



There's no contending against
facts. —*Sir Isaac Newton*

BULLETIN

of the
MAHONING
COUNTY
MEDICAL
SOCIETY

August • 1952
Vol. XXII • No. 8
Youngstown • Ohio

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plus other factors of the B-Complex present in Whole Liver.

BASE: Liver and Yeast.

SUPPLIED: in 50's and 1000's.

1. Jolliffe, N., Special Article, Council on Foods and Nutrition: The Preventive and Therapeutic Use of Vitamins, J.A.M.A., 129:618, Oct. 27, 1945.
2. Lewey and Shay, Dietotherapy, Philadelphia, W. B. Saunders Co., 1945, p. 850.

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Our President Speaks

The improvement in living conditions that has resulted from giving freely to the public, information on all matters pertaining to health is a major accomplishment to which our profession has been the principal contributor. It has become one of our established and important duties.

However, this enlightenment will not remove the credulity of those who are readily satisfied with half-truths, nor will it prevent them from expecting the impossible. The responsibility of the physician is increased, in that it is a part of his duty to protect these people from exploitation. There can be neither permanent good or satisfaction if these be based on ignorance.

The hope that arises from our assertions and reassurances is of value only in so far as these approximate the truth. Temporary or pecuniary advantages undermine the confidence that is necessary for leadership. We should not be the willing source of premature announcements and exaggerated statements concerning treatments and results. The reaction is as detrimental to us as to those who have been misinformed.

We are to keep in mind that our purpose continues to be the prevention and relief, hence the early recognition, of disease. The means by which this may be accomplished is not through raising the quality of judgment of the mass of non-medical people, but rather by helping them to recognize symptoms which they are in a position to detect. The significance of these is the physician's special problem. Bridge-table discussions do not make the solution easier for him.

The attainment of wisdom is purely an individual factor in public welfare. It is an achievement of the few, and these adopt and adapt the measures that maintain public health. To them, discoveries are educational, to others they may not rise above the level of propaganda. Our aim is to keep minds alert to conditions, and not to encourage opinions that are not well-founded.

C. A. Gustafson, M.D.

BULLETIN of the Mahoning County Medical Society

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Annual Subscription, \$2.00

**VOLUME 22****AUGUST, 1952****NUMBER 8**

Published Monthly at Youngstown, Ohio

Annual Subscription, \$2.00

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

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3718 Market Street**ASSOCIATE EDITORS**H. N. Bennett
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S. W. OndashH. J. Reese
F. G. Schlect
C. W. Stertzbach
W. J. Tims**CANCER SYMPOSIUM**Sponsored by the
Mahoning County Medical Society
and**American Cancer Society, Mahoning County**
September 18, 1952

- 8:30 - Register at Stambaugh Auditorium, 1000 Fifth Ave.
9:15 - 10:00 Cancer in Children
—Dr. Harold Dargeon
- 10:10 - 10:55 Treatment of Cancer of the Distal Large Bowel
—Dr. Michael Dettich
- 11:00 - 11:45 The Management of Cancer of Breast
—Dr. Frank Adair
- 11:45 - 12:00 Question Period
- 12:00 - 1:30 Lunch
- 1:30 - 2:10 Recent Advances in the Treatment of Lymphomas,
Leukemias and Allied Diseases
—Dr. Henry Diamond
- 2:15 - 3:00 The Diagnostic Significance of a "Lump in the Neck"
—Dr. Hayes Martin
- 3:00 - 3:15 Question Period
- 3:15 - 3:55 Rationale for Radical Approach to Gastric Cancer
—Dr. Gordon McNeer
- 4:00 - 4:45 Present Day Concepts of Management of Carcinoma of
the Uterus
—Dr. Michael Jordan
- 4:45 - 5:00 Question Period
- 7:30 Dinner — Pick-Ohio Hotel
Radical Neck Dissection
—Dr. Hayes Martin

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1. Perloff, W. M.: *Am. J. Obst. & Gynec.* 58:684, 1949.

