This is Dr. Alan Hall being interviewed by Myrtle Bergren on March 28, 1979, for the Coal Tyee Project.

Dr. Hall: My father was the first medical referee for the Compensation Board, which was founded in 1917, and we were living in Victoria at that time, and we moved over to Vancouver, because the Compensation Board office was moved over, and in 1921 the coal miners advertised for a new doctor for the coal miners in Nanaimo, and my father, who had three sons going through medicine at McGill, he applied for it, and out of some 41 doctors he was selected. So consequently he moved over to Nanaimo in 1921, and he had associated in practice with him was George Bissett (?) another doctor, whose name I can't remember. In 1923 my first brother, Earl, graduated and came out to practice with my father, and in 1926 my second brother graduated and came out to practice, and in 1928 I came out to practice with my father. And my father had the coal mine contract for the employees, during this time, and that included Number One Canadian Collieries, or the Western Fuel Company as it was called then, and shortly after that the Cassidy mine opened up and they got the contract for that, and that called for a doctor to live out in Cassidy. And the Jingle Pot and the Lantzville Collieries were running, and we got the contract for that.

And my two brothers in turn left here, and went on to specialize, and practice, one in Vancouver and one in Phoenix Arizona. My father stayed on, and in 1930 we needed another doctor here, so I got Dr. Giovando from McGill, and asked him if he would like to practice out here. I knew him at McGill and knowing that he was a Ladysmith boy, I knew that he would know what type of work he had to do. And he jumped at the opportunity and came out and he was associated with us ever since.

My father stopped practice in 1950, and shortly after that -- the mines were beginning to close up, and Nanaimo was going to be a ghost town! But instead of a ghost town, it has gone just the opposite way. It has picked up, gone forward, and has never looked back. The reason why I say it was going to be a ghost town, was all the stores before that, would cater to the miners. And if the miners didn't like it, or wouldn't buy it, they wouldn't stock it. And so the result was that they figured that if the mines closed up, all the stores would have to close up. Which of course didn't happen.

Regarding practice with the miners, it was very rewarding to me. I can't speak highly enough of the type of person that the real coal miner was. There were a great deal of Scotchmen, Welshmen here, and they were very fine, thrifty people. They were as honest as the day is long, and the trouble was that they perhaps liked their beer a little
bit too much. At that time there were 28 beer parlors in and around Nanaimo. and after work the miners used to go in and have one or two drinks of beer before they'd go home. They'd have the salt on the table, which many people thought was for tasting the beer, but it was placed on the table for the miners to use to replace the perspiration that they lost during their work in the mine. And they'd go in and have a glass of beer, put a little salt in it and maybe have two or three glasses.

MB: In case of a disaster or anyone being killed, what would be the procedure?

Dr. Hall: The first case that I had was out in the Reserve mine. They phoned us one morning when we were at the office, and said that there'd been an accident and they wanted a doctor out there right away. And I went out, my father told me to go out. And I went out to the Reserve mine on the Nanaimo river, and they were just bringing the man out of the mine, and he was still on the stretcher. I examined him, and I had to be very careful because these hardened miners were all looking at me, a young fellow, and they were all looking at me not knowing whether I knew very much or not, and I felt I didn't know very much at that time, and I gave this fellow a real going over, to make sure he was dead, and he was, unfortunately.

And the tough part about that, and something that sets in my mind and I will always remember, was the manager of the mine asked me if I would stop in and tell his widow. They lived at Chase river. And he gave me directions as to how to find the house. And so on the way back to Nanaimo, I found the house, and went around the back door, and here was a young baby on the porch, and the widow was hanging clothes up. She had just done a big washing, and was hanging the clothes up, and I had to tell her that her husband was dead. And that was no mean feat. I think it ended up by both of us crying.

