

of the MAHONING COUNTY MEDICAL SOCIETY

February • 1959 Vol. XXIX • No. 2 Youngstown • Ohio



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#### ANNUAL HEART MEETING

TUESDAY, FEBRUARY 17 ELKS CLUB

MAHONING COUNTY MEDICAL SOCIETY
YOUNGSTOWN AREA HEART ASSOCIATION
MAHONING ACADEMY OF GENERAL PRACTICE

#### SPEAKERS

DR. JOSEPH W. GILBERT, JR., National Heart Institute

SUBJECT: Current Developments in Cardiovascular Surgery

DR. LUTHER L. TERRY, Asst. Dir., National Heart Institute

SUBJECT: Recent advances in the Diagnosis of Congenital Heart Disease

6:00 Cocktail Hour

6:45 Subscription Dinner—\$4.75

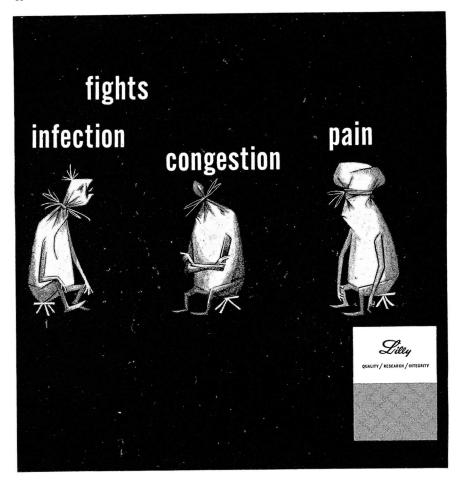
8:00 Meeting

TO MAKE RESERVATIONS: Phone the Youngstown Area Heart Association, RIverside 4-8919, before noon, Feb. 16.

## MEDICAL-LEGAL BANQUET

THURSDAY, MARCH 17

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#### **OFFICERS**

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A. K. PHILLIPS, Secy. 1005 Belmont Avenue	C. W. STERTZBACH, Treas. 3610 Market Street	L. O. GREGG, Editor Dollar Bank Building
_		

Cou	ncil	Delegates	Alt. Delegates
H. P. McGREGOR S. W. ONDASH M. S. ROSENBLUM H. J. REESE	G. E. DeCICCO P. J. MAHAR C. E. PICHETTE F. A. RESCH	P. J. MAHAR (1959) H. P. McGREGOR (1960) G. E. DeCICCO (1961) A. RANDELL (1962)	C. C. WALES J. J. McDONOUGH R. R. FISHER S. W. ONDASH

Representative to the Associated Hospital Service: J. M. RANZ Executive Secretary: H. C. REMPES, JR.

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## Our President Speaks

In our preoccupation with ministering to the needs of our patients we forget that our activities would not be so successful were it not for our lay associates in our offices whose loyalties are legion.

Every well established office has an executive secretary who carries out the administrative duties of the medical practice and leaves the doctor active in his vocation. What a load the doctor would carry



if he had to do administrative chores. Thank God for secretaries

On a larger scale, The Mahoning County Medical Society, through the years, was very fortunate in having Mrs. Mary B. Herald as executive secretary. She worked hard, long and without pay at times to raise her group of doctors to maturity. Many of our accomplishments are due to her tireless efforts and her loyalty.

Her objectivity was a stimulant to all of us who knew Mary. Somehow she always came through with a good solution. She has also guided the Medical Dental Bureau to its fine position in the community. Mrs. Herald is also active in the Medical Foundation.

Her son, Paul is following in his mother's vocation and will have a fine future.

On behalf of the Medical Society I extend best wishes to both of you for your faithful and gracious service. God bless you in your full time job in the Medical Dental Bureau.

M. W. Neidus, M.D. President

# BULLETIN of the Mahoning County Medical Society

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Volume 29

#### February, 1959

Number 2

Published for and by the Members of the Mahoning County Medical Society

#### Editor

Lester O. Gregg, M.D.

#### **Associate Editors**

Wayne L. Agey, M.D. Leonard Caccamo, M.D. Alexander Calder, M.D. James L. Fisher, M.D. Robert R. Fisher, M.D. Sanford F. Gaylord, M.D. Carl A. Gustafson, M.D. Robert L. Jenkins, M.D. Richard Murray, M.D. James L. Smeltzer, M.D. Bernard Taylor, M.D. Kurt J. Wegner, M.D. Samuel Zlotnick, M.D.

#### **EDITORIAL**

#### MALPRACTICE CLAIMS

Malpractice claims against physicians are on the increase. Your chances of having one filed against you are one in seven. They are not limited to a few malpractice prone physicians, as 86% of those surveyed had one case and only 10% had two cases against them.

One of the biggest factors in the so called unwarranted claims is Doctor-Patient relationships. Failure to exercise tact in dealing with patients precipitates many suits which otherwise would not have matured. Personality clashes with the patients should be avoided.

Another factor is over promising the patient  $\alpha$  medical or surgical result. We should not get over optimistic in discussing with  $\alpha$  patient his ultimate outcome.

Misunderstanding over fees or excessive fees sometimes results in claims. All fees should be discussed before surgery and fees should be comparable to those of other physicians in the area.

Criticism of treatment by other Doctors is also a frequent cause. It is imperative that we do not discuss other physicians treatment with the patient. We must also remember many patients statements about what another Doctor said or did is greatly distorted. I am sure this has happened to all of us.

Valid claims are commonly due to failure to call in a consultant when indicated, attempting to perform things we are not qualified to  ${\tt do}$ , and removing surgically and cutting other than what was supposed to be done. Occasionally pure accidents occur as breaking off a needle in the tissue. All these are in the minority and the great majority of claims are unjustified.

We must also remember that 4% of all claims are due to assault and battery caused by failure to get consent forms signed. Another important point is to get parental consent in surgery and treatment of all minors.

We must also carry sufficient amount of malpractice insurance. Awards as high as \$600,000 for a single injury have been reported. This is due to the increase in American earning power, adding cost of the medical care, changing judicial attitudes and Hollywood type acting of attorneys in the courtrooms.

L. O. Gregq, M.D.

Editor

#### COUNCILOR'S PAGE

I have reminded the Presidents of the County Medical Societies of the Sixth District that my term as Councilor will expire at the April meeting and that I am not eligible for re-election. It therefore becomes necessary to select a new Councilor for our district.

I believe that the next Councilor should be selected in the most democratic manner possible. I have therefore suggested that each president ask his Delegates to ascertain from the membership of his county society what their wishes are with regards to the next Councilor. They can suggest anyone in the Sixth District (except me) I hope each county will have a nominee. If there should be a nominee from only one county, he will be the next Councilor. If there should



be more than one nominee, I think we should vote, with each county, casting as many votes as it has delegates,

Columbiana County		1
Mahoning County		4
Portage County		1
Stark County		4
Summit County		5
Trumbull County		2
	-	-

17

If this plan is acceptable to the doctors, at least nine votes will be necessary for election.