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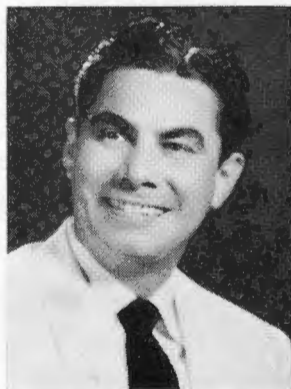
ESTINYL



AMBASSADOR OF GOOD WILL FOR POST-GRADUATE DAY

Tennyson Guyer, known as Ohio's ambassador of good will, is appearing as guest speaker at the dinner following the clinical program on post-graduate day, October 29, 1952. He has made 6,200 audience appearances and is a specialist in fun, faith, and philosophy. Inimitable humor is the nail on which he hangs the code of his message. He has had many rave notices following his interesting talks including that of the Columbus (Ohio) Star, the Chicago Tribune, J. Edgar Hoover, and Major General Lewis Hershey.

Following is a portraiture by one who knows him best, his wife, Mae Guyer. Mrs. Guyer begins by saying, "You think I intend to praise this fellow—but I am not! Boy, he has lots of faults (just like you and I). However, I'll be happy to tell you candidly what I know about him, and in my case the motive isn't to secure bookings, because actually he receives a dozen invitations for every one he can accept. But people keep insisting to know more about this millstream orator so here it is."



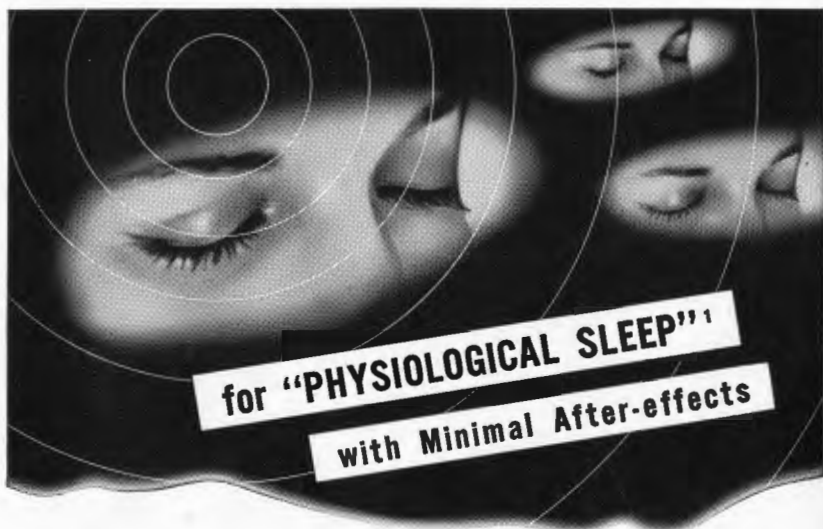
DR. TENNYSON GUYER

Mrs. Guyer continues, "Before we were married, he was a youth supervisor, bell hop, caddie, circus performer, school teacher, city mayor, church administrator—since we've been married, he's been a husband, home builder (with the bank's help), father of two little girls and dog owner (St. Bernard and toy Fox Terrior). His father was a minister and president of Findlay College and his brother, Jimmy, was minister succeeding his father, college professor and legislator. He is a salesman for the American Way of Life — lives it and loves it, along the way sprinkles laughs, chuckles, inspires, elevates, and throws in a handful of rainbows for good measure. For nearly a year and a half now, he and columnist Peg Dennis have been doing a Saturday noon radio broadcast for the Cooper Tire and Rubber Company here in Findlay. I guess the company enjoyed working with him, for now they have retained him as Executive Assistant and Public Relations Man (there goes more of his time, and right after the doctor told him he couldn't be talking seven times a week).

"Well, there he is! Why, he can't even swim the Ohio River, will never get to the White House, and just think he can't even match his ties and socks. So you see, I know the guy pretty well."

I think that we are very fortunate in being able to obtain such an excellent dinner speaker as Dr. Tennyson Guyer, Ohio's Ambassador of Good Will. Let us all plan to attend not only the clinical program for Post-Graduate Day October 29, 1952, but let us plan to attend dinner and enjoy the excellent humor and philosophy of Dr. Guyer.

