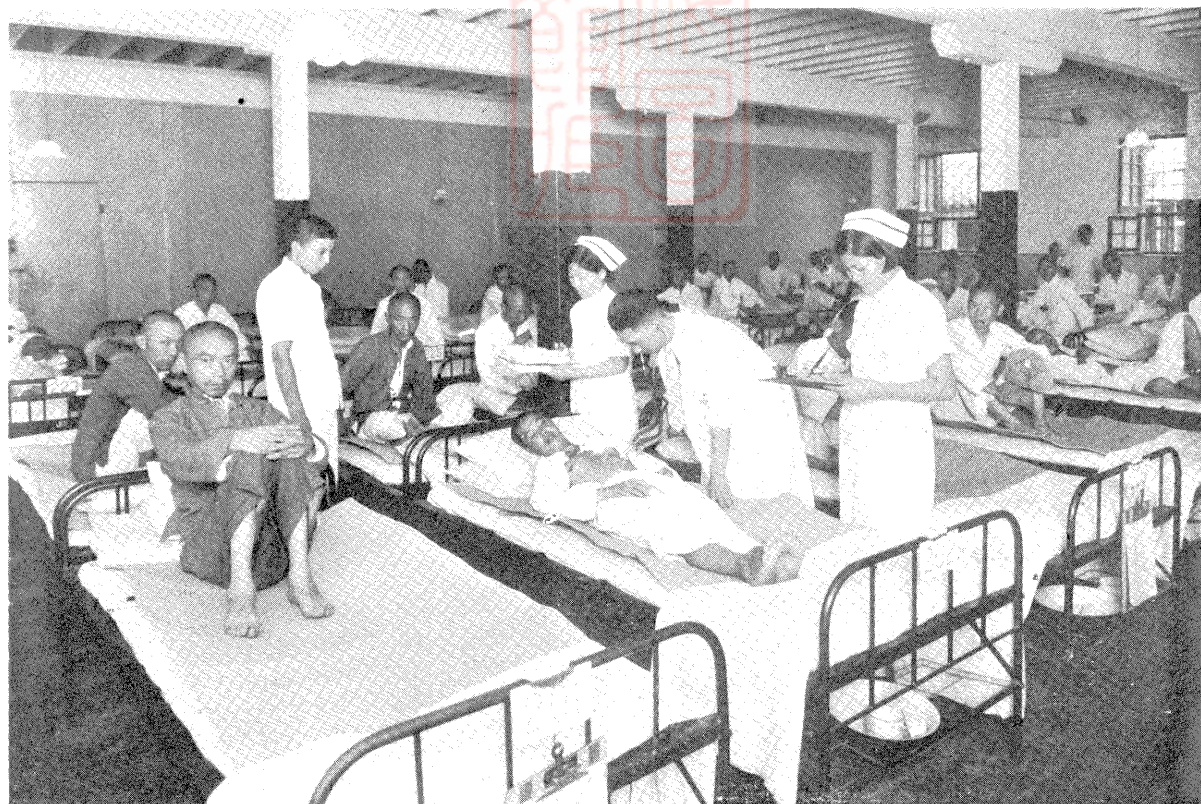


(十圖) 形情之時溫體驗檢護看受者煙戒



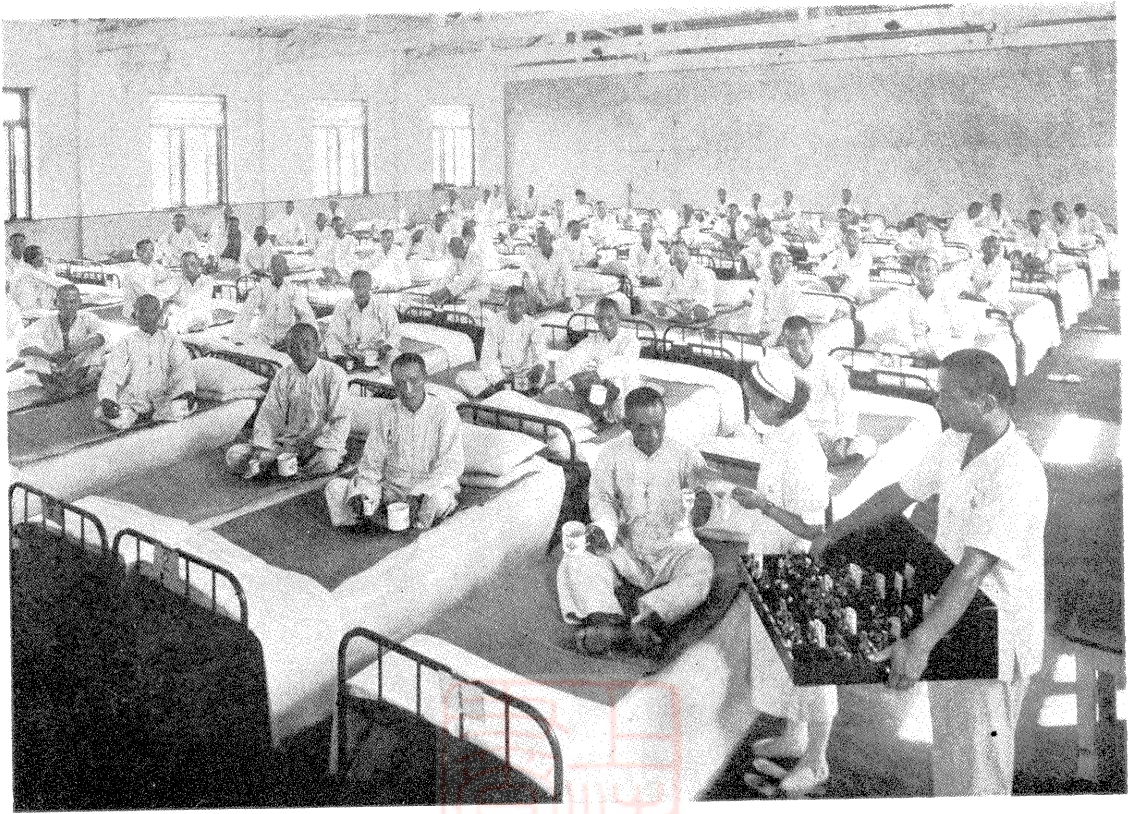
(一十圖)