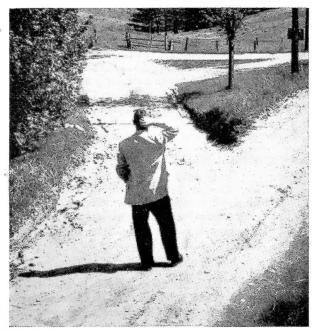
If there is more than one nominee, I think the Delegates from the Counties making the nominations, should prepare for distribution, to the other Delegates, summaries of the nominees' qualifications. If this method is satisfactory we should pretty well know by the middle of February whom the physicians of the Sixth District want to represent them on the Council of the Ohio State Medical Association.

We hope every county will be fully represented at the Conference of county medical society officers, meeting in Columbus on Sunday, February 22. It is really our most important medical meeting of the year. If your officers get an enthusiastic start, your society will have a good year. To be a going society you need several "spark plugs."

The next few months will be very busy months for the Legislative Committees. They will (or should) be calling on all of us for assistance. Our central office will do its utmost to keep us all informed on the legislative happenings in Columbus and in Washington. Every effort will be made to interpret legislation and point out its full meaning and consequences to physicians. From time to time your Legislative Committee will ask for your support by letter, wire or phone calls to members of our law-making bodies on vital important issues. Don't fail to do your duty.

I'll end this page (or pages) with a quotation from a news-letter (AAPS) recently received, "The 86th Congress will be a left wing 'welfare' Congress. If given half a chance, it will spend our money as if there were an endless source of dollars. The Senate and House Committees will be stacked with

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a large number of 'liberals.' Those of us who believe in freedom and our American system of free enterprise, face a discouraging, difficult, uphill legislative battle. But if we 'get together and stick together' and call our natural allies—our patients—to work with us, we can defeat many of these ill advised programs. Even a 'liberal' can be sold on the 'Right' if enough of his employers—those who elected him—make their wishes known to him. In the past it has been the left wing minority groups that have been vigorously vocal while the majority of freedom-loving voters were apathetic and did nothing to tell their Washington servants that they considered God given freedom and God given rights to be their most important possessions."

Last month you saw what an agenda for a Council meeting looks like. We hope you will carefully read in the next OSMA Journal what the Council

did with all of these problems.

C. A. Gustafson, M.D.

#### HONORED FOR COMMUNITY SERVICE



Dr. Gabriel E. DeCicco received the annual Community Service Award of St. John's Episcopal Church on January 20, thus becoming the second Youngstown physician in three months to be honored for outstanding community achievement. Dr. John N. McCann received the Junior Chamber of Commerce Purnell award last October.

Dr. DeCicco was awarded the citation for "significant service above and beyond the call of duty to both his church and his community." In receiving an inscribed prayer book from the Rev. Hunsdon Cary Jr., rector of St. John's, Dr. DeCicco was commended for his part in establishing the Youngstown branch of the American

Academy of General Practitioners, and for his work in the Mahoning County Chapter of the American Cancer Society. He has also served as a vestryman at St. John's

He was further honored when his son, William, was selected as the youth at St. John's whose character, personal integrity and church service

were judged highest of the year.

Dr. DeCicco was born and raised in Youngstown, attending Mrytle Ave. School, Grant Junior High, and South High. He was graduated from Denison University in 1932, and from Jefferson Medical College in 1936. He interned at Youngstown Hospital. In September of 1937, he began practice at 1008 Market St., where his office is located today.

His military career in World War II found him in the New Guinea and Philippine areas on "D" day and with the amphibious engineers in four

landings. He came out of the service with the rank of Major in 1945.

He was president of the Mahoning County Medical Society in 1956, and was secretary of the society for five years. He has been secretary of the Medical Dental Bureau for the past eight years.

Mrs. DeCicco is the former Ruth Colwell, a graduate nurse. Their two

children are Gail Ruth, and William.

Anyone who is preparing a resolution to be brought up at the Annual Meeting of the Ohio State Medical Association must submit it to the Columbus office by February 21—sixty days before the Annual Meeting, April 21-24.

#### WE HOPE YOU DIDN'T MISS . . .

 $\alpha$  recent article the American Academy of General Practice published in their monthly magazine ''G.P.''

Entitled "How to Improve Business Management and Human Relations," the article gives a good many tips to doctors on increasing office efficiency and increasing collections.

Here's one paragraph we think you'll find particularly interesting:

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P.S. Did you read the October 27th issue of Medical Economics, page 104?

#### BUSY SCHEDULE FOR HEART DAY SPEAKERS

Morning meetings at both St. Elizabeth Hospital and Youngstown South Side Hospital, an afternoon panel discussion at South Side Hospital, and an evening dinner and meeting at the Elks Club will mark Heart Day, February 17, for Youngstown physicians.

Dr. Luther L. Terry, Assistant Director of the National Heart Institute, Bethesda, Md., and Dr. Joseph W. Gilbert, Jr., of the National Heart Institute,

will speak at all three meetings.



DR. TERRY

Dr. Terry will address a group at Youngstown South Side Hospital at 10:00 a.m. on "Serotoin and the Malignant Carcinoid Syndrome." At the same time, Dr. Gilbert will speak at St. Elizabeth Hospital on "The Surgical Treatment of Aortic Stenosis."

The afternoon session will be held at 3:00 p.m. at South Side Hospital, when both Drs. Terry and Gilbert will conduct a discussion panel.

In the evening, following a dinner at the Elks Club, Dr. Terry will speak on "Recent Advances in the Diagnosis of Congenital Heart Disease," and Dr. Gilbert's

subject will be "Current Developments in Cardiovascular Surgery."

Dr. Terry is Medical Director of the U. S. Public Health Service. As well as being Assistant Director of the National Heart Institute, he is also Assistant Professor in Medicine, Johns Hopkins University School of Medicine.

He is a graduate of Tulane University of Louisiana, School of Medicine, 1935. His internship and training were at Hillman Hospital, Birmingham,

Ala., University Hospitals, Cleveland and City Hospital,

Cleveland.

He has held positions at Washington University, St.

Louis, Mo., University of Texas, Galveston, Texas, and

Johns Hopkins University School of Medicine.

He is certified by the American Board of Internal Medicine.

Some of his special assignments were: Member of Medical Division of Strategic Bombing Survey to Japan in 1945; Staff Member of a Subcommittee Investigating Malmedy Atrocities, Senate Committee on Military Affairs in 1949; Chairman of Medical Board, Clinical



DR. GILBERT

Center, National Institutes of Health; Chairman of Cardiovascular Research Training Committee, National Heart Institute, and member of the Board of Directors, District of Columbia Tuberculosis Association.