ERM



for "PHYSIOLOGICAL SLEEP"¹
with Minimal After-effects

Chloral hydrate, used in medicine since 1869, is, even today, "the standard hypnotic of its class."¹

Goodman and Gilman observe that it "is unfortunately neglected today," and that the present widespread use of the barbiturates has ". . . caused the physician to lose sight of the fact that chloral hydrate is still one of the cheapest and most effective hypnotics."²

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¹N.N.R., 1947, p.398.

²Goodman, L. & Gilman, A., The Pharmacological Basis of Therapeutics. MacMillan, 1944, pp. 177-8.

Available in 8 fluidounce bottles. Adult Dose: As a sedative: $\frac{1}{2}$ to 1 teaspoonful with water, every 3 or 4 hours or as directed. As a hypnotic, 1 to 2 teaspoonfuls or more with water at bedtime, or as directed.

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Formula: Each fluidram (4 cc.) contains, in a palatable aromatic vehicle: Chloral Hydrate, 0.5 Gm. ($7\frac{1}{2}$ gr.); Calcium Bromide, 0.5 Gm. ($7\frac{1}{2}$ gr.); Atropine Sulfate, 0.125 mg. ($1/480$ gr.)

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**OPENING SESSION OF THE 101st HOUSE OF DELEGATES
TO THE A.M.A.
(Continued)**

W. M. Skipp, M.D.

House called to order by the Speaker: Frank F. Borzell, June 9, 1952, 10:15 A. M.

The House was notified of the illness of Vice-Speaker James R. Reuling.

The Chair entertained a motion for the nomination and election of a Vice-Speaker pro tem to which position Dr. E. Vincent Askey was elected.

The Board of Trustees nominated three men for the distinguished service award:

1. Donald E. Belfour	Votes as follows	68 — 79
2. Paul D. White		64 — 96
3. Shields Warren		37

As there was not a majority vote on first ballot, highest two re-voted, Paul D. White of Boston receiving highest vote.

Resolution passed by standing vote on illness of Vice-Speaker James R. Reuling of N. Y., who had been operated on a couple days before for acute intestinal obstruction.

Report of Speaker F. F. Borzell, Philadelphia, Penna.

"There is a serious lack of information of what is the A.M.A. Membership should acquaint self "What is your A.M.A.". The membership as a whole is not aware of the prestige of their national organization, such prestige being used for improvement of better health for American people. President Truman has accused the A.M.A. of underhanded methods in stopping passage of recent bill on social security, but it being the underhanded method of the administration trying to slip through the back door a step toward federalization of medicine. A.M.A. is not opposed to increase of monthly amounts of old age pensions but is opposed to the section dealing with medical examinations and power given Oscar Ewing on this medical problem.

We should, as citizens, have more to say about county, state and national politics, it being our duty to inform those we contact of the advances of socialism in all forms.

The House has been accused of being dominated by old men. There are 188 delegates of states, territories and sections; the average age is 59 years. Average length of service is 5 years, 6 months. There are 14 new members, the delegates service from all types of practice from large and small cities and urban areas.

The A.M.A.'s high ideals will stop state medicine."

President Cline's address.

"The President of the association is the spearhead of our policies which are set up by this House. (Note: Air lines in San Francisco reported we have more time reserved for air travel than anyone else in U. S. A.) Scientific medicine has been further advanced and coordinated better. There have been better post graduate courses, which have been carried to the home counties of the physician. In this way we improve the care of all. Also there has been a better distribution of physicians over the country because of effort to give better facilities to physicians in smaller communities.

The Chairman of President Truman's Health Commission has made repeated attacks on the officers and A.M.A. as a whole. The time has come when we cannot ignore the facts as we see them and we must present them to the people."

Read this entire address in the A.M.A. Journal as it is very worthwhile.

Dr. Ernest F. Irons, Chicago, introduced representatives of dentistry, nursing, national medical associations, American Legion, American Hospital Association, and others.