And that was the first case I had. After that the cases weren't too often, fortunately. There were several explosion cases, one in South Wellington mine there was two or three explosion cases. And they were pretty in badly torn up, one of those, pretty burnt. Then there were a couple of accidents over on Gallows Point, we went over across the (waves, or way) by boat, and get them, and oh, there were two or three other cases. There were not actually that many cases from the years 1930 to 50. But any that were, they were bad. I remember very vividly the explosions, (smashed up).

MB: What actually happens when the gas explodes?

Dr. Hall: When the methane explodes? Well, damp, or after-damp as they used to call it would settle in low places and you could walk along the corridor of the mine, and you'd be in good air because you'd be high enough. But if you got down near the bottom of it, there'd be methane gas.
And when you got enough of it in the mine, it fills the mine up, any spark, or any light at all will set it off, and it explodes.

MB: Now those two young fellows who were found in the mine recently -- some of the miners say that they must have run into a pocket of gas. Dr. Hall: I think so. I think that they probably ran into a pocket. They were found sitting on the floor, sitting position. I think they ran into gas -- there was no explosion apparently, but they just went off to sleep.

MB: I wonder what causes them to become drowsy.

Dr. Hall: Oh just the gas. Carbon monoxide is a -- will make a person very sleepy. And they'll just drop off to sleep.

MB: That's what it is then -- carbon monoxide?

Dr. Hall: Most likely. Or any of the methane gas, carbon gases, are liable to do that.

MB: Did you have to go down into the mine?

Dr. Hall: Only once. They didn't want to move the man, for fear he had a broken back. And I went down to see -- to make sure his back was all right, before they moved him.

MB: What were your impressions?

Dr. Hall: Well, I'd heard so much about it, I'd heard so much talking about the mines that it didn't impress me very much. The only thing about it was, I had to be careful I didn't hit my head. Or the walls. Some of the beams were low, and I'm so tall, I'm six feet three. I had to watch out for that.

MB: And did they give you any special clothing?

Dr. Hall: No. I didn't even have a hard hat on that time. They gave me a raincoat, though. And a lamp, yes. But I went down with the supervisors. And I had to carry my own bag though. (chuckle).

MB: Well how did they light this case up, this victim up?

Dr. Hall: Oh well they use their lamps, they have their lamps down there.

MB: Oh, larger ones?

Dr. Hall: Yes.

MB: When you first came, what were your impressions of the town?

Dr. Hall: Well, I didn't have any definite impression of it. It was a mining town, see, I lived in Victoria. My father practised dentistry here in Nanaimo in the 1890's before he took up medicine. And he met my mother in Nanaimo. And they were married here. And then he went through and took up medicine in 1895, and in 1896 he went up to Nelson, B.C. That's where all his boys were born, my two brothers and myself, were born in Nelson. So when I came to Nanaimo, -- we had lived in Victoria,
and we used to come up here, because Mother still had friends here, and we used to come up and see them. So I more or less knew Nanaimo.

MB: And when he became a doctor, did he do both dentistry and --

Dr. Hall: No. No, but he was the only licensed physician to do both. In British Columbia. He was the only licensed physician that could practice medicine and practise dentistry.

MB: Do you remember any stories about the early dentistry?

Dr. Hall: Yes. (chuckle). We had his forceps. --He didn't practise dentistry here too long, about two years. But we had his forceps down in the office, and on Sundays when you couldn't get a dentist here, we used to take teeth out in the office. And I remember one story, one dentist, who shall remain nameless, called me up in the middle of the night, about two o'clock, wanted me to come down and see him because he had a toothache. And he wanted me to take the tooth out. And so I said No and tried to get out of it, but this fellow, he was half tight, and he insisted that I do it. So I went down to the office, and he met me there, and so I gave him a shot of chloroform, a little chloroform. --We used to use chloroform a lot in those days, and put him under. And after I got him under, I wasn't too sure which tooth it was! (laughter) -- he wanted me to take out. So I took one out, and fortunately it was the right one!

MB: (chuckle) That was lucky! --When it came to the mine rescue teams, were you involved with them?

Dr. Hall: Yes. They were very, very good. They had mine-rescue in all the mines round here, and they used to compete once a year. And I (sat in) (examined them?) periodically during a competition, and they were very good.