Dr. Terry is a member of the American Heart Association, the AMA, and the Montgomery County Medical Society, a Fellow in the American College of Physicians, and a member and Past-president of the Public Health Service Clincial Society.

He is co-author of 43 articles appearing in a variety of medical annals. Dr. Gilbert is a graduate of Emory University School of Medicine in

Atlanta, Georgia, in 1948. His surgical residency was at Bowman Gray School of Medicine at Winston-Salem, North Carolina. In 1955-1956, he had a Research Fellowship (pump oxygenator development) at Children's Hospital, Boston, Mass.

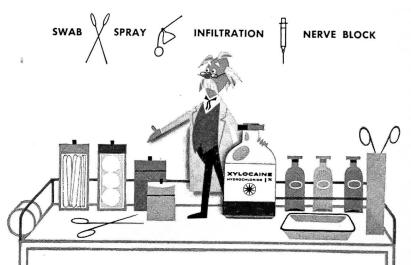
From 1956 to the present, he has been with the Clinic of Surgery at the

National Heart Institute at Bethesda, Md.

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#### INTERNATIONAL HEART CONGRESS

(Attended by Dr. William H. Bunn, Sr.)

The Third International Heart Congress was held at Brussels, Belgium in September of 1958. This meeting without question was more stimulating

than any of the two previous Congresses. The University of Brussels made available their entire physical plant (nine auditoriums, many class rooms and registration offices) for the entire week of September 21st. Inasmuch as this very modern university accommodates five to seven thousand students, there was no crowding even though there were three thousand members of the conference. When one realizes that there were five hundred papers, presentations, and symposia, it is apparent that adequate meeting space was a requisite to prevent the confusion which marked the Washington, D. C., Congress, held in the old Armory.



Most of the papers were of high order. One cannot expect a universally high level of presentations from areas where the effects of the recent war are still present, but by and large even the less definitive presentations were stimulating. The arrangeemnt for simultaneous translations provided through the facilities of the IBM headsets was much better organized than at the two previous meetings. The translators were better selected, they were more x-perienced, and in addition often had a manuscript for ready reference.

On registering at the conference, each member was given an attractive zippered briefcase containing the program, with a description of the various conferences, the location of same, a list of the speakers and members with their nationalities and home addresses listed. A certificate of membership, a badge, and tickets of admission to the various functions were included. Acaccompanying this was a cardboard container weighing several pounds, enclosing seven paper-bound volumes of translations of abstracts of all papers, complete addresses, and a resume of all communications, conferences, and symposia. These data, available in advance, proved to be extremely valuable, making it possible to be more critical about deciding which meetings to attend. There were so many sections convening at the same time that scheduling of the most interesting to the individual had to be done in advance to get the most value from the entire Congress.

My chief interest being in hypertension, cerebral accidents, coronary disease, and rheumatic fever, I was able to schedule my time to attend the section meetings most interesting from my viewpoint. It was my intention to keep careful notes, but was relieved of that task by having available the translations previously mentioned.

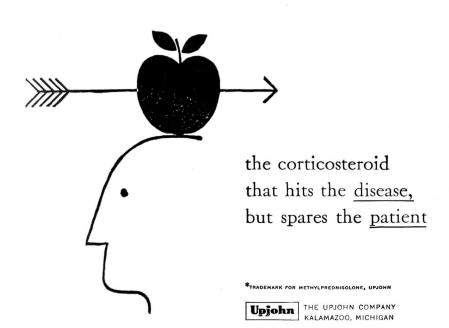
The following details concerning one phase of the conference,  $\alpha$  thorough discussion of the rheumatic fever problem, will serve to illustrate the importance of this particular subject and the international flavor of the

Congress.

Doctor Bywaters of London spoke on the prophylaxis of the recurrent type of rheumatic fever through the use of sulphonamides. Doctor Rammel-kamp of Cleveland, whom we all know, presented the idea that the living streptococcus appears to play a dominant role in the development of rheumatic heart disease. Doctor Mozziconacci's (of Paris) thesis was that we are not diagnosing rheumatic fever early enough. He made the plea that definite efforts be made to cut down the time between the appearance of symp-

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60 BULLETIN

toms and a proper diagnosis. In stressing the fact that chorea is treated exactly the same as rheumatic fever was confirmation of our plan of treatment. McCarthy of New York insisted that unless the anti-streptolysin titer is over 500 one cannot be sure that rheumatic fever is present. He stressed the necessity of repeated tests to see if significant changes develop. Massell of Boston talked about the use of penicillin in the treatment of an attack of rheumatic fever and concluded that steroids are preferable for patients with active carditis and in early cases without definite murmurs. Doctor Roskam of Belgium treats rheumatic fever first with salicylates combined with corticoids, and afterwards with salicylates only.

Every phase of the cardiovascular problem was reviewed. There was widespread discussion on the role that fats play in the production of coronary disease. Paul White and Ansel Keyes of this country are quite convinced from their epidemiologic studies that this is an important factor, while others doubt the importance of this as a dominant cause. New development in cardiac surgery were thoroughly aired. The drug prescription of hypertension received much attention. New concepts in cardiovascular physiology were presented. Anticoagulant therapy was one subject about which there is considerable disagreement. Only time will prove the correct application of these valuable drugs.

The high point of the meeting for me was the presentation of a research project, which received first prize. It pleased the members of the Congress that this prize was given to a Belgian, and after hearing the presentation there was no question that this was an important contribution, and that the prize was well deserved. The author, by painstaking research, has discovered a new and potent coronary artery dilator. This product is yet without a name (it has just a number) and is not yet available, but probably will be some time this year. It is one thousand times more effective than aminophyllin and three times more effective than nitroglycerin, with a slightly slower but more prolonged action.

At the various social functions one had an opportunity to meet many interesting physicians from other countries, and as always the informal "bull sessions" were perhaps the most important part of the meeting. Of the social functions, a most pleasing one was the opening reception, with the King and Queen present and a short welcoming address from each nationality represented. Paul White did the honors for the United States in his usual modest and effective manner. The orchestra concert heard on Wednesday evening, with the Queen Mother present, was a very relaxing and enjoyable function. To us, the Burgomaster's formal reception in the ancient City Hall with its many rooms containing priceless treasures of painting, parquetry, and tapestry, was the most impressive of the social functions.

We were impressed with the fact that physicians from all races and of every political belief had a common interest and were able, without bickering, to work and live together for a week. We heard repeatedly that if the politicians could carry on their duscussions in such a stimulating environment that there might be a better chance for permanent peace.



Four weeks ago, Mrs. C. was an <u>anxiety</u> patient, complaining of weakness, trembling, sweating, tachycardia, on the slightest

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#### FROM THE BULLETIN

Twenty Years Ago—February 1939

One hundred seventy-six members and guests attended the Annual Banquet. Ruth Antenreith's orchestra played during the dinner but there was no dancing. Dr. Jonathan Forman spoke on "Uncle Sam, M.D." As a souvenir every one received  $\alpha$  vest pocket program of all the meetings of the Society for the year. As usual quite  $\alpha$  few came with no reservation causing the management of the Youngstown Club a severe headache.