形 情 續 手 泡 發 用 施

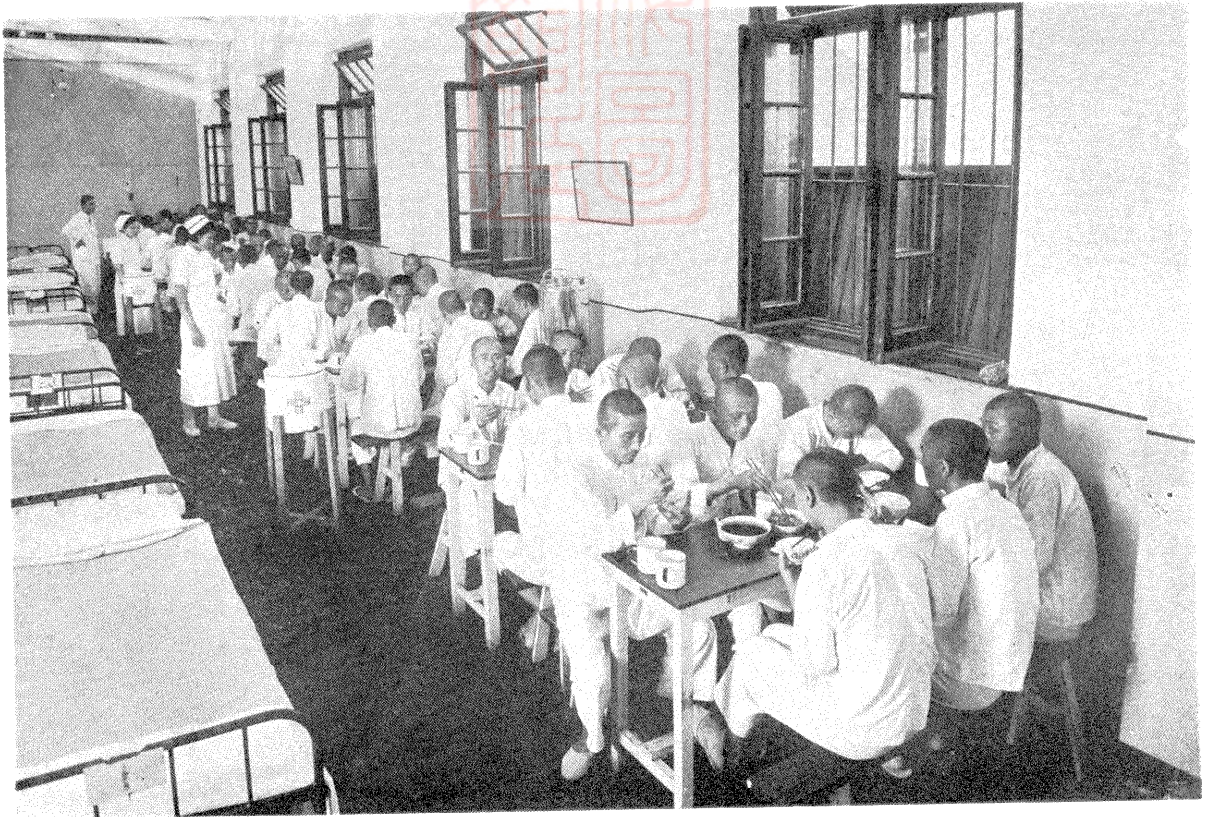


(二十圖)