--That's why we never worried too much about going down the mines, because ahead of us the mine rescue team would be there/to look after the person properly.

MB: And do you remember any actual rescue that they made?

Dr. Hall: Well yes. It was in one of the mines up in the Nanaimo Lakes Road. There was an explosion in it, and it broke through a wall, and the mine filled with water. And they called the mine-rescue team down, and this mine rescue team had to go on to get from one place to another, up over their -- almost to their shoulders in the water -- just their heads sticking out. And they got through. And they found miners that were hurt, none of them were dead, but they found the miners that were hurt, and they brought them out. And they had to bring them out the same way. Carry them out.
MB: Yes, I heard about one in South Wellington where a man by the name of John Senini held up a man for quite a while. Two or three were killed in that mine.

Dr. Hall: Yes. I remember that one. That was an explosion. They were very bad. One of them -- I've forgotten his name now but I knew him very well. He was about the most husky person I'd ever seen in my life. He had tremendous muscles on him. And the explosion just crucified him. Cut him all up.

MB: Did you hear anything about the time when the cage dropped? On Protection Island?

Dr. Hall: Yes. There were several killed on that.

MB: Yes. Sixteen, yes. (MB: there were 150 killed on that.)

Dr. Hall: That was before my time.

MB: Someone has mentioned the disease called black lung.

Dr. Hall: Yes, well that's anthrocosis, or coal on the long.

MB: Yes, he said that when you spat, when the miner spat, it was black splittle.

Dr. Hall: Yes. Any coal miner here would have -- they didn't wear a mask. Didn't bother about masks; they didn't know about masks in those days. And every coal miner would have a certain amount of that. The same way all cuts on the skin, that happened in the mine, would turn blue. They'd bring them to the office, and we'd sew them up, and they'd get a blue mark, left behind. And for a long time we didn't bother cleaning that out as well as we could have. And after a while we used to really clean them out. We got the blue mark (away). Some of them we had to cut the scars out to get rid of the blue.

MB: Was that caused by the coal?

Dr. Hall: Yes. That was the coal.

MB: In their blood, or --

Dr. Hall: No. --Well we don't know. We thought it was just coal dust, that got into the skin. When they were cut. And the cut would just be swabbed out roughly. And sewn up. And the dust would be left behind.

MB: And the Compensation laws -- there was some kind of improvement, I guess, I don't know just when they were brought in.

Dr. Hall: The Compensation Board was founded in 1917 in British Columbia. And as I say, my father was the first medical referee for the Compensation Board. And they've improved a thousand fold since they were first started. They are still not adequate. They weren't adequate
when I practiced, -- a man lose a thumb or a finger or something, he'd get practically nothing for it. And they've improved them over the years.

MB: Were there many men with limbs amputated or --
Dr. Hall: Yes, quite a few. Quite a few. You'd have to amputate. The mining companies were pretty good though, they would take men back and give them a light job or one that they could do, with an amputation.

MB: Of course the people I'm interviewing are all up in their 70's, and some are in their 80's. What was, would you say, the average life span in those early days? Of a man.

Dr. Hall: Oh, they're a pretty tough, hardy lot, the miners. Quite a few of them lived to be 70 and 80. Any that died before that died on account of their own misfortune and life.

MB: When you say the beer, I heard that some of them thought that it cleaned the coal out of their system.

Dr. Hall: Oh, I think that they did. They did. I think that's the reason why they went into the habit of (having a drink) and it was the salt, put the salt in it. A lot of them -- of course they were Scotch, and Welsh descent, most of them, some north of England men, and they're hardy beer drinkers anyhow. And you don't know how much they just used that as an excuse. (chuckle).

MB: Now what about the children that you must have brought into the world.