D. A. Gross had a leading article on "The Origin And Fate of Bile Pigment" and the late Louis Deitchman wrote up the last illness of George Washington in the form of a case report in the modern manner. Both articles

were highly informative.

The Society mourned the loss of E. W. Cliffe, a leading physicianobstetrician and of Barney Stewart the Superintendent of Youngstown

Hospital.

Joseph Hall was recovering from injuries received in an auto accident. Paul Mahar was just over a very serious illness. Sam Tamarkin and his Ida were newly married while Saul and his wife were celebrating a new son. J. K. Herald was appointed to the surgical service and M. M. Szucs to the medical service at St. Elizabeth's. Nate Belinky was a new interne there.

New members of the Society that month were Michael J. Sunday, James Herald, Asher Randell, Stanley Myers, John A. Rogers, and Howard Mathay.

Ten Years Ago-February 1949

Practically the entire issue was devoted to a discussion of socialized medicine. There was a bill up before the Senate similar to the Wagner-Murray-Dingell bill, to set up machinery for national health insurance and there was much alarm in medical circles.

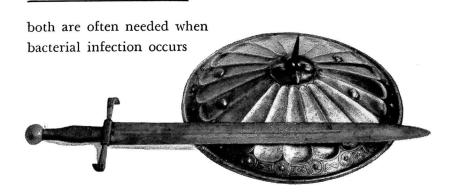
A joint committee was formed to weld the Society into an efficient striking organization to put our views before the public. It consisted of the Bulletin Editor (Gustafson), the Program Chairman (Coombs), the Public Relations Chairman (Reilly), the Lay Education Chairman (Ondash) and the

Legislative Chairman (Skipp).

The committee proposed the following plans. (A) The membership will be divided into groups with a leader and each member having a certain duty to perform. (B) Material will be made available for self education. (C) Material will be available for public addresses to be checked through the Speaker's Bureau. (D) Radio stations will be contacted and broadcasts to be arranged. (E) Each member of the Society to contact at least 20 of his patients and instruct them what it will cost and how the doctor will be handicapped in giving good service. (F) Radio programs to be set up from material originating in Chicago and through local efforts. The material will cover scientific and current problems and will be presented by some member of the Society. Round table discussions will be arranged to cover all types of educational programs. (G) School programs to be arranged. (H) Newspaper releases will be furnished . . . .

And so it went. An ambitious effort, that publicity program they put on ten years ago. From the outline you can realize that our present day public relations program does not have very long roots in the past. You may note of absence of reference to television and the tendency to do it ourselves instead of hiring outside experts. Well anyway, they tried hard and the thing was staved off, not by anything done in Mahoning County maybe, J. L. Fisher, M.D. but every little bit helped.

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MYSTECLIN'S, SUMYCIN'S AND MYCOSTATIN'S ARE SQUIBB TRADEMARKS

#### WOMAN'S AUXILIARY NEWS

The January 20th meeting of the Auxiliary was a brunch held at the Pick-Ohio Hotel. Members of the Woman's Auxiliary to the Mahoning County Bar Association were invited to attend.

Mr. William Pound of the Society for Crippled Children showed slides

and spoke on the work of the society.

Program chairman for the day was Mrs. Alfred Cukerbaum. Social chairmen were Mrs. Stephen Ondash and Mrs. W. L. Mermis assisted by Mrs. Joseph Kupec, Mrs. James Sofranec, and Mrs. Sam Squicquiero.

The February 19th meeting will be a guest night and will be held at the Youngstown Playhouse where members will see the first performance of the new Play in the Round, "Finian's Rainbow." This will be the first time the

new Arena Theater has been used.

Program chairman for the evening is Mrs. David Brody. A buffet will be served after the performance. Mrs. Raymond Scheetz, and Mrs. Joseph J. Sofranec will be in charge of arrangements, assisted by Mrs. Francis Gambrel and Mrs. Edward Pichette.

Mrs. Ben S. Brown Publicity Chairman



#### HAVE YOU MET

JORDAN DENTSCHEFF

Jordan Dentscheff was born in Bulgaria on September 17, 1923. He attended the University of Munich for his undergraduate education and received his M.D. from the University of Vienna, Austria, in July, 1950.

During the Second World War he served on the

Allies side with the Bulgarian army.

His internship was served at Vassar Hospital, Pough-keepsie, New York. From 1953 to 1956, he had a residency in obstetrics and gynecology at the University of Chicago.

He became associated with Doctor John Scarnecchia in 1957. He is married to Elizabeth Karotscheff, a former school teacher, who was born in Sofinx, Bulgaria. They have no children.

L. O. Gregg, M.D.

#### W.R.U. POSTGRADUATE COURSE

As part of a continuing program of postgraduate education, The School of Medicine, Western Reserve University, in association with University Hospitals of Cleveland, will present a postgraduate course on "Recent Advances in Internal Medicine." The course will be held on eight consecutive Wednesdays beginning February 25, 1959, in the Lakeside Hospital Amphitheatre.

Each session is broken down as follows: 1:30-3:00, 1st period lecture;

3:00-3:30, coffee break; 3:30-5:00, 2nd period lecture.

The course will stress both basic mechanisms and methods of diagnosis and therapy within the fields of neurology, hematology, cardiology, and

endocrinology.

Only the first 85 applicants may be accepted. The fee will be \$35.00 for the course, payable in advance to Western Reserve University, care of the Registrar, School of Medicine, 2109 Adelbert Road, Cleveland 6, Ohio.



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#### Mark ... age 3 days

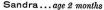
Mark's urea clearance is low—but only normally so, for a newborn. Mark's renal functions will mature in a few days. Meanwhile the Dextri-Maltose® carbohydrate modifier in Mark's Lactum formula protects him against renal osmolar overload.



# 6

#### Dorothy ... age 1 month

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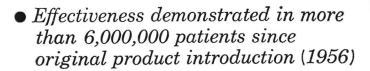


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#### VENEREAL DISEASE CLINIC REPORT FOR 1958

TOTAL NUMBER OF PERSONS SEEN DURING THE YEAR		
Persons not seen previously		457
OF THESE:  Admitted for Syphilis  Admitted for Gonorrhea  Persons not infected and not admitted  Admitted for Chancroid	276 138 2	
SYPHILIS	457	
Number of cases treated this year		80
check-up or treatment		
Admitted this year	41	
Primary and secondary       7         Early latent       8         Late latent       18         Central nervous system       2         Congenital       4         Cardiovascular       1         Prophylatic       1         Number of blood tests taken	80	697
Nonreactive451		
G97   Number of spinal puncture 0   Nonreactive 3		3
NUMBER OF CLINIC VISITS FOR SYPHILIS		620
GONORRHEA  Number of cases treated this year		
Males157 Females119 276		

#### Of the 276 patients:

l was under ll yrs. of age and l was over 60 yrs. of age.