Afternoon Session, June 9, 1952, 2:00 P. M.

The resolution on Truman's Health Commission: The House resolved itself into a committee of the whole, then into executive session, after one hour discussion pro and con, left executive session to regular House with explanation of what had been done. The resolution which had been referred to the Reference Committee on Legislation and Public Relations which committee held public hearings and reported to the House approval of the resolution with some changes, which were in explanation that we were opposed to back door entrance of state medicine and power being given Federal Administration of Social Security. There were changes made after it was reported out by the committee.

Russel V. Lee, Delegate Section Military Medicine, made an earnest plea opposing resolution stating the Health Commission was doing a good job and that Dr. Magnuson, its chairman, was opposed to socialized medicine. He did not think there was politics in the Commission. (Note: Many of its members are for this type of government control, also its chairman has made some very bitter attacks on officers and A.M.A.). Magnuson told the Reference Committee there would be no report of its findings before the November election.

..... Resolutions on death of Vice President Hunter and Past President Kretesmer passed at once by House.

Dr. Dwight H. Murray reported for the Board of Trustees. The report included time spent by the Board on various meetings, with one extra. The meetings are held quarterly, with the Executive Committee meeting monthly.

The Board has set up coordination with Civilian Defense, Armed Forces, National Medical Emergency.

The Board recommended, in addition to travel expenses, a \$50.00 per day honorarium while on official business of the Association. This was set up for the President and President-elect and approved.

The Board has set up a national advisory committee to the Board, comprised of all types of laymen for the purpose of aid in better public relations and in matters relating to medicine, business, farming, industry, etc. The names of committee men are not published.

The House in L. A. recommended purchase of property in Washington for the use of that office. Board reported being unable to locate property suitable for needs of the office.

The 1953 dues be assessed by the House as \$25.00 which includes same publications of the A.M.A.

The 1955 Clinical Session shall be held in Boston.

As there is a great variation of memberships in the various state associations the Board asked that there be a committee to study this problem if agreeable to the House after study. Notify each State Association.

The Board, on the suggestion of the Edison Electric Company, asked that a committee made up of various industries be set up in conjunction with the A.M.A. to study ways of rehabilitation in the home of such person disabled with TBC, heart disease, injuries, etc. This committee to be known as Health Home Council.

The Council on Federal Civil Defense to aid in program where local government has been knocked out by disaster.

Stockpiling medical supplies is under direction of a new department,

Federal Medical Supply Department. The A.M.A. is cooperating and asks that it be continued with protection of all critical supplies.

The General Practitioners Award should be changed so that a committee of three are selected and all names presented this unknown committee would select names and present these for election by the House.

The various reports were referred to proper reference committees for consideration. The Board was commended for its work and reports accepted.

Board of Trustees reported on the action of the National Doctors' Committee for improved medical services. Has communicated with a number of physicians asking the adoption by state medical societies to present resolutions to the A.M.A. to formulate amendments to S1140, 82nd Congress, that would be acceptable. Much of what this committee proposes cannot be accepted by A.M.A. but do accept the Hoover Report to combine medical services, excepting Armed Forces and Veterans Administration. Report of Board was approved by Reference Committee.

Several resolutions were presented from all parts of the country in regard to having the incorporation of a specialty board under the A.M.A. direction to give non-medical men board approval, but the boards are set up to approve none but graduate doctors of medicine, this board to be known as the American Board of Microbiology.

These resolutions being reported to the Reference Committee, reported disapproval.

..... Board reported on disposition of HR7800. This is the bill that would increase old age pensions by \$5 per month, also a clause taking care of permanent disability. The unprincipled way of presenting the bill is part of A.M.A. opposition.

Bill introduced May 12. No copies of bill available for study. May 16 committee action behind closed doors. May 19, sent to House for passage with suspension of rules recommended and 40 minutes debate permitted, 20 minutes each side; under this procedure there were only three methods of handling this measure, no amendments permitted.

