

Are you getting the journals that you need at the Unit, and are there other things that we can help with? If anything of that sort comes up, write to Arthur Childs. We enjoyed the visit of Macfarlane very much and our Surgical Research Committee got a very much clearer picture of the set-up over there.

With best regards to all my friends there,

December 16th, 1942.

As ever yours,

Lt.-Col. E. Harry Botterell,
c/o #1 Neurological Hospital,
R.C.A.M.C.,
Canadian Army Overseas.

Dear Harry,

I was glad to hear from you and to get news of the affairs of #1 Neurological. John Counsell has been in the Institute under the care of Bill Cone. He has been having a good deal of pain, evidently due to traction of scar tissue upon roots or perhaps, as I thought, traction upon the dura. Consequently, Bill operated on him the other day exposing the lesion and finding of course a complete interruption of nervous tissue. It was impossible to draw the severed roots together, as I hoped he might be able to do, for the anterior roots at all events. He, therefore, removed the posterior roots below and laid them in the gap between the anterior roots above and the anterior roots below. The possibility that this graft will result in any restoration of function is almost zero of course, but it was worth the trial. The major purpose of the operation I think will be accomplished, that is, that he will have less pain. I suppose Bill will write you more about the operation. I think Counsell's mental reaction to the whole situation is now very good and he is determined to go ahead and make a fist of things.

I am glad you are making it possible for Harold Elliott to get some training. He is a willing and energetic fellow. He does need experience, of course. It seems to me all to the good that you are having men go to you for limited periods of time, who will be mobile surgical teams. They should be able to cooperate with you better and send you the cases more rapidly.

I think we would agree with what you say in regard to tidal drainage. It is a grand aid but it certainly is not fool-proof and there are many circumstances under which suprapubic drainage is better. I wish I could come over and learn about some of the new stuff. I was interested in the partial report of the Dieppe casualties.

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With best regards to all my friends there,

December 18th, 1942.

As ever yours,

Lt.-Col. R. Harry Bottrell,
c/o WI Neurological Hospital,
R.C.A.M.C.,
Canadian Army Overseas.

Dear Harry,

I was glad to hear from you and to get news of the affairs of WI Neurological. John Connell has been in the Institute under the care of Bill Gore. He has been having a good deal of pain, evidently due to traction of nerve tissue upon roots or perhaps, as I thought, traction upon the dura. Consequently, Bill operated on him the other day exposing the lesion and finding of course a complete interruption of nervous tissue. It was impossible to draw the severed roots together, as I hoped he might be able to do, for the anterior roots at all events. He, therefore, removed the posterior roots below and laid them in the gap between the anterior roots above and the anterior roots below. The possibility that this graft will result in any restoration of function is almost zero of course, but it was worth the trial. The major purpose of the operation I think will be accomplished, that is, that he will have less pain. I suppose Bill will write you more about the operation. I think Connell's mental reaction to the whole situation is now very good and he is determined to go ahead and make a list of things.

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