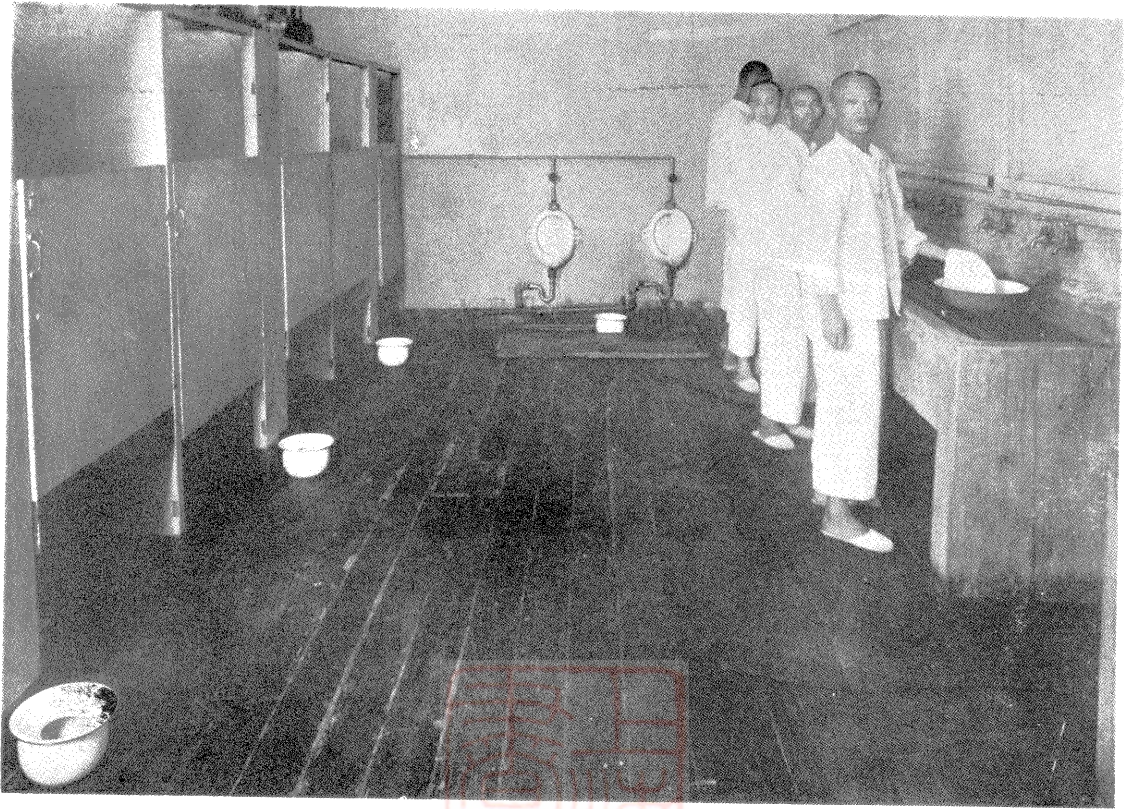
形 情 察 診 帥 醫



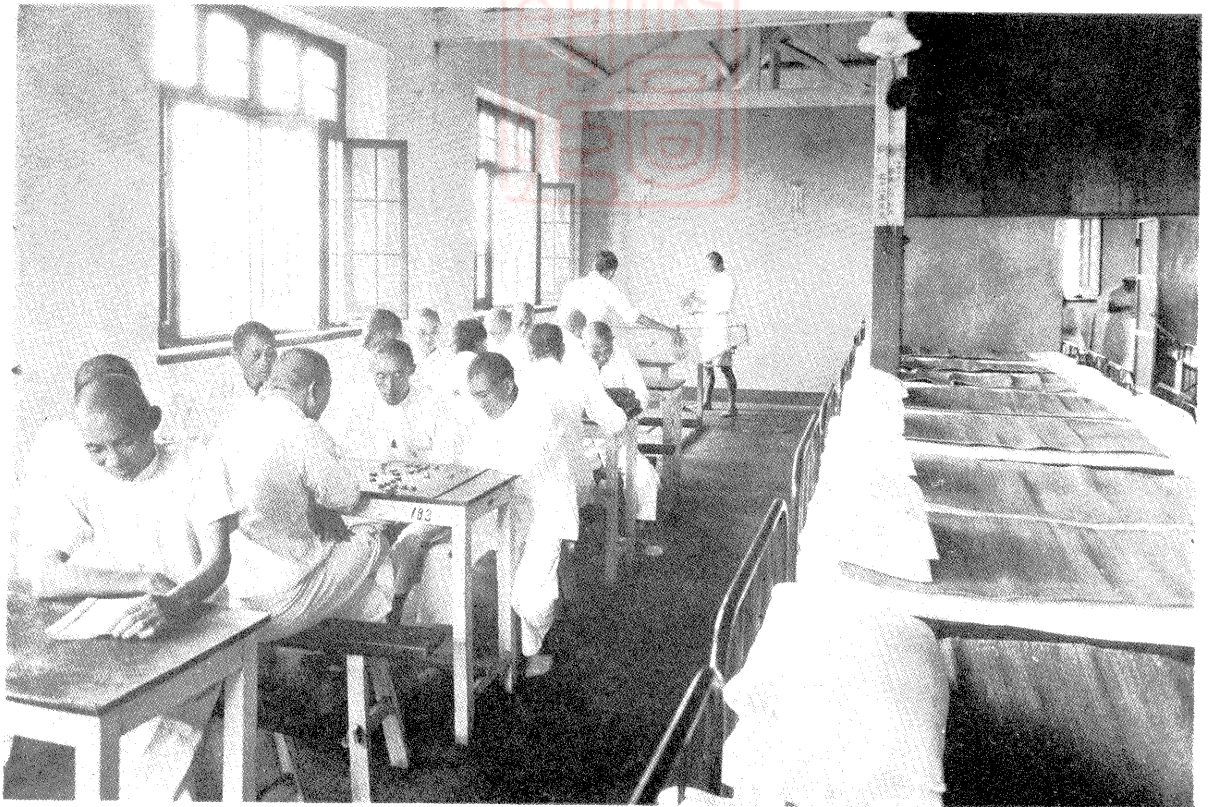
(三十圖) 形情之時者病與劑藥派分時八晚時二後午時八晨日每



(四十圖) 形情之膳就日每者戒受



(五十圖) 備設之室浴及所廁用所人病



(六十圖) 遣消之中院在者戒受



(七十圖)

錄紀及狀病詢查者病向師醫



(八十圖)

形情之時術手血抽



(九十圖)

清血取探管玻入裝後血抽



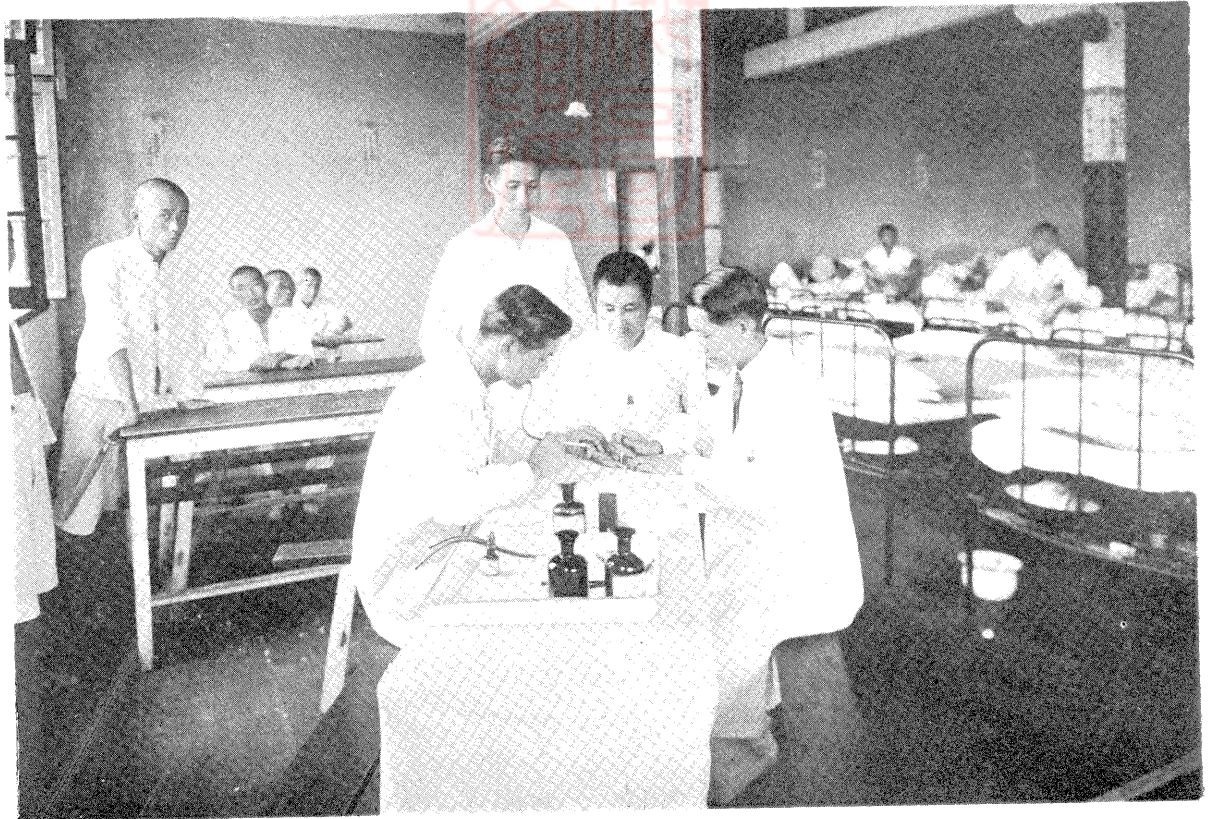
(十二圖)

清血取探器心定用



(一十二圖)

肉筋部臂者病入注清血之取採將



(二十二圖)