Dr. Hall: Well, when I started practicing here, maternity work didn't come under the mine contract. The mine contract called for all care, medical care, and medicine, and the maternity was separate, for which we got the sum of five dollars. (chuckle). And we used to have to send that bill directly in to the miners. And gradually, over the period of years, the fee was raised -- we got a dollar a month, per miner. And that looked after the whole family, didn't matter whether he was unmarried or married, or whether he had ten kids or not. He looked after the whole family for a dollar a month.

And the medicine. That was raised to a dollar fifty a month, and then, as the period of time went by, we cut the medicine out, and they had to buy their own medicine at the drug store. But we still looked after them for a dollar fifty a month. And maternity work was raised from $5 to $10.00.

MB: You must have brought a lot of young coal miners into the world too then.

Dr. Hall: Yes. One interesting case was, my oldest brother delivered this lady of a baby -- it was a girl. My second brother delivered a lovely baby and it was a girl. And so we tried once more, and they got a boy, and I delivered that one!
And my oldest brother's name was Norman, my second brother's name was Earl, and Alan my own, of course. And they were so tickled to death with the boy, they named him after all three of us! Norman Earl Alan. (chuckle).

MB: What about infant mortality in those days?

Dr. Hall: It was fairly high. I don't think -- not much higher than infant mortality was anywhere.

MB: It would be higher than it is today though?

Dr. Hall: Yes, oh yes.

MB: For what reason?

Dr. Hall: Didn't have the medicine, didn't have the drugs, and didn't have oxygen. I always remember when I came here, to practice, in 1929 it was, I had a case of pneumonia. And he was (blue?) from having pneumonia--that was before having penicillin or sulfa drugs, and I wanted to get him oxygen, and they didn't have oxygen. And so I went down to the mine-rescue station and got a tank of oxygen and gave this man the oxygen from the mine rescue station.

The hospital was closed for a year. It was built but never opened. It opened in 1929, October 1929. But at that time all our more serious cases had to go down to Ladysmith. And it meant that we had to go down to Ladysmith every day, sometimes twice a day, sometimes three times a day.

MB: And you had a car to get around?

Dr. Hall: Yes.

MB: What was the make of it?

Dr. Hall: Dodge. I had a Dodge, which I bought from my father -- golly, maybe he gave me that one. That first one I had. But it was such a decrepit old Dodge that the roof leaked. And my wife used to come out and make calls with me, and she used to sit in the car with an umbrella up, inside of the car! (chuckle). But after two or three years I managed to buy myself a decent car.

MB: I guess you had some pretty desperate calls, too.

Dr. Hall: Yes, a lot of them were rush calls. And when I first came to practice, the people would phone in in a desperate hurry and ask for my father. Well my father would be busy in the office -- it was a big office full of people -- I didn't have too many people waiting, My father would send me out to make the call, and when I'd get there, I'd knock on the door and the people would come and they'd look at me very disdainfully and say, "Oh, it's you! We were expecting the old man, but I guess you'll do" (chuckle).

Do you want me to tell about the Chinese now?
Dr. Hall: Chinatown was entirely walled in when I first came to town. And they used to close the gates at night. The gates remained in place, and you could see them for years afterwards. But the Chinese were hard workers, thrifty, and they never complained. I used to go up there, being a doctor and knowing a lot of the Chinese, they would let me in to almost any place I wanted to go, and I would go up there, and go in this place and see them sitting around playing fan tan, and card games, with their -- smoking their pipes. A lot of them would use water pipes, which is just a hollow piece of bamboo with a spout on it, and they'd fill the tobacco in it, put water in the bamboo, and put tobacco with it, and they'd breathe through it. Others had opium pipes, which were usually silver, and they would smoke the raw opium in it.

The Chinese were very fussy about leaving this earth just the way they came into it. And they didn't want any amputations. And they would go to any length to resist an amputation.