76 were between 11 and 20 yrs. of age or 27%.

161 were between 21 and 30 yrs. of age or 58%.

36 were between 31 and 40 yrs. of age or 13%.

1 between 41 and 50 yrs. of age.

#### Number of cultures taken (on females only, mostly

as α test of cure) \_\_\_\_\_ 68

Positive \_\_\_\_\_\_\_ 7
Negative \_\_\_\_\_\_\_ 61
\_\_\_\_\_ 68

NUMBER OF CLINIC VISITS FOR GONORRHEA \_\_\_\_\_ 749

#### CHANCROID

case finding and delinquency.

Admitted for chancroid \_\_\_\_\_\_ 2
NUMBER OF VISITS FOR CHANCROID \_\_\_\_\_\_ 10

NUMBER OF CLINIC VISITS MADE BY PERSONS

NOT INFECTED AND NOT ADMITTED OR REFERRED

TO OTHER AGENCIES \_\_\_\_\_\_\_ 357

GRAND TOTAL OF CLINIC VISITS \_\_\_\_\_\_\_1726

As in former years, the Visiting Nurses are doing our investigations for

Mrs. Friedl Polk, RN, is attached to the Clinic as special investigator. She does this work in addition to her nursing duties. During 1958 she interviewed 108 Patients during clinic hours. She processed 358 "Epidemiological Forms," 149 of which pertained to clinic patients, 209 to patients of private physicians and 5 to U. S. Separation Centers.

In addition, Mrs. Polk, together with the other Visiting Nurses, made 188 house visits pertaining to venereal work.

These investigations resulted in the discovery of:

84 female suspects for gonorrhea, 54 of whom were infected and treated, 6 not infected and 24 could not be located or moved out of jurisdiction.

54 suspects for syphilis, both male and female, of whom 36 were brought under treatment or observation, 14 not infected and 4 could not be located or moved out of jurisdiction.

2 female suspects for Chancroid, 1 was infected and 1 not located.

Henry Schmid, M.D.

NOTE: The attendance at the clinic this year was 31% larger than in 1957. Syphilis continues to show a downward trend in the number of cases admitted. Admission for gonorrhea, on the other hand, shows an increase of 45% over last year. Much of this increase can be attributed to economic conditions, but the fact remains that gonorrhea is still a major problem and that the diagnosis and treatment of gonorrhea in the female is far from satisfactory.

#### THE DOCK BALLISTOCARDIOGRAPH

The ballistocardiograph is a graphic representation, with respect to time, of the motions which are imparted to the body with response to the heart beat. The fact that the body moves with each heart beat is familiar to every person who has ever stepped on a bathroom scale. The recording of this movement is a useful adjunct to the study of the heart. It gives a type of quantitative measure of the cardiac force delivered within the body. It affords a direct, simple, yet safe indication of the myocardial strength of the ordinary patient seen in clinical practice. This information differs from the electrocardiogram. It is a record of force while the electrocardiogram measures the electrical potential. Using the analogy of a motor, we can compare these to methods of recording as follows: a faulty spark plug will affect the performance of a motor, while such factors as poor gasoline and oil will affect the power, although the spark plug is altogether normal. Therefore, we may have electrical changes without changes in cardiac force and we may have changes in cardiac force without change noted on the electrocardiogram. The St. Elizabeth Heart Station is now prepared to record ballistic records on clinical patients with the 'Dock' apparatus. The method of recording is simple and without any more discomfort to the patient than the recording of an electrocardiogram. There has been considerable controversy about this method of study. However, it now appears that this procedure can be of considerable help to the practicing physicians. According to Dr. Isaac Staar, the ballistocardiogram can disclose an aspect of the heart activity every bit as important as the blood pressure and when doctors are alert to its possibilities and learn to use it, that it will be just as valuable to them as the knowledge of blood pressure recordings. Its apparent chief value is in measurement of cardiac force and secondarily, in certain difficult types of cardiac disease, where diagnosis may be in doubt. The following table demonstrates information that can be secured by the ballistocardiogram:

- 1. Detection of cardiac weakness.
- Detection of cardiac incoordination.
- Demonstration of normality or abnormality of the heart to exercise, anoxia, nicotine, nitroglycerine, and medication.

The following illustrate the utility of the ballistocardiogram:

- The ballistocardiogram can demonstrate the extent of heart damage or recovery in aging persons, in myocardial infarction, in angina pectoris, and other cardiac abnormalities.
- 2. It can demonstrate how well medication is improving heart function. For example: it can determine whether the heart function is improving after digitalis, nitroglycerine, or other drugs, as well as after certain operative procedures, as sympathectomy and cardiac operations.
- 3. It is an aid in helping to make certain important distinctions in heart failure. A small ballistocardiogram indicates that the heart failure is of the usual type. A large ballistocardiogram indicates that the heart failure is of the high output type, and makes one look for the existence of aortic regurgitation, hyperthyroidism, arteriovenous fistula, etc.
- 4. The ballistocardiogram can be of help in detecting abnormalities of circulation, not primarily of cardiac origin.
- 5. The ballistocardiogram may detect certain unusual types of anatomical lesions such as coarctation of the aorta, aortic regurgitation, etc.

In summary then, we now have a useful tool for the measurement of cardiac force. This tool is available in our area and will be of no greater inconvenience than an electrocardiogram. It appears that its primary help

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will be in ascertaining the extent of myocardial weakness and improvement with therapy as well as a means of measuring the effect of certain medications on myocardial function. Lastly, it may assist in difficult cases, in differential diagnosis. It is most important that all the details of the patients' clinical status be forwarded to the interpreting physician.

L. P. Caccamo, M.D.

#### PROCEEDINGS OF COUNCIL January 12, 1959

The regular monthly meeting of the Council of the Mahoning County Medical Society was held on Monday, Jan. 12, 1959, at the office of Dr. M. W. Neidus, 318 Fifth Ave., Youngstown, Ohio.

The following physicians were present: M. W. Neidus, President, presiding, H. P. McGregor, P. J. Mahar, S. W. Ondash, H. J. Reese, L. O. Gregg, M. S. Rosenblum, F. G. Schlecht, C. W. Stertzbach, Asher Randell, C. E. Pichette, F. A. Resch, A. K. Phillips, A. A. Detesco, G. E. DeCicco, R. R. Fisher, comprising council, also S. F. Gaylord, A. W. Geordan, S. L. Davidow, and C. K. Walter.

Meeting was called to order at 9:15 p.m. Minutes of the previous meeting were read and approved.

Dr Geordan, Chairman, presented a report of the Home Care Committee indicating that all members of the committee approved of the home care program, that members of the committee were studying plans in other cities, and that the committee was checking the matter of finances for the plan.