球血驗檢備預血取



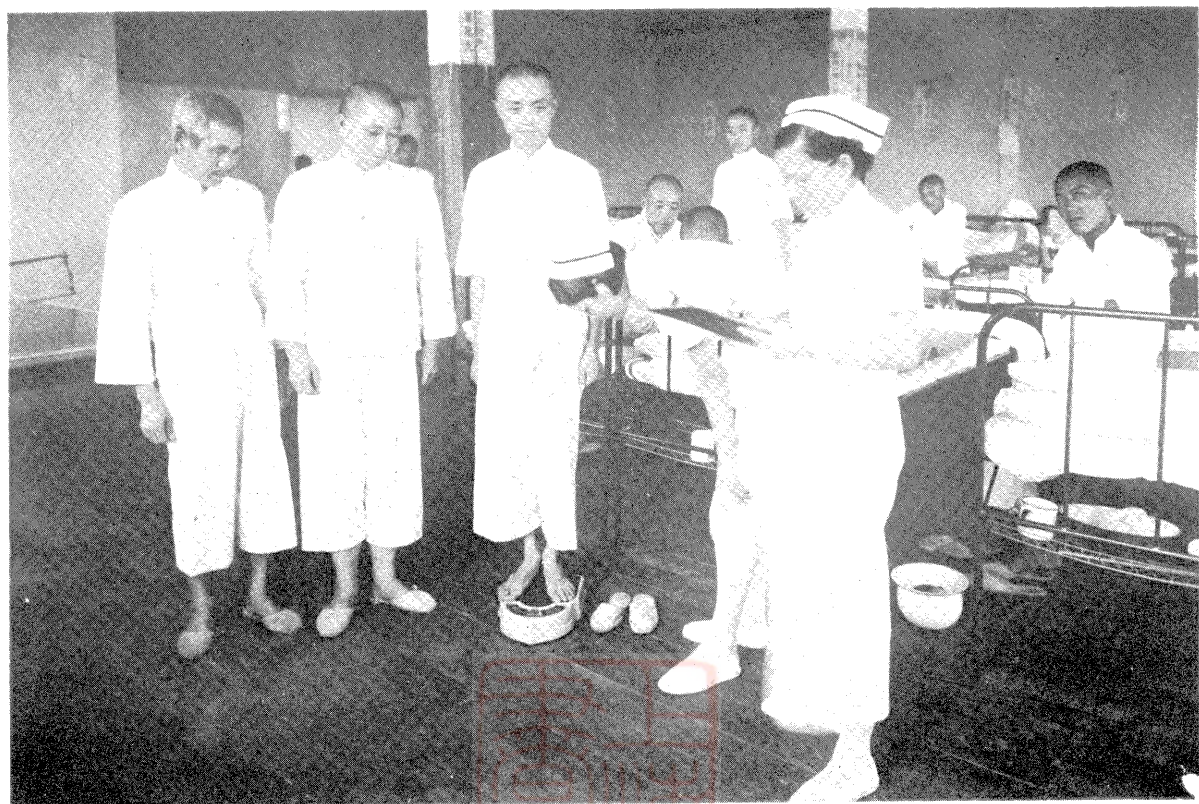
(三十二圖)

球 血 驗 檢



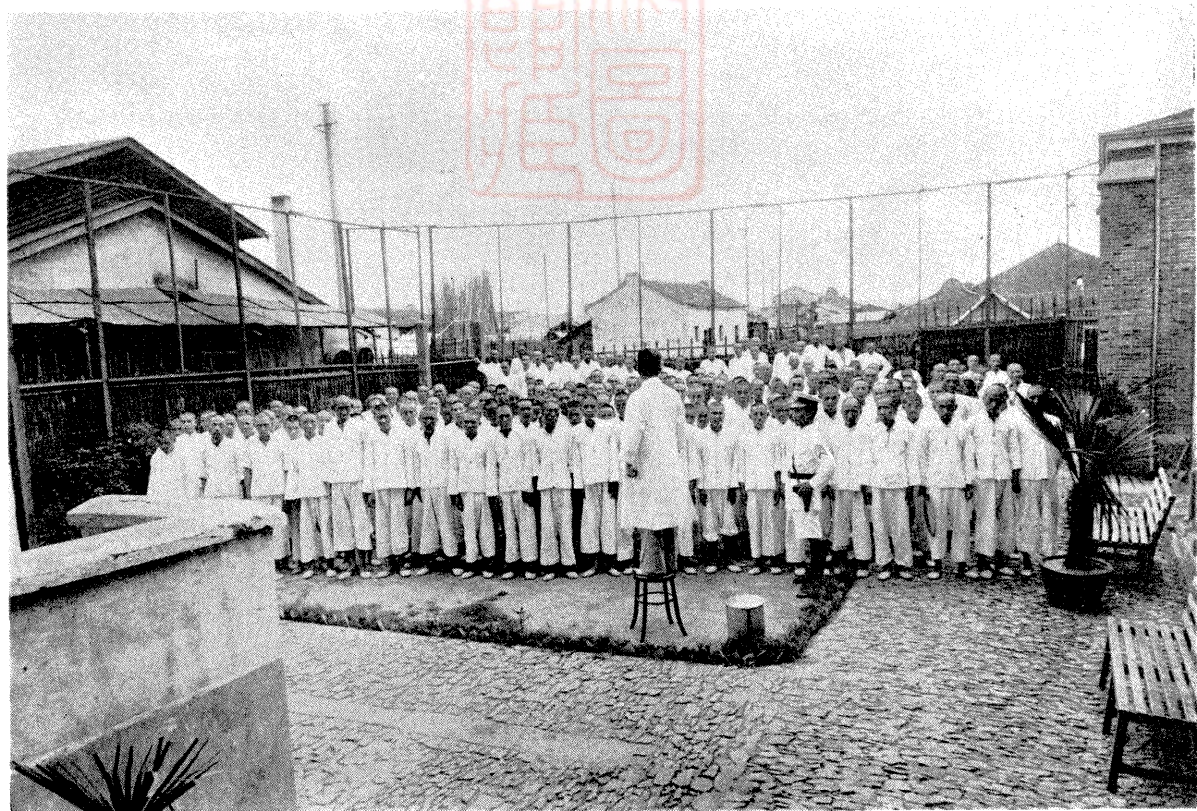
(四十二圖)