One case that I remember well was a man that fell off the top of a box car down at Beban's mill which was just near Number One mine. And he came down on the ground and his foot turned underneath him, with bones right through the skin and into the mud. And they brought him in to the hospital, and we did everything to clean it up, and everything to heal it, and it wouldn't heal. It wouldn't heal at all. The circulation was poor in it. And so we had the Compensation Board see him, and their doctor, when he was over, dropped in and looked at him, and said, There's only one thing to do. And that's amputate. Amputate the foot. --Well the Chinaman wouldn't hear of this. And so, we decided then to use the "enclosure" technique, which had just been brought out during the Spanish war, -- the enclosing a wound with compound wounds with a cast and leaving it alone, for several months, several weeks, in any case.

So we enclosed this Chinaman's foot -- we reduced the fracture as much as possible, of course -- enclosed his foot in the cast, and up the leg to the knee. And he came along very well, the cast got as dirty as could be, but we left it alone, until one day when I walked in, I saw some blue-bottle flies flying out of the cast. I knew immediately what was going on in there, and I told the orderly to take the man down and take his cast off and not be surprised at what he saw. Just to leave it alone, and let me know.

In due course, while making rounds upstairs, the orderly came flying up and -- to tell me to come down right away, and see this man. I went down, and here was the wound all covered with maggots. Simply covered with them. The wound was as clean as could be. We washed the
maggots off, left the wound open, and it healed up then. By second
intention. This man came back years later to see me one Christmas. And
he walked in. His ankle was stiff, but outside of that, he had hardly
any limp at all. It was a good thing that he didn't want to go out of this
world with an amputated foot.

MB: When you had no drugs in those days, or very few, what else did
you have to resort to?

Dr. Hall: Prayer. (chuckle). There was no penicillin or sulfa
drug, at all. And we used the old time drugs. We used a lot of drugs then
that have since gone by the boards, and I don't use now at all. Like
strychnine was very prevalent in those days, which they don't use now.
They used to say that when a man had pneumonia, if you could keep his heart
going long enough, the man would get better. And we use strychnine
in small doses. To keep his heart going. And things of that nature.
Hot fomentations. Hot packs, and aspirin, of course. And it wasn't till
the middle thirties that the sulfa drugs first came in. Sulfanulamide
came in first, then sulfa (something else) ... and nowadays I can think
of several patients who would be alive today if they had only had penicillin
to knock the bug. They were just the victim of the times.

MB: This would be mainly pneumonia?

Dr. Hall: Pneumonia, infections, cellulitis I remember one
waitress from the hotel, she had an infected lip and she put lipstick on it,
to cover the infection up. She got cellulitis and died. Today of
course, that wouldn't be so. She would be alive. I remember a man down'
here, he had an infection on the end of his nose. He died. He would be
alive today. And there are several of those cases.

MB: And did you have any other examples of the maggots being used?

Dr. Hall: Yes. One or two cases. Before that. My father had got maggots
sent over from Vancouver. They used to keep a supply of them over there.
And he had them sent over, and maggots will only eat dead tissue. For
tissue that was dead and rotten, and when they cleaned the wound up, maggots
are fine.

MB: When people were burnt in the mine, how did they recover?

Dr. Hall: We burn cases, we used to worry about an awful lot. Because
burn cases wouldn't be an (active) treatment right away - it would be
the loss of the electrolytes of their body fluids, which would catch up
with them in two or three days' time. We didn't know that at first.
And we used to treat them as -- give them lots to drink. Lots to replenish
the body fluids as much as possible. And treat the burns locally.
That's about all they'd do.

MB: There is one example you gave in your last interview of your trip to Montreal, to a medical conference in the thirties, and you came out of the hotel and there was some news about Nanaimo on the front page of the newspaper.

Dr. Hall: Yes, that was when I came out of the medical conference and picked the paper up, the headlines were: Hatchet Man Imported From Nanaimo. --and all my friends were kidding me, wanting to know if I was the hatchet man! (chuckle). This was - his name, I guess it can be told now, he's dead. Was Mah Sam. He used to bring patients down to the office, to do the talking for them. And he'd get his "cumshaw" from every patient.

MB: What did it enlarge on? Was it a T'ong war?

