

# Shadows on the Lungs

A WORRIED mother wants to know what a "shadow on the lungs" means. One of her family was X-rayed in a mass X-ray of the personnel of the workplace, and although the term "shadow" is not a medical one, it conveys quite well the idea that the particular film had not been passed as normal and clear.

Mass X-ray is a way of finding tuberculosis which is probably quite unsuspected within the group being examined. It is these hidden unsuspected cases that occasionally proceed to quite advanced stages, without being thought of as anything but a "bit of bronchitis" or a "smoker's cough." Such unknown cases within any group are far more dangerous than any known sufferer, who knows about his disease and knows how to avoid infecting other people while being cured. This is the main purpose of mass X-rays, the revealing of the hidden infectious sufferer, and the sealing off of his infection by modern treatments. For the new drugs do this nicely in the majority of cases, so much so that a great deal of tuberculosis treatment can be carried out in the home. In many developing countries, sanatoria as we know them are not being built. The tuberculin test, with X-ray of the positives, or mass X-ray are being used to sort out the infectious cases, these are being treated in their homes with modern drugs, and only where necessary are hospital beds being used for this disease.

In mass X-ray everybody in the group has a chest X-ray taken on miniature films. I said "everybody" because that is the only way to be sure. In some countries an annual mass X-ray film is compulsory—in parts of Australia for example. In our own land we are not getting one hundred per cent acceptance of the offer of a chest X-ray. This is a great pity! Surely, if you have tuberculosis, it is better to know and to get on with the cure. And the sooner you know the better, the greater certainty of cure and of a full working life again.

If any of the small films seem abnormal, un-clear in any part, the person is advised and recalled for a full-sized film. About three to five in every hundred are so advised. Now there is no need to get the wind up. It may have been a button in the way, because stripping is not practised in mass X-ray work. Of every five recalled for a large film, only one will have anything wrong, and this includes everything—heart troubles, hydatid cysts, lung cancer, and tuberculosis. In reality, the active tuberculosis found is low, up to two in each thousand examined.

Now supposing the something wrong is suspected tuberculosis. Rarely it may be fairly advanced and infectious! Ninety-nine times in a hundred the disease is in its early stages. Herein lies the great value of mass X-ray, the revealing of the disease before it is suspected, while it is quickly curable, before it has become infectious and spread to office and workmates.

It boils down to this, then, that in every hundred people examined by mass X-ray three to five will need repeat large film X-rays, and of these one will have something wrong—a definite "shadow" to use my correspondent's language. Now all of us have to meet tuberculosis infection some time in our lives. Most of us, overcome it, and our lungs heal the tiny "shadow"

This is the text of a talk on health broadcast recently from ZB, YA and YZ stations of the NZBS by DR. H. B. TURBOTT, Deputy-Director-General of Health

or infection completely over, leaving but a legacy of fibrous thickening or a small scarred spot in the lung. If the X-ray is taken while the fight against the infection is going on, a temporary abnormal area or shadow shows up. The examiner doesn't know at that particular time whether the healing process is going to win out or whether it is going to progress to a diseased area and tuberculosis disease. Hence a complete investigation is recommended, involving sputum tests and the examination of stomach washings, for any swallowed infection. The probability is that the trouble will be in the very early stages, it is in the process of healing, is non-infectious, and care and avoiding burning the candle at both ends for a while will result in healing over. Only in one or two in every thousand examined by mass X-ray is active infectious tuberculosis revealed. So don't panic when asked to return for a large X-ray! And don't say "No" when offered mass X-ray. It brings assurance if normal, clears up doubts if you have any "shadow" and leads to prompt cure if trouble is revealed.

## Knave of Hearts

"HAS it ever occurred to you to wonder where in the world these crazy-rich American heiresses dig up some of the characters they marry for a few months?" *The Knave of Hearts*, a new serial starting Saturday, September 29, at 9.0 p.m., from the ZBs, 1XH and 2ZA (3XC, October 2, 2XP, October 10) asks and answers this question in a highly diverting manner.



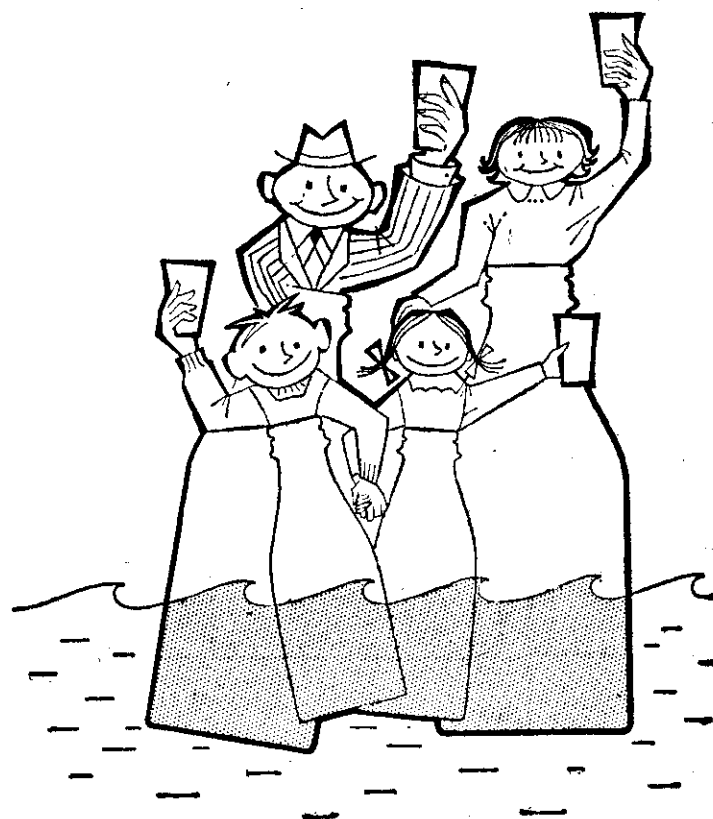
Dinah Shearing

It seems that the Knave, a Mr. Timothy Pimm, is the *deus-ex-machina* in these affairs. How could love blossom if the dish-washing Count never met the Chicago pork-packer's daughter? To solve this problem, Mr. Pimm goes into business as a "middleman of marriage," and a prosperous business it turns out to be. To quote the synopsis: "And as the bells rang out and the Sears-Roebuck catalogue wedded the Almanach de Gothe the cash rolled in golden waves at Mr. Pimm's feet."

But when Timothy Pimm meets Annabelle Mehaffey and her watchdog Aunt Matilda, Henri of Gross-Mechlenstein, Peggy Browning and Julian Soames, and other such awkward characters, he realises that Cupid and cupidity don't mix as well as he thought. In *The Knave of Hearts*, Mr. Pimm is played by Guy Doleman, Annabelle by Moira Redwood, Henri the Duke by Kevin Brennan, Julian by John Bushelle, and Peggy by Dinah Shearing. The script was written by Lindsay Hardy and John Saul directed.

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