射 反 腱 及 壓 血 驗 檢



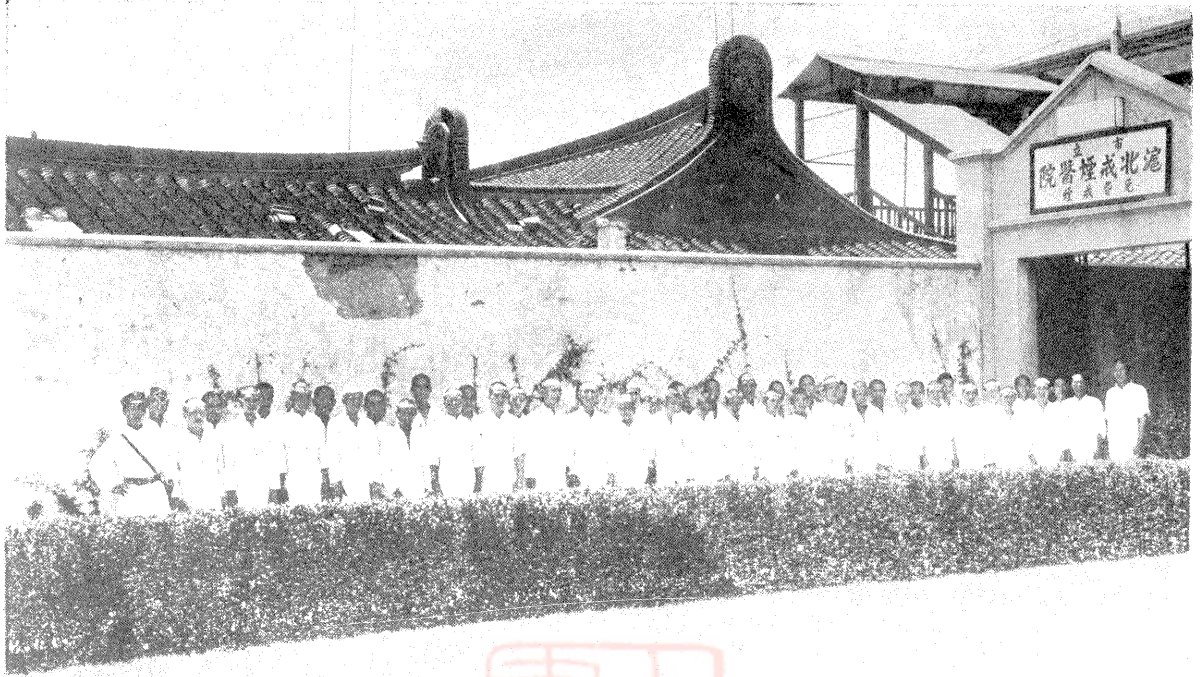
(五十二圖)

次一重體驗檢日五每



(六十二圖)

形情之時訓受者病



(七十二圖)

戒烟絕癮之民預備出院情形



(八十二圖)

已出院民來本院門診之時診察情形

各種統計平均數及百分率

斷癮人數 四千一百五十三人(內無癮五十八人)(附表一及二)

自動戒二千四百五十三人占五九·一% 勒戒一千七百人占四〇·九%(附表三)

吸食鴉片三千九百三十六人占九四·八% 其他毒品二百七十八人占五·二%

住院日數 發泡者三千三百九十五人占八二·九%每人平均住院日數十五天(附表二)

遞減者七百人占一七·一%每人平均住院日數十五天(附表二)

無癮五十八人每人平均住院日數七天(附表二)

體重增減 體重增加者二千四百十四人占五八·一%平均每人增加二·四公斤(附表八)

體重減輕者一千二百八十人占三一·一%平均每人，減輕一·九公斤

體重不增減者四百五十九人占一·九%

年齡統計 年齡最高者七十二歲最輕者十五歲平均以三十至三十四歲為最多占二五·%(附表五及六)

職業統計 職業以工業為最多占四八·七%(附表七)

籍貫統計 籍貫以本市最多占四四·四%(附表四)

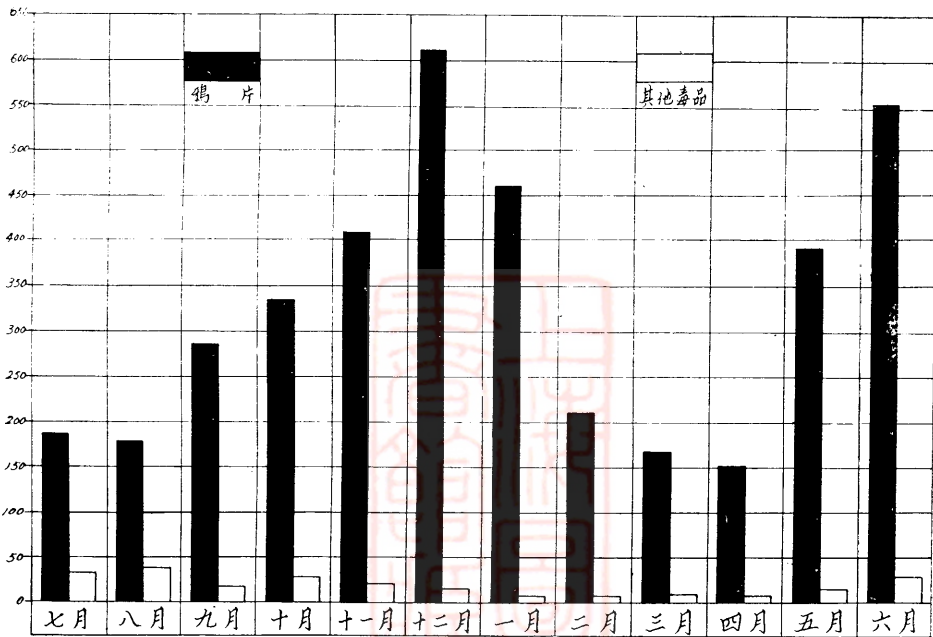
成癮原因 成癮原因以消化系病最多占四八·八%(附表九)

吸食鴉片癮量 吸食鴉片量最多每日一兩二錢(舊制秤)最少每日二分(舊制秤)平均每人每日吸食一錢五分強(舊制秤)

代癮品用量 代癮品用量均合作嗎啡計算每人平均用嗎啡量〇·五格蘭姆強(附表十)

上海市市立滬北戒烟醫院戒除出院人數每月統計表

二十四年度



(一表)

上海市立滬北戒煙醫院受戒人住院日數統計表

民國二十四年度

39	4	1	156	39
40	1	0	40	
41	0	1		41
42	2	0	84	
43	4	0	172	
44	1	1	44	44
45	0			
46	1		46	
47	0	1		
48	2		96	
49	0			
50	1		50	
51	0			
52	1		52	
53				
54				
55				
56				
57				
58				
59				
60				
65				
70				
73	1		73	
75				
80	1		80	
85				
90				
95				
100				
總	3395	700	51050	10509
計	4095		61559	
無癮	58		406	
平均	發泡遞減住院日數15天			
百分比	發泡82.9%遞減17.1%			