1. Approve. 2. Reject. 3. Refer back to Committee.

There are 8 sections of the bill A.M.A. does not oppose, one section on medicine which gives Mr. Ewing power of saying where, how, by whom, and what pay for examination to determine if applicant has a permanent disability. The action of the Board and Legislative Committee approved by House.

..... Dr. Louis H. Bauer, President-elect, report on action of International Labor Organization. Read A.M.A. Journal, May 31, 1952. This organization was and is setting up standards for minimum standards for social security which includes socialized medicine in the world as we have representatives meeting in Geneva they will pass as all are socialistic minded and are there instructed to have these standards passed by our Congress. The only information distributed was for these proposals. Would not permit the opposition's side to be presented.

This fight is being carried on and waged by the World Medical Association for the Freedom of Medicine.

The World Health Organization is an organization that is promoting all types of socialized medicine. It is the organization's recommendation that the I.L.O. is following.

This report was approved by the House.

..... Resolution of North Carolina to have negro physicians of that State under the Old North State Medical Society be taken into the A.M.A. This

resolution was not approved because society is not entirely made up of physicians.

..... Resolution from Idaho that the Trustees give consideration to furnishing badges for alternate delegates to sessions approved by Committee and House.

..... Resolution New York that the I.L.O. be labelled as it is known and that it is its purpose to socialize medicine through our Congress, approved by Committee and House.

..... Resolution New York that all members of the medical profession shall have membership in A.M.A. regardless of color, creed or religion. Committee reports this is a matter of local county society and cannot be directed by this House of Delegates.

..... Resolution Arizona that medical care for dependents of members of Armed Forces, if need is shown, should be carried with Blue Shield or Blue Cross. Further study by Council on Medical Service.

..... Resolution that hospital benefits for non-service-connected disability be disapproved and that there be a recommendation that government cease collecting fees from commercial carrier for such hospital claims. Approved by House.

..... Resolution D. C. that there be a reduction in the non-service-connected disability in Vet hospitals and that medical and hospital care of dependents be opposed. Approved by House.

..... Resolution that the A.M.A. does not favor anyone candidate of any party for any office but urges the physician to vote for those that will give good government. Approved by House.

..... Resolution, Minn. that when a delegate is elected to represent his state he should serve until term expires regardless of number allotted to that state after his election. Approved by House.

..... Resolution, Miss. that malpractice insurance coverage for hospitals and physicians should not be combined but should be rated separately. Sent to Legal Department for study as each state law may be different.

..... Resolution, Calif. that there should be a re-study of interne and resident positions as there are more positions than physicians to fill them. Referred to Council on Medical Education and Hospital for study.

Morning Session, June 11, 1952, 9:20 A. M.

This session was opened with 98% of delegates in attendance, 100% were registered. Secretary of British Medical Association introduced. Dr. Clockston, who said, "I feel you will not be in the same position as we were because you have a plan and we had none."

..... Resolution on deferment of pre-medical and medical students which is setup and is being taken care of by boards. Approved chiropractic students have not been deferred and are being taken care of properly by selective service. Approved.

..... Dr. Dwight Murray reports on military internship vs. civilian that time spent in Armed Forces hospitals will not give credit for military service. Approved.

..... Resolution Iowa that there be definite cooperation between the medical and dental oral surgeons and that the board confer with American Dental Board of Oral Surgery stating that only qualified physicians are to practice medicine. Approved.

..... Resolution of Sections: as no dues are collected by the sections and expenses are incurred also that delegates of states have expenses paid that the Board of Trustees should pay expenses of these delegates. Approved.

Afternoon Session, 2:15 P. M.

..... Resolution, Texas, that as federal taxes are continuing to go upward, local taxes are cut, soon local will have to depend on federal aid entirely. An amendment should be urged to put ceiling on federal taxes.

Every physician should get into politics and take on active part in the selection and election of all good candidates to office. Approved.

..... Resolution, California, that there be study and consultation in regard to osteopathic medical education referred to board for study with osteopathic board.

Morning Session, June 12, 10:15 A. M.

Committee on Constitution and By-Laws reported 100 or more changes which were approved. This required most of the morning session.