Dr. Reese, Home Care Committee Chairman for St. Elizabeth Hospital, reported that the staffs of both St. Elizabeth Hospital and Youngstown Hospital studied the problem and came up with similar proposals, but that both staffs voted to do nothing until the Medical Society approved a plan.

Discussion ensued in which attention was brought to the fact that a Home Care motion had been made at the June meeting at Tippecanoe. The Executive Secretary was directed to check the records to find a motion to that effect. Dr. Neidus asked the Home Care Committee to have a motion ready at the next council meeting, in the event that the June motion could not be found.

Dr. Davidow submitted the following report of the Pre-School Health Committee:

The Pre-School Health Committee moves the adoption of the following resolution. Be it resolved that the Mahoning County Medical Society recommend to all school boards of education of Mahoning County:

- That all children should receive the following inoculations at the appropriate age.
  - 3 months—Diphtheria, Pertussis, Tetanus, and Poliomyelitis Vaccination.
  - 4 months—Diphtheria, Pertussis, Tetanus, and Poliomyelitis Vaccination.
  - 5 months-Diphtheria, Pertussis, Tetanus.
  - 6 months-Small Pox Vaccination.
  - 12 months-Poliomyelitis.
  - 18 months—Diptheria, Pertussis, Tetanus Booster.
    - 3 years—Diphtheria, Pertussis, Tetanus Booster.
    - 5 years—Diphtheria, Tetanus Booster and Small Pox Vaccination.

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 In the interest of Public Health, inoculations for the prevention of Diphtheria, Tetanus, Poliomyelitis be mandatory prior to admission to any school.

3. These children previously inoculated for Diphtheria and Tetanus, who have had no subsequent booster inoculations within (3) years, prior to admission to school shall be required to have such booster inoculation prior to, or within the first week of, the school year.

4. That inoculation requirements be completed by private physician or free facilities where indigence is established.

5. Where infractions occur, the local health commission shall be notified for appropriate action.

6. This committee further moves that the Mahoning County Medical Society recommend the adoption of this resolution by the Ohio State Medical Association and the steps be taken to initiate such legislation in the Ohio State Assembly.

The motion was made, seconded, and duly passed that council adopt the foregoing resolution. The Executive Secretary was instructed to send the resolution to all city and local school district boards of education in Mahoning County, and to the Mahoning County Board of Education.

Dr. Walter read an extensive report on inquiries that he has made in regard to acquiring Blue Cross coverage for mental ills and nervous disorders. He called on the Mahoning County Medical Society to be the leader in getting insurance coverage for mental ills in this area. Following discussion, the motion was made, seconded, and duly passed, that council go on record as favoring full Blue Cross coverage, including coverage for mental ills and nervous disorders, for all Blue Cross subscribers.

The Executive Secretary was instructed to write a letter to Mr. John Morgan, Executive Secretary of the Associated Hospital Service, informing him of the above resolution.

Dr. Reese introduced discussion concerning a state-wide post-card vote on the subject of the physician and social security. He pointed out that the results of the vote, as published in an OSMAgram, were misleading. The published figures showed a lack of majority of approval of social security. He stated that he had written a letter to Mr. Nelson, Executive Secretary of the Ohio State Medical Association, calling his attention to the correct figures, which would indicate a majority approval of social security.

Dr. Reese read a letter from Mr. Nelson, saying that the figures supplied by Dr. Reese would be published. In the discussion following, council members agreed with Dr. Reese's figures.

A motion was made, seconded, and duly passed that a delegate from the Mahoning County Medical Society bring the correct figures of the vote to the attention of the house of delegates of the Ohio State Medical Association.

Dr. Neidus introduced discussion concerning poisons and poison centers. Dr. Detesco reported that a 1958 committee, headed by Dr. R. L. Jenkins, had been doing research on poison centers. Following discussion, a motion was made, seconded, and duly passed that the same committee further explore the situation, and either work toward establishing a local poison center, or promote liaison with the Akron and Cleveland centers in this area.

Dr. Neidus introduced discussion concerning plans for the Executive Secretary to visit the AMA offices in Chicago. The motion was made, sec-

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onded, and duly passed that the Executive Secretary be sent to Chicago for several days indoctrination at the American Medical Association.

Dr. Neidus requested approval of prospective dates of the Medical-Legal Banquet. Following discussion, March 19 was selected as the preferred date.

Dr. Stertzbach brought up the question of incorporation. Dr. Detesco reported that a 1958 committee had been working on this question, also. The Executive Secretary was requested to contact both Dr. Coombs, Chairman of the committee, and Mr. Powers, legal counsel, concerning current opinion of incorporation of the Mahoning County Medical Society.

Bills were read. A motion was made, seconded and duly passed, to pay

each one. A list of bills is attached to the minutes.

#### INTERN MEMBERSHIP

Richard J. Jarvis, North Side Hospital, Youngstown, Ohio. Unless objection is filed in writing with the Secretary within fifteen days, the above applicant will become a member of the Society.

> A. K. Phillips Secretary

#### HAPPY BIRTHDAY!!!

February 16
R. W. Rummell
February 17
J. A. Altdoerffer
O. A. Turner
February 25
P. J. Fuzy
February 26
J. R. Sofranec
E. M. Thomas

February 28
J. S. Goldcamp
March 2
R. R. Goldcamp
March 5
F. J. Gambrel
March 6
L. H. Getty
J. P. Harvey

March 7
M. D. Evans
March 10
R. A. Brown
M. Szauter
March 12
S. F. Petraglia
March 13
H. W. Haverland

March 15 B. J. Dreiling

#### SOCIAL NEWS Youngstown Hospital

Winter marches on, and a perfect winter for those who like the outdoor sports. Dr. George Cook and his skiing group are reported to have rented a house at Ligonier for the season, and have been keeping it as busy as the work-load will permit. Dr. Ben Brown braved the January 16 snowstorm to attend the annual boat show in New York. I guess he made it.

Some of us prefer our weather warmer. Dr. Robert Heaver and Dr. Harold Chevlin took their families and headed for sunny Florida. They report the weather was beautiful.

The latest craze in indoor sport seems to be dancing lessons. Everybody wants to do the Cha-cha. The graduates of Woods and Bray held a dance on Jan. 17th to demonstrate the results of their education. Those present from our group were the Bob Browns, the Detescos, the Stillsons, and the Shortens. The Browns won the door prize. An interesting innovation at this dance was the use of sign-cards to tell you when to mambo, or cha-cha, etc. (Maybe it would be well if this idea caught on.)

But the disease seems to be contagious. At the last counting, those taking lessons were the Gujus, the Friedrichs, the Campolitos, the Geordans, the Gelbmans, and the R. R. Fishers. Cha-Cha, anyone?