計 施戒 方法 發泡 遞減	合 計			
	人 數		日 數	
	發泡	遞減	發泡	遞減
4	1	3	4	12
5	6	1	30	5
6	16	26	96	156
7	41	42	287	294
8	94	48	752	384
9	122	23	1098	207
10	218	29	2180	290
11	284	57	3124	627
12	374	54	4488	448
13	378	36	4914	468
14	314	44	4396	616
15	361	47	5400	705
16	225	36	3600	576
17	185	43	3145	731
18	149	34	2682	612
19	109	13	2071	247
20	104	25	2080	500
21	65	14	1365	294
22	85	24	1870	528
23	44	11	1012	253
24	51	13	1224	312
25	23	16	575	400
26	22	3	572	78
27	24	10	648	270
28	14	7	392	196
29	15	8	435	232
30	7	5	210	150
31	11	10	341	310
32	6	5	192	160
33	8	1	264	33
34	6	3	204	102
35	4	2	140	70
36	6	2	216	72
37	2	0	74	
38	2	0	76	

(二表附)

上海市

市立滬北戒烟醫院 病人受戒人數

統計圖

24年7月 — 25年6月

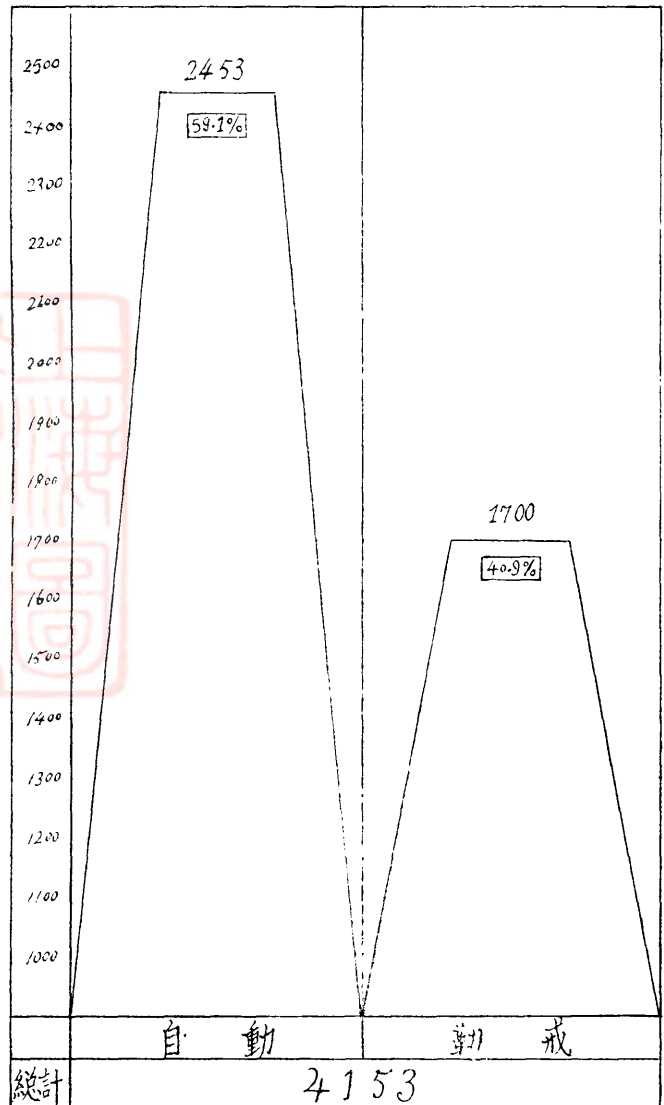
上海市

市立滬北戒烟醫院 病人籍貫統計表

民國四年度

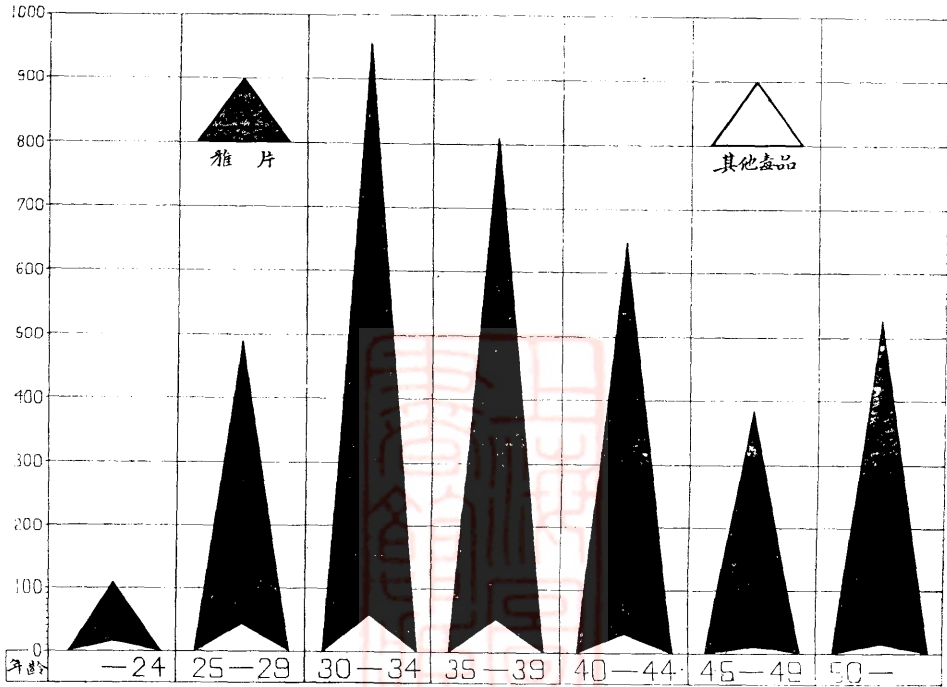
江蘇省	1 8 2 9	23%
上海市	9 5 9	44%
浙江省	6 0 4	14%
安徽省	2 7 9	6%
廣東省	1 0 1	2%
山東省	8 6	2%
河南省	7 6	1%
湖北省	7 4	1%
河北省	5 1	1%
江西省	3 4	8%
福建省	3 3	8%
湖南省	1 3	3%
山西省	7	1%
廣西省	3	0%
貴州省	1	0%
奉天省	1	0%
吉林省	1	0%
四川省	1	0%
總計	4 1 5 3	

(四表)



(三表)