Afternoon Session, 1:20 P. M. 188 in attendance.

Most of this time is spent in receiving reports of reference committees which were marked on the original report.

Roll Call, 178 present.

Election of officers.

Nomination of President-elect:

Dr. Edw. J. McCormick, Toledo 103

Dr. F. F. Borzell, Philadelphia 70

..... At this point much time was spent in listening to report on HR 7800. This is the bill on Social Security. The bill is to be reintroduced which will have Section 3 deleted, but the deletion is not complete. The A.M.A. contends this is breach of faith with those that are receiving this old age and the American people as a whole.

The men that opposed this bill before still want our expression from this House and will follow through to pinpoint Section 3.

We are not opposed to the Bill but are opposed to the rotten way the Administration is putting it through and the tactics used.

Election of Vice President Dr. Leo F. Schiff, N. Y.

Secretary George Lull, Chicago

Treasurer J. J. Moore, Chicago

Speaker James R. Reuling, N. Y.

Vice Speaker Vincent Askey, Calif.

Trustees Dwight Murray, Calif.

James R. McVay, Mo.

..... Resolution commenting on the skill and courage of Dr. Walter H. Roehll of Middleton, Ohio, when he was stranded in snow storm in mountain pass last winter. Approved.

..... The Blood Bank Committee. Dr. Herbert P. Ramsey reported on activity. New survey of nation's blood banks will be made this fall. The non-profit policy of distribution of whole blood will be continued. There is some variation in charges by blood bank which is due to different costs of operation. Blood and blood derivatives are being stored and watched very closely. No program should be set up without medical society approval.

Conclusion.

Are You Registered and Qualified to Vote?

Deadline to qualify for November 4 election is September 24, with a few exceptions . . . See article on registration, voting, etc., in the August issue of The Ohio State Medical Journal which will be out August 1.

CLINICIANS SAY...

*"Best yet for control of
hay-fever symptoms."*

A majority of investigating clinicians preferred 'Co-Pyronil' (Pyrrobutamine Compound, Lilly) to any other antihistaminic. This record was achieved during the 1951 season, when ragweed pollen counts soared to their highest point in the antihistamine era. Four outstanding advantages—quicker onset, better control of symptoms, longer-lasting relief, and fewer side-effects—were repeatedly noted. Also, patients liked the convenience of fewer doses—usually only one or two capsules morning and night.

*Eli Lilly and Company
Indianapolis 6, Indiana, U. S. A.*

*Each pulvule contains:*

'Pyrnil'	15 mg.
(Pyrrobutamine, Lilly)	
'Histadyl'	25 mg.
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'Clopane Hydrochloride'	12.5 mg.
(Cyclopentamine Hydrochloride, Lilly)	

PULVULES

Co-Pyronil

(PYRROBUTAMINE COMPOUND, LILLY)

AUGUST

POLIOMYELITIS

We had the greatest number of cases of Poliomyelitis in the year of 1951. Mild epidemics occurred during the months of August, September, and October. We had one case in July and the heaviest month was September, the month that school opened. To date, July, 1952, we have had no cases of Poliomyelitis.

I know that we are all interested in regards to the new methods of treatment, if any, and especially their interest lies in regards to localization of paralysis following inoculation. From exhaustive studies there seems to be a general agreement and confirmation that definite relationship occurs in extremities following inoculation. We do not have the final quantitative measure. We do know that there is an increased risk of contracting poliomyelitis **by carrying out immunizations when the disease is epidemic.**

It is finally agreed that immunization of infants under 6 months of age should be continued throughout the year, because of the relative infrequency of poliomyelitis in this age group, whereas the danger is great to the infant from whooping cough and other communicable diseases.

Certain types of injections should always be carried on regardless of whether an epidemic exists. Examples are: Tetanus toxoid or Tetanus Antitoxin following injuries; Diphtheria Antitoxin when needed as a prophylactic; Gamma Globulin injections for measles and other diseases; injections for allergy patients; immunization of persons traveling abroad; and the immunization of student nurses in hospitals. Most therapeutic and other injections required in daily practice of medicine should be continued. Certainly injections of antibiotics, insulin, and antitoxin should be continued.