Dr. Hall: Well, yes, this was a T'ong war of some sort, that had been going on. And it had spread back east. And they brought this Mah Sam out from Nanaimo to Montreal to kill some of the other people, I guess. I don't know whether he did it or not.

MB: Was he a coal miner?

Dr. Hall: No. He was a "above" coal mining. (chuckle). He was a gentleman Chinaman, if you want to put it that way. He didn't believe in dirtying his hands. Or doing menial labour. He would bring the Chinamen down to the office to talk for them, and tell what was wrong, and take them home. He got his "cumshaw" for doing it.

MB: Was he a coal miner?

Dr. Hall: Yes, he lived in Chinatown.

MB: I have heard since that there were Chinese women here too. How was it that some were able to bring their wives, and others were not.

Dr. Hall: I don't know why that was.

MB: I wondered if it was whether they could afford it or not.

Dr. Hall: Probably. Every Chinese that worked here practically used to send money back to China. They all practically used to say that they had a family back in China, that they were keeping. And they used to send money back to China.

MB: Whenever there was a Chinese sick, and of course they died naturally the same as anyone else, were you called upon to --

Dr. Hall: Yes.

MB: And I have been told by Mrs. Rhoda Beck, she remembers as a girl a coffin in the middle of the street in Chinatown, with a dead Chinese in it, and they would put money on his eyelids and this sort of thing.

Dr. Hall: Years ago, every time when one of the families had a funeral, they used to throw money out behind the coffin, behind the procession and they would go on right all the way up to the graveyard. They had their own
demetary here, you know. Chinese cemetery. It's up on Townsite Road. They used to leave food there too. For the Chinaman that had just died.

MB: Did anyone pick up the money then?

Dr. Hall: Yes, sure. Kids. You'd see kids running along behind the funeral, they'd pick up the money.

MB: I guess it was a superstition or a belief...

Dr. Hall: I don't know what their reasoning was behind it, about throwing the money away. But they had some reason.

MB: It was most interesting to hear about these early cures, that people don’t know much about these days, you know.

Dr. Hall: No. I often think that if you took a doctor now and just transported him back to those early days when we were first practising medicine, he would be lost. He wouldn't know what to do. Because everything nowadays, the first thing you do is practically is, you give them an antibiotic of some sort. Well, take that antibiotic away, and what do you do? (smile)

MB: I think you told us about some of the dances and various things you were able to go to in the early days. What did you do in your leisure time?

Dr. Hall: Well, we would bowl, for one thing. We belonged to a bowling team. And there were mens' and womens' and mixed bowling. We used to go down and bowl. And then periodically there were dances. And the dances were very good. They were hard and fast, and very much like a jitterbug nowadays.

MB: Do you remember some of the tunes you danced to?

Dr. Hall: Oh...

MB: Bye bye Blackbird?

Dr. Hall: Oh yes. Yes.

MB: What years would this be in? The '20's?

Dr. Hall: In the '20's and '30's.

MB: Where was the hall?

Dr. Hall: The IOOF, International Order of Oddfellows Hall, was in the basement on Commercial Street, and it used to be one of the big places. Then of course later on the Pygmy was developed. And it had a dance floor built on springs, which was considered really up-to-date. And it was very good. And dances used to be held there. And then there was the Finnish Hall at Chase River. And the hall up north, I forget the name of it.

MB: And you used to go to them?