上海市市立滬北戒烟醫院戒除出院人數年齡統計表
民國二十四年度



(五表)

二十四年度出院人數年齡分類統計表

年齡	二十四年 (六月至十二月)		二十五年 (一月至六月)		合計		百分率
	鴉片	其他毒品	鴉片	其他毒品	鴉片	其他毒品	
—15							
15-19	1		1	2	2	2	0.1%
20-24	55	9	49	1	104	10	2.7%
25-29	270	35	224	10	494	45	12.9%
30-34	470	40	494	19	964	59	25.9%
35-39	421	28	392	21	813	49	20.7%
40-44	330	18	317	10	647	28	16.2%
45-49	189	5	200	5	389	10	9.6%
50—	266	9	257	5	523	14	12.8%
總計	2002	144	1934	73	3936	217	100
共	2146		2007		4153		

(六表)

念四年度出院人數職業分類統計表

年份 職業 人數	二十四年 (六月至十二月)		二十五年 (一月至六月)		合計		百分率
	鴉片	其他毒品	鴉片	其他毒品	鴉片	其他毒品	
農業	112	9	136	6	248	15	6.3%
鑛業							
工業	937	51	1003	32	1940	83	48.7%
商業	447	24	463	16	910	40	22.9%
交通業	1	1			1	1	.05%
工務業	6		9		15		.35%
自由業	57	12	74	5	131	17	3.6%
家庭服務							
無業	442	47	249	14	691	61	18.1%
未詳							
總計	2002	144	1934	73	3936	217	
共計	2146		2007		4153		100

(七表)

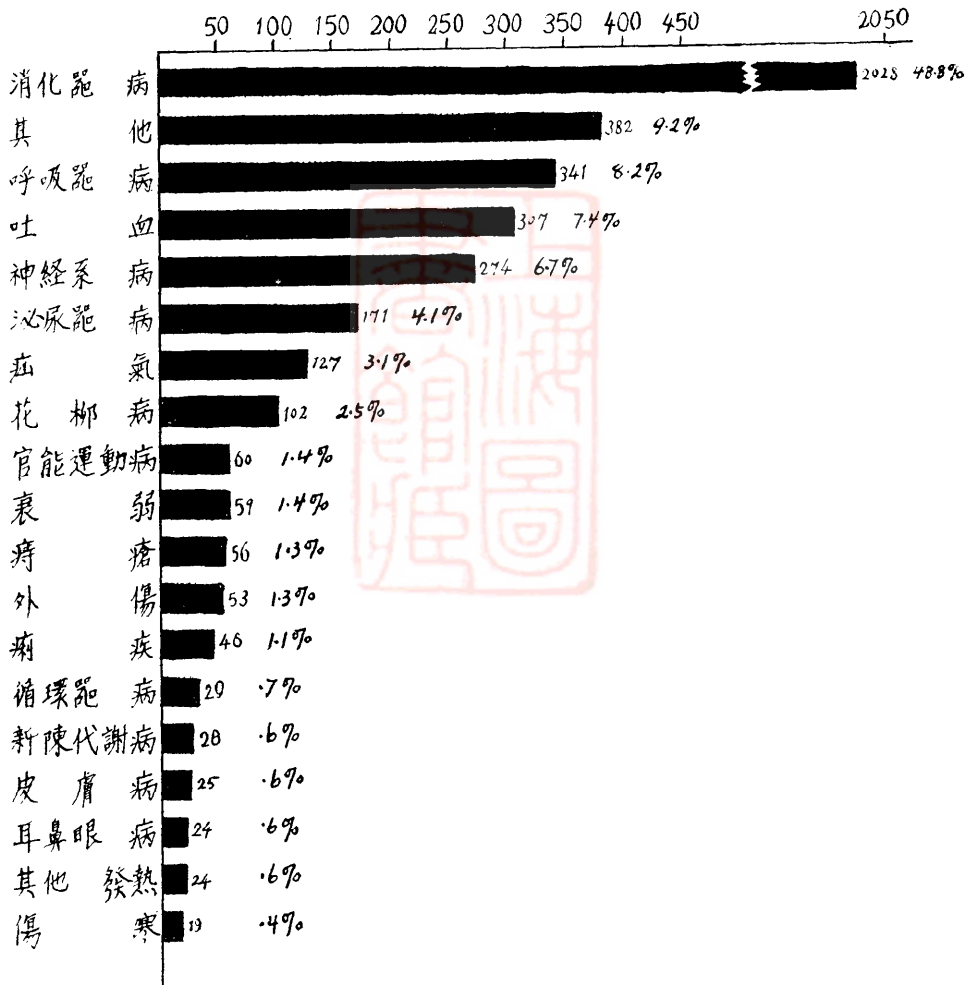
體重增減統計表 (二十四年度)

體重增減	增	減	平
人數	2414	1280	459
每人平均數	2.4公斤	1.9公斤	0
百分比	58.1%	31.1%	10.9%
總平均每人增加體重 0.8 公斤			

(八表)

上海市 市立滬北戒烟醫院 病人成癮原因 統計圖

民二四年度



(九表)

市立滬北戒煙醫院代替品用量暫定標準對照表

飲	吞	吸	吸	吸	鴉片 劑量	注射	吸	注射	吞	附註
鴉片渣水	鴉片泡	鴉片	紅丸	紅丸灰		嗎啡	海洛因	海洛因	其他丸劑 罌粟丸及	
一杯 ^{cc}	二分	一錢	30粒	四色	2-4 C.C.	⌘ 0.20	二色	（價約一—三元 與可根各一克作靜脈注射）	四粒	鴉片末 = 10% morphine 嗎啡水 = 1% morphine 鴉片劑 = 1% morphine 代務品標準含量如下 1. 鴉片劑 = 1% morphine 按云內含麻醇(嗎啡)三分之一注射嗎啡每針約一角 (嗎啡海洛因等分量及含量難急故祇能以估計稱)
一杯半	三分半	二錢	60粒	八色	4-7 C.C.	⌘ 0.35	四色		七粒	
二杯	四分	三錢	90粒	十二色	6-9 C.C.	⌘ 0.40	六色		九粒	
三杯	五分半	四錢	120粒	一罐	8-11 C.C.	⌘ 0.55	八色		十一粒	
三杯半	六分半	五錢	150粒	每罐約十五六枚 每色價約銅元十五六枚	10-13 C.C.	⌘ 0.65	十色		十三粒	
四杯	七分	六錢	180粒		12-14 C.C.	⌘ 0.80	十二色		每色約重二克 價約五角	
（每天每杯約含示杯 每杯五十七針標）	七分半	七錢	210粒	13-15 C.C.	⌘ 1.00	十四色				
	八分	八錢	240粒	14-16 C.C.	⌘ 1.20	每色約重二克 價約五角				
	八分半	九錢	270粒	15-17 C.C.	⌘ 1.40					
	九分	壹兩	300粒	16-18 C.C.	⌘ 1.60					
	一錢	一兩一錢	330粒	18-20 C.C.	⌘ 1.80					
一錢一分	一兩二錢	360粒	20-22 C.C.	⌘ 2.00	一克					

An important part of the medical work carried on in the Hospital is to segregate the men having serious diseases from those who are purely addicts. Each of the wards has a segregation room for cases of fever and other maladies. The emphasis on hygiene is strong throughout and the staff everlastingly tries to inculcate habits of cleanliness in the patients. Many have never seen a modern lavatory before, but a lot can be taught in two weeks.

