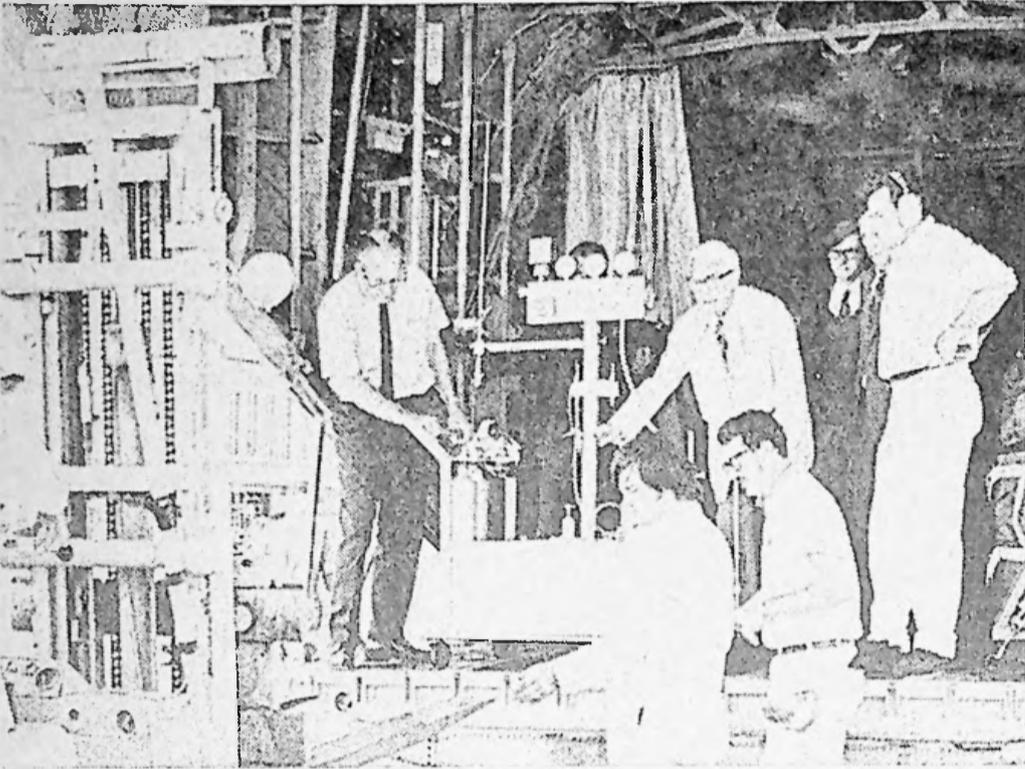


Hospital Delays Purchase, Borrows Crisis Equipment



Oxygenator is loaded into van for trip to hospital from airport

Winnipeg General Hospital expects to have a life-saving oxygenator within the next year, but the purchase of the equipment has been delayed because of rapid developments taking place in the field of oxygenation, a hospital official said Friday.

Because the equipment, which is capable of performing the function of the human lungs, isn't available in Winnipeg, the hospital flew an oxygenator from San Francisco Friday for a 17-year-old girl whose lungs have been damaged by pneumonia.

The equipment which arrived here Friday aboard a U.S. Coast Guard Hercules aircraft, along with a qualified operating staff, is the same machine which was brought to Winnipeg in November, 1969, in an attempt to save the life of a girl whose chest had been crushed in a hay-ride accident. Lynne Derksen died two weeks after the accident.

E. L. Casey, associate executive director of the hospital, said Friday that the equipment is being used to bypass the damaged lungs of Susan Stockburn for a period of time to allow healing.

Miss Stockburn was reported to be "coming along very well" Saturday morning.

Plans to obtain an oxygenator at the General Hospital have been proceeding since the 1969 incident, when the publicity attached to bringing the equipment from San Francisco helped to kick off a fund-raising campaign under the guidance of the Canadian Mennonite Bible College, 600 Shaftesbury Boulevard, Tuxedo, where Miss Derksen had been a student.

The accident occurred during a college hayride. Miss Derksen's chest was crushed when she was run over by the hay-wagon.

The college drive aided by other groups, collected about \$18,000 in the period between late November, 1969, and the fall of 1970. The campaign was then closed off and the money turned over to the Winnipeg General Hospital toward the purchase of a lung machine.

Mr. Casey credited the Mennonite group with performing a "tremendous job" in raising about two-thirds of the money required for the purchase of the equipment.

But he said the hospital had been advised to delay for a further six to 12 months before making a purchase because of the "rapid developments" in the field of oxygenation.

He said there were machines similar to the one now in Winnipeg being developed and a decision was expected to be made within the next year. Mr. Casey also pointed out the need for trained personnel to operate the machine when it is obtained. He estimated total cost of a machine, complete with standby lung and other equipment, would be between \$25,000 and \$30,000.

M. L. Bramson, designer of the oxygenator, arrived in Winnipeg Friday with the machine, along with Dr. Ron Hill and a staff of six from the Pacific Medical Centre to operate the equipment.

The Hercules plane landed in Winnipeg at 11:40 a.m. and the equipment was installed and in operation at the hospital by mid-afternoon.

Miss Stockburn had been admitted to the hospital May 28 and developed pneumonia while under treatment. Hospital officials reported that, by late Thursday night, her lungs had become so weakened they couldn't function adequately to oxygenate her blood.

The call for the life-saving machine was made about 4 a.m. Friday and by 5:30 a.m. the oxygenator and staff members were boarding the plane for the trip to Winnipeg.

It is expected the oxygenator bypass would be maintained for a period of time to let the lungs recover sufficiently to maintain oxygenation.

Dr. Hill expressed confidence the machine would help the Winnipeg patient.



M. L. BRAMSON
Oxygenator designer

DR. RON HILL
Heads staff of experts