R. R. Fisher, M.D.



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#### MEDICAL GLEANINGS

## THE INCIDENCE OF THE L. E. CELL PHENOMENON IN PATIENTS WITH RHEUMATOID ARTHRITIS

John W. Sigler, M.D., Raymond W. Monto, M.D., Dwight C. Ensigh, M.D., George M. Wilson, Jr., M.D., John W. Rebuck, M.D., and John D. Lovett, M.D. (Henry Ford Hospital, Detroit)

Arthritis and Rheumatism 1:115-121, 1958

The test for L. E. cells should be included in the intial study and in subsequent examinations of patients with rheumatoid arthritis. The L. E. factor is probably most likely to appear if the patient has a typical manifestation of the joint disease, if more than one system is affected, or if comprehensive therapy is ineffective.

Of 45 patients with rheumatoid arthirits, 6 demonstrated L. E. cells at the time of the initial survey. The phenomena appeared in 5 additional patients during the ensuing two-year period of study. In 2 of the 11 subjects, symptoms and signs compatible with a diagnosis of lupus erythematosus developed. The L. E. cells appeared in persons who had had arthritis for one to thirty-five years and in all stages of arthritis.

#### MANIFESTATIONS OF HISTOPLASMOSIS

Francis J. Curry, M.D., and James A. Wier, M.D. Fitzsimons Army Hospital, Denver \*Histoplasmosis. Am. Rev. Tuberc. 77:749-763, 1958

In a review of 100 patients with histoplasmosis referred to an army hospital, all had roentgenographic changes, 54 had symptoms, and 12 showed physical signs of pulmonary disease. Pulmonary tuberculosis had been diagnosed for most of the patients, and histoplasmosis was suspected in only 1 instance. Skin tests were done for 99 patients; 96 subjects reacted positively to histoplasmin and 40 had positive tuberculin reactions. Serologic reactions were positive for 34 of 50 patients tested.

Sputum, gastric, and bronchial washings for all the patients were examined, but the fungus was isolated by culture from specimens of only 1 patient. Operations were performed for 66 patients, and H. capsulatum was readily identified by tissue staining technics in all surgical speciments. However, the organism was recovered by culture from only 3 of the resected specimens. Tubercle bacilli were not seen or cultured in any of the washings or surgical specimens.

#### BREAST CANCER IN YOUNG WOMEN

Norman Treves, M.D., and Arthur I. Holleb, M.D. (Memorial Center for Cancer and Allied Diseases, New York City) A report of 549 cases of breast cancer in women 35 years of age or younger Surg., Gynec. & Obst. 107:271-283, 1958

An analysis of 549 females, all 35 years of age or younger, with breast cancer suggests that when axillary nodes are not affected, prognosis is the same as in older women.

Three-fourths of the patients reported no cancer in the family; 35% of familial cancers were of the breast, and one-half were in the mother. Two-thirds of the 549 patients had been pregnant at least once. Over 90% of masses were discovered by the patient herself. Infiltrating duct carcinoma was by far the most frequent tumor (86.6%).

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The over-all five-year cure rate was 30.7%; for operable patients, 37.7%. Several factors were immportant.

When lymph nodes were unaffected, five-year clinical cures were obtained in 61.7% of patients, in only 23.7% of those with nodal spread. The higher the level of axillary node involvement, the poorer the prognosis.

Outlook was better for patients with less common types of carcinoma than with infiltrating duct lesions.

Pregnancy had a deleterious effect on breast cancer, though not after surgical treatment.

Time of diagnosis was important. In patients treated less than six months after onset, cure rate was 42% and axillary nodes were affected in 58.3%; in patients treated after six months after onset, cure rate was 33.8% and 64.4%.

Tumor size was related to prognosis. Incidence of axillary nodes were increased with the size of the tumor, and the five-year cure rate decreased.

Cure was not significantly related to location of the tumor nor increased by postoperative radiation. When nodes were not affected, prophylatic castration did not improve prognosis, but, with nodal spread, the procedure increased cures by 8.3%.

R. L. Jenkins, Jr., M.D.

#### MEET THE NEW INTERNES

#### DR. FRANK TIBERIO

Dr. Frank Tiberio lives at 377 Lexington Ave., Youngstown, Ohio. His parents are Mr. and Mrs. Michael Tiberio, 767 Crandall Ave., Youngstown, Ohio.

He attended Tod Elementary School, Youngstown, Ohio and graduated from Rayen High School, Youngstown, Ohio in 1944. He was in the Army with the 12th Armored Division for two years and was a prisoner of war in Germany in 1945.

He received his pre-med—B.S. Degree, at Westminster College, New Wilmington, Pa. and is a member of Sigma Nu Social Fraternity, Delta Phi Alpha Honorary German Fraternity. He entered and graduated from Western Reserve Medical School (1954-1958) and passed National Board Medical Exams. He attended Western Reserve Graduate School for one year's work in advanced chemistry and worked for 2 years as research assistant in Bio-

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chemistry Department at Western Reserve University in Cleveland, Ohio.

He is married to the former Norma June Hall of Roaring Spring, Pa., who holds a B.A. and M.S. Degree from Westminster College and is now teaching in the Youngstown schools.

#### DR. DANTE VILLAREAL

Dr. Dante Villareal was born in the town of Mambusao, Province of Capiq, Republic of Philippines on December 27, 1931. His parents were Dominica Villareal and Bienvenido Villareal. His mother is a high school graduate and his father was a 4th year Medical student when he died from pulmonary tuberculosis. After his father's death, they moved to the District of Jaro in Iloilo City, Province of Iloilo where he lived for four years.

He began his schooling in his hometown and later transferred to Iloilo Normal School, Training Department in LaPaz, Iloilo City. During World War II, his schooling was stopped for four years. After the war it was resumed at the age of 14 in Iloilo Normal School where he finished his elementary grades and graduated in March 1947. He attended high school

at Mambusao and LePaz Iloilo City.

He took his first year Preparatory Medicine in the University of St. Augustine, Iloilo City and the next year transferred to the University of St. Thomas in Manila where he obtained his degree of Doctor of Medicine in March 1957. He took the Board Examination in August 1957 and passed in February 1958. During this time, he was engaged in General Practice and practiced in the Maternity and Children's Hospital, Department of Obstetrics, a government hospital.

His hobbies include swimming, boating, basketball, chess, reading and

dancing.

#### DR. VIRGILIO LOPEZ

Dr. Virgilio Lopez was born December 14, 1932 in Marikina, Rizal, Philippine Islands. He is the fourth in a family of eight, three boys and 5 girls.

His father is a practicing physician.

He started his schooling in his hometown in 1939 and continued his studies during the Japanese occupation of the Islands, but only interruptedly. He began high school during the American liberation and graduated with honors. He enrolled in the University of Santo Tomas, Manila, Philippines taking Liberal Arts as a preparatory course and Medicine in the same University in 1951, graduating in March 1956. He took the Philippine Medical Board Examination in August of the same year and passed. At this time, he served as an intern in Bukidnon General Hospital, Malaybalay, Bukidnon, Philippines for three months. He interned in St. Luke's Hospital, Manila and after passing the Medical Board Examination continued to serve as an intern and at the same time practiced in his hometown.