Blister Method Favoured

Two methods of cure are being used constantly in the Hospital. One is the blister method, developed abroad, and now a favourite in Chinese anti-opium institutions. A large gauze pad smeared with a drawing substance is placed on the patient's chest and in a few hours a large blister forms on the spot. The liquid is tapped from the blister and injected intramuscularly into the patient without delay. Usually one such injection is sufficient—some 15 ccm. The other method involves the use of the patient's own blood-serum. Enough blood is taken from the arm to provide sufficient serum for an injection. The serum then is given intramuscularly to the patient. Throughout the period of treatment, tests are made to determine progress. Urine analysis provides one of the most delicate gauges of opium in the system. Even after five days of nonuse, a trace of the drug may be discerned by this method. Diminishing doses of the drug-tincture of opium or a weak morphine solution—are given for about one week, until the symptoms disappear.

A most important adjunct to the operation of the Hospital is the experimental work. A special ward has been set aside for research and here the five staff doctors and their technical assistants labour with microscope and test-tube and all the other aids of medical science. Blood-counts are made, smears examined and all manner of analyses are carried out. It is interesting to note that one of the doctors is a woman who has found this field specially interesting.

Only "typical" patients—that is, definite opium cases having no other afflictions—are admitted to the research ward. They usually stay there a month and exhausting data relating to their symptoms and progress are accumulated: temperature curves, blood pressure curves, changes in the "craving dose" and many other circumstances are noted. The relation of the minimum dose which will quiet a patient to the craving dose, is studied. These patients are then further observed when they stop showing symptoms. It is estimated that 150 men have gone through this scientific routine since the opening of the Hospital. The value of the data gained is cumulative.

Capital Punishment

Back in Dr. Mei's office we look over some of the Government books and charts relating to drug suppression. There is the matter of the execution of recidivists or "backsliders," a widely discussed topic. So far only inveterate users of the more devastating narcotics (heroin, morphine) have been put to death, as well as traffickers. Last year the total executed was 849 and Shantung Province alone accounted for 620. Shansi was high up on the list with 106. Other figures:—Nanking, 58; Hankow, 15; and Shanghai, 3. Two of Shanghai's three were recidivists, while the third was a trafficker.

It was also interesting to study the maps showing opium fields in China and to realize the effect of the Government's scheme to reduce these areas by 20 per cent. annually. Gradually as the White Poppy is destroyed useful agricultural plants take its place.

Dr. Mei has recently added a new department to his hospital. It is for the treatment of "out-patients" needing medical attention in general. The idea of such a department is to keep former patients from falling back into the noxious habit when they get ill—falling back either because of stupidity or poverty. All medical advice is given to these out-patients free of charge and any drugs required are free. The department, Dr. Mei expects will keep many from returning to the wards as patients who under the law, must be turned over to the police for punishment when discharged after a second sojourn.

轉錄廿五年八月二日字林西報關於本院之記載

HOSPITAL GIVES OPIUM ADDICTS A FRESH START

Chapei Model Institution Treats Thousands

RESEARCH CARRIED ON

Out-Patient Department Important Feature

(In the present of the series of articles on the narcotic problem in Shanghai a phase of the rehabilitation work carried on by the City Government is described Through the courtesy of Dr. T. A. Li, Commissioner of Public Health, a visit was made to the Chapei Anti-Opium Hospital, the largest of the three narcotic institutions maintained by the Chinese Municipality. The article explains the workings of this Hospital.)

SPECIAL TO THE "N.C.D.N."

Day in and day out they come to Tien Tung An Road, Chapei, to spend from two weeks to a month "taking the cure." It is a motley lot we see as we approach the hospital gate: all ages and conditions of life seem to be represented in that 25 or 30 youths and men lined up outside the iron grill. Most of them, however, are of the coolie class and there are two or three who might be beggars. They have not all been sent by the Courts, but all have passed through the hands of the Police. If a Chinese opium addict wishes to undergo the treatment he must apply to the Bureau of Public Safety first. In all cases, rich or poor, the treatment is free and identical; the hospital is a great leveller and each man is a number while there. But he is not looked upon as a criminal, even if he is there for the second time--he is first and last, a patient, a misguided human being in need of help. And those who apply voluntarily for this help are estimated at 60 per cent. of the total. Only men are admitted. Female addicts are treated in hospitals at Lunghwa and Nantao.

In entering No. 722 Tien Tung An Road, Dr. C. S. Mei, the genial and energetic Director of the Hospital, explains that when he moved in early in 1935 the place was an unoccupied silk factory. The buildings were renovated and fitted out for their new purpose, and operations were begun about a year ago. Since then nearly 6,000 men have been discharged as cured. Only six cases have been dropped as hopeless and sent to other institutions. There are 250 beds, distributed among four wards, and the average stay of a patient is two weeks. During that period the average patient gains 5 lb. but there was one man who added 30 lb. in 18 days. the Director explains.

Admission Routine

We are fortunate in entering the Hospital with a group of new patients, thus being able to study the routine of admission at first hand. Each man registers at a desk (later medical questions are asked, he is fingerprinted, weighed, bathed and shaved. His hair is cut. All his clothes are taken away to be sterilized and laid aside until he is ready to leave the Hospital again. He gets a hospital uniform and a bell-shaped metal disc with his number while in the institution. Everything he uses--his bed, eating utensils, medicine cups, etc.--bears the same number. He is allowed no visitors while a patient, as the authorities are taking no chances on opium being smuggled in.

The wards are airy and cheerful. In one of them a radio blares forth a lively Chinese vocal number. The men seem contented and in one or two cases they greet the foreign visitor with a few words in Chinese. One elderly man is very emphatic in his declaration that he has finished with opium.

戒烟医院

五十一

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