Dr. Hall: Yes.
MB: Did you ever play bocchi with the Italians?
Dr. Hall: No, I didn't. I stopped and watched them play it, but I never played it.
MB: It's a form of bowling, I understand.
Dr. Hall: Yes. A great Italian game.
MB: Was there an opera house?
Dr. Hall: Yes. There used to be an opera house. When I first came to Nanaimo, here, there was an opera house, and two shows. There was the Capitol Theatre and the Bijou, and the Opera house.
MB: What was the musical entertainment like in those days?
Dr. Hall: Sparse, but it was good. They had real entertainers here. They used to put shows on and they had real music, piano, violin, and trumpet. Drums. And they had a pit orchestra.
MB: I understand there was a very good choir, and they sang the Messiah quite regularly.
Dr. Hall: Once a year. It was a very good choir. A lot of Welsh people here, sang in it.
MB: And also in one case at least, the church was the centre of their life.
Dr. Hall: The Methodist church, I think it was.
Dr. Hall: Yes. The Methodist church is the United church now. On Fitzwilliam. It was really the centre of peoples' lives then. They would go and sing, and have a good time at the sing-songs, and have tea.
MB: This would include the miners as well?
Dr. Hall: Oh yes.
MB: And did you ever know whether the miners were God-fearing, or otherwise.
Dr. Hall: No, but I think most of them were God-fearing. Most of them were very clean living. Basically they were clean living. They drank beer and they swore and they did things that any miner will do, but they were basically a good, hard working, clean minded person.
MB: Someone has told me that when a miner had finished his 8 hours' work he didn't do anything else. Digging fence-post holes was the woman's job. And this sort of thing.
Dr. Hall: I don't know anything about that. (chuckle). I know lots of miners who had wonderful gardens, and they used to work in them. Along Haliburton Street. And Nicol Street. Chase River. They had beautiful gardens.
MB: There were a lot of Finnish people here, I understand.
Dr. Hall: Yes, Chase River. It was all Finnish. And when I came here first practically every home out here in Chase River you could see the
little house behind, where they used to go and have their baths. It was all Finnish people. They were good, hard working, clean people. You could eat off the floor in a Finnish home. --Some of the English people -- I hate to say this, but they weren't nearly as clean as the Finnish.

MB: (chuckle) I quite agree! I'm English myself. --And then there were the Italians, of course.

Dr. Hall: Yes, there were quite a few Italians here. Quite a few Czecho-slovaks. And Yugoslavs. And Italians would be, I guess, the next race. Besides the English and the Scotch and the Welsh. Then would be the Italians. --Dr. Giovando will be able to help you out a lot with the Italians.

MB: (speaks of Dr. G.) --and there is another doctor, Dr. Williams?

Dr. Hall: He is retired, living down at Departure Bay. His father was a coal miner. And they were great singers. They were Welsh. Great singers. Syriol Williams worked for us. He came to work for us until the war started and then he went to Vancouver.

MB: Now what about your own forebears? Were they miners? They were Dr. Hall: No, my grandfather and my uncle were both killed in an explosion, of 1887. My grandfather was a shift boss, and my uncle was just an ordinary miner.

MB: Where abouts?

Dr. Hall: In Nanaimo. Number One mine. --And I remember stories of them telling how they wrote farewell messages -- some of them were -- they weren't all killed right out. Due to the collapse they were walled off, in a good part of the mine. But they wrote messages in the dirt on their shovels. Farewell messages. They didn't have any paper or anything to write with so they wrote a farewell message on a shovel.

MB: And also you told me something about sports in the last interview.

Dr. Hall: Yes, well Nanaimo has always been a sports minded town. And in the early twenties they had the best soccer team in Canada. They won the Canadian championship. And that was composed largely of miners. Or fellows that worked in the mine. And they were very good. And of course we won the Canadian championship lacrosse too. I had the opportunity of going back to Toronto as a lacrosse doctor and I originated a bed count. They had to all be in bed at a certain time at night, and I used to go round and see that they were. They always it then, but now they all complimented me on that, saying that if it wasn't for that bed count they wouldn't have won the championship. (laugh).
MB: How did they begin lacrosse then, here? Who started it?

Dr. Hall: They just started it. They used to have more Indians playing lacrosse *tkaw* when they first started, than they do now. Now it's (end of Side 2, Tape 1)

(2nd tape - Side 1)

MB: What band did they belong to?

Dr. Hall: Nanaimo. They were well-built, strong, sturdy fellows. And they were really good. As a matter of fact the goal tender for years and years used to be an Indian. In Nanaimo. He was the star goal tender.

MB: And the lacrosse team kept growing?

Dr. Hall: Yes. Indians originated it.