After coming to the United States, he spent one year of rotating internship at the Iowa Methodist Hospital in Des Moines, Iowa. At present he is taking his second year of internship at St. Elizabeth Hospital, Youngstown,

Ohio.

He is married and the father of a five month old daughter, Leah Vernita.

L. P. Caccamo, M.D.

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#### CLINICAL ELECTROCARDIOGRAPHIC INTERPRETATION

The Heart Station of St. Elizabeth Hospital announces the continuation of its course in Clinical Electrocardiographic Interpretation, which is given every Saturday morning 8 a.m. to 9 a.m. in Conference Room I, St. Elizabeth Hospital, from September 1, 1958 through June 30, 1959. The basic elements of electrocardiographic interpretation together with the newer concepts of vector interpretation are well illustrated with the use of slides and with clinical examples. Recently, the course was awarded thirty-five credit hours of Category I, credit by the American Academy of General Practice. Individuals wishing to register for this course may do so by applying to Dr. Leonard P. Caccamo, Director, Heart Station, or to Dr. David Ginder, Director of Medical Education, at St. Elizabeth Hospital. There is no charge for attendance which is entirely voluntary since the course has as its main objective the orientation of the residents in Internal Medicine at the Hospital.

#### OHIO SOCIETY OF INTERNAL MEDICINE

The Ohio Society of Internal Medicine held its annual meeting in Cincinnati, Ohio, January 21, 1959 at the Netherland-Hilton Hotel and the United States Veterans I Administration Hospital, Cincinnati, Ohio. The Ohio Society of Internal Medicine represents 261 qualified Internists of the State of Ohio and holds its meetings annually in conjunction with the Regional Meeting of the American College of Physicians. The organization presented as a concluding part of the regional meeting of the American College of Physicians, a panel discussion on the "status of the Internist in Medical Care Plans." This part of the program was presented by the Ohio Society of Internal Medicine upon the invitation of Dr. A. Carlton Ernstene, Governor of the American College of Physicians for Ohio. The following officers at present, are serving on the Board of Trustees: Arnoldus Goudsmit, M.D., President, Youngstown, Ohio; George J. Hamwi, M.D., Vice-president, Columbus; Leonard P. Caccamo, M.D., Youngstown, Secretary-Treasurer; O. W. Clarke, M.D., Gallipolis; R. Franklin Jukes, M.D., Akron; J. Harold Kottee, M.D., Cincinnati; L. P. Longley, M.D., Cleveland; Maurice A. Schnitker, M.D., Toledo: Joseph M. Wilson, M.D., Dayton. This Society was founded at an organizational meeting at Columbus, May 13, 1957, and was incorporated as a corporation not for profit on May 23, 1958. Its purposes as established in Article III of its by-laws are as follows:

1. To promote continuing improvement in the standards of medical care in making available to the public the benefits of the advances of modern

medical science.

To foster the recognition of the Internist as a trained specialist in the field of diagnosis and the medical management of disease so that his services may be utilized to the fullest, and to the best interests of the patient.

3. To promote research in the field of improved distribution of medical care, and to study private and public (self-sufficient and tax-supported) health services and health insurance plans, so that it may contribute most effectively toward the provision of the best medical service without needless expense and without detriment to the welfare of the patient or of the physician.

4. To maintain and advance high standards of medical education and clinical research in cooperation with the American College of Physicians.

L. P. Caccamo, M.D.



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Also useful in the treatment of rheumatic disorders, symtomatic relief of headache,

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#### FEBRUARY THEATER PARTY

The Woman's Auxiliary extends a cordial invitation to members of the Auxiliary and their husbands for a Theater Party, Thursday, February 19th at 8:00 at the new, beautiful Youngstown Playhouse.

The production will be "Finian's Rainbow," performed theater-in-the-round. The price is \$5.00 per couple, which includes a late buffet.

There are only 200 seats available, so hurry to make your reservations. For reservations, call Mrs. D. R. Brody, RIverside 7-9992.

#### A.A.G.P. POSTGRADUATE COURSE

The Mahoning Chapter of the American Academy of General Practice is sponsoring the following graduate course on the subject of Pediatrics at South Side Auditorium:

March 10, 8:00-10:00 p.m.

Nutritional Anemias, Fluid Balance, Maintenance Requirements of Infants and Children.

Dr. Wayne Borges, Assoc. Prof. of Pediatrics

Dr. Malcolm Holliday, Asst. Prof. of Pediatrics

April 14, 8:00-10:00 p.m.

Behavior Problems—Potentiality and Limitations of X-ray Diagnosis of Children.

Dr. John Rinehart, Asst. Prof. of Pediatrics

Dr. Bertram R. Girdany, Assoc. Prof. of Pediatrics

May 12, 8:00-10:00 p.m.

Inborn Errors of Physiology in Relation to Growth and Development and Adult Diseases.

Dr. Robert Klein, Assoc. Prof. of Pediatrics

Dr. Thomas Egan, Instructor in Pediatrics

P. Krupko, M.D.

#### NATIONAL GUARD NEEDS M.D. MEDICAL OFFICER

The local national guard battalion is still looking for a medical officer. Charles A. Vimmerstedt, Battalion Staff Radar Officer and Public Information Officer, offers the following information about the local unit:

The Medical Section that the doctor would command consists of ten enlisted aidmen who would handle all the exams, paper work and other details. Equipment includes a Field Ambulance, supplies and medicines.

The table of organization calls for a Captain, and this would mean rapid promotion for anyone holding a 1st or 2nd Lieutenant reserve commission. Furthermore, anyone in the Army, Naval, or Marine Reserve can transfer into the National Guard.

There are four drills a month, with a full day's active duty pay in grade for each drill. Drills are on Thursday evenings, and Sunday.

Required would be attendance at Summer Field Training, from June 28 to July 12, 1959, with active duty pay.

The battalion consists of four firing batteries and a headquarters battery, 450 men at full strength. This is the 177 Anti-aircraft Artillery 90MM Gun Battalion, with headquarters at the Ohio National Guard Armory, 325 West Rayen Ave.

For further information, call the Medical Society office, RIverside 6-8431.



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reduces—erythema, excoriation and extent of lesions.<sup>1-4</sup>

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References: 1. Feinberg, A. R., et al.: J. Allergy 29:358 (July) 1958. 2. Eisenberg, B. C.: Clinical Medicine 5:897-904 (July) 1958. 3. Robinson, H. M., et al.: J.A.M.A. 161:604-606 (June 16) 1958. 4. Robinson, H. M., et al.: So. Med. J. 50:1282 (Oct.) 1957.

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