MB: What about hockey?

Dr. Hall: Well, hockey. My claim to fame is that I'm a nephew of Lester Patrick, and cousin of his sons, Len and Murray (check), only through marriage. Lester married my mother's sister, in Victoria. And they were brought up there. And when I was going to McGill, when Lester had a team in New York, and he used to come up to Montreal to play all the time, play the Canadians, it was my fortunate that I was at the game that Lester made his fame in by going in goal (?). The ranger goal tender got an eye injury, and even though there was another goal tender sitting in the rink, the Montreal Maroons, at that time, wouldn't let them put him in. So Lester said well he'd go in. He was 44 years old at that time. He put the pads on and went in goal, and he only let one goal in. And the Rangers won that game in overtime. That was the Stanley Cup playoff. That was my biggest thrill, because I was at the game, I was sitting right behind him. And then Len and Murray went on to play for the Rangers and coached them.

MB: And your own experience in sports?

Dr. Hall: Well I never had any experience in hockey. Or contact sports. I am blind in my right eye. That was an injury that I received when I was three years old. And my parents wouldn't let me play in any contact sports. And so I ran for the track team, and I ran a half mile in high school and I ran a half mile at McGill on the track team. But my brother Earl, he played hockey. He played hockey for McGill. And Norman, my other brother, he didn't play hockey, but he used to play at it, in the fraternity hockey, where they used to have real rough, tough matches. On an outdoor rink.
MB: This must have been a handicap for you, it must have made it quite difficult for you to become a doctor.

Dr. Hall: Well yes it did, in a way. But I never thought of anything else. We moved from Victoria to Vancouver, and as I stated before, when my father became a Compensation Medical Referee and my one brother was in medicine, my other brother came back from World War I, and went into medicine, and I never thought about anything else than I would go into medicine. I never had to think about what I would take up or what I would do. It was just natural for me to go into medicine.

MB: It must have been a great strain for you when you had to work under poor lighting conditions, and operate.

Dr. Hall: No, I never noticed it. As a matter of fact I remember, I was taking my Quebec Board examination, and I would go up to Quebec city. From Montreal, to take them. And I knew Dr. Charles Martin, was head of McGill, and he was set on the Quebec Board. I knew him very well, because I used to go out to his place for Sunday tea and one thing and another. And when I went up for my Quebec Board examinations, when I walked in he says, Oh hello, Hall, and then he spoke in French. So they had French doctors there on the ward. I could just get the gist of it. And he told them in French that I only had one eye, and but that I could see more out of one eye than the average person could out of two.

MB: Any more observations about the old days? --A place to live?

Dr. Hall: I would never move away from Nanaimo. A lot of people say, Now that you're retired, what are you doing? Why don't you move away from here, move down where it's hot? I go out on travels, I'm always glad to get back to Nanaimo. I realize what we have after I've been away for a while. And several people have wanted to buy this house. I said no, that's my house as long as I live. I'm going to live here. And it is.

MB: It's a beautiful spot. --Did you ever hear much of Mr. James Dunsmuir when you were young?

Dr. Hall: No. I never knew anything of the Dunsmuir's at all.
MB: I've just read an article about Mr. and Mrs. Keighley.

Dr. Hall: They lived in Dunsmuir's house, down on Departure Bay. Keighley's very nice. He had the best potatoes and the best corn! It was wonderful. Everybody would wait for Keighley's potatoes.

MB: Are there any big events that stick in your memory?

Dr. Hall: No, the 24th of May used to be the big event here. And I have a medal that my father won for skulking around Newcastle Island. He circumnavigated, and he won that in 1896, May 24. He was born outside of Ottawa. And he came out as a boy of 7 and they had a big farm down at -- it was called Hall's crossing, and it's now Westholme. His father had that farm. My father's two brothers -- one was a druggist and one was a dentist.

(End of interview)

After the interview he told me that his father used to order maggots from Vancouver, also leeches. You could put a leech on a man's swollen eye and it would suck all the blood out. MB.