Our views remain the same, that all injections be continued unless a polio epidemic should occur. Locally, our polio cases usually begin the latter part of the summer and early fall, the time the school year begins.

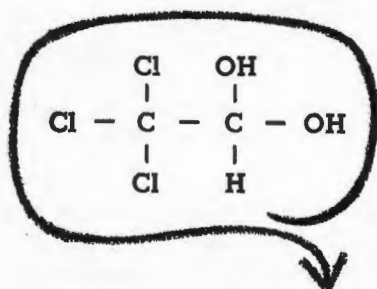
I hope that we will not have a repetition of our polio siege of 1951. Our views as far as injections will prevail until local conditions change. In any case where there is doubt as to whether injections should be given, the family physician should be the one to decide.

The usual precautions for prevention of polio should again be stressed and repeated they are:

1. Avoid mixing with strange crowds.
2. Avoid fatigue or over-work.
3. Avoid shock, especially sudden chills.
4. Avoid over-exposure to direct sun.

The most common symptoms occurring are: Headaches, sore throat, nausea and vomiting or diarrhea, soreness of muscles in back of neck, in back muscles, and muscles of any extremities. These symptoms or any combination of those mentioned may occur, patient should then be placed in bed and observed for 24 hours, if no change takes place be sure and call the family doctor.

Walter J. Tims, M.D.
Health Commissioner



CAPSULES CHLORAL HYDRATE - *Fellows*

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EXCRETION—Rapid and complete, therefore no depressant after-effects.³⁻⁶

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1. Hyman, H. Y.: An Integrated Practice of Medicine (1950).
2. Bahuss, M. R. et al: A Course in Practical Therapeutics (1940).
3. Goodman, L., and Gilman, A.: The Pharmacological Basis of Therapeutics (1941), 22nd printing, 1951.
4. Soltman, T.: A Manual of Pharmacology, 7th ed. (1946) and Useful Drugs, 14th ed. (1947).

All We Can Say is "Thank You"

During the hustle and bustle at the American Medical Association's big convention a few weeks ago, many of the 13,500 registered physicians may have overlooked the excellent editorial, "Fruits of Free Research," which appeared in the Chicago Herald-American. It was one of the finest tributes ever paid to American physicians by any newspaper during an A.M.A. session.

The editorial, which appeared in the Herald-American and in several other Hearst newspapers throughout the country, follows:

"The American Medical Association's annual convention, now in session in Chicago, is a clearing house for progress.

"Healing discoveries developed through the researches of individuals and groups are explained and exchanged and become the common possession of all members of the profession as weapons against disease.

"If left wingers who denounce the American Medical Association as a trust had deliberately set out to dream up the silliest charge imaginable they could not have done better.

"Far from restricting and restraining the use of new medical information, the A.M.A. hastens to distribute it as rapidly as possible for the widest possible use.

"The real reason why the A.M.A. is disliked by Fair Deal Socialists and other enemies of free enterprise is that it opposes socialized medicine.

"The medical progress being spread on the record at the convention this week proves how right the association is in resisting governmental regimentation.

"These new discoveries have been made by medical scientists free to develop their own ideas and to pass the benefits of their knowledge along to their patients.

"The medical profession is entirely right in believing that its own trained and dedicated members are better able than any group of politicians to look after the nation's health.

"They are doing it superbly. Every day they learn some new way to do it better.

"The most effective way to check this progress and reduce all medical practice to static mediocrity would be to submit the medical profession to the deadening control of a political bureaucracy.

"For the nation's sake we must help the A.M.A. fight off power-hungry politicians and keep American medicine free."

—Secretary's Letter No. 223, July, 1952

Physician and Patient

..... "Many sick people are afraid and cling to their physician with the tenacity of a child to its mother. Superior, cold, stiffnecked, unsympathetic attitudes have no place in the sick room. Man's inhumanity to man is a fact. We must give attention to the fact of how little we know, how much there is still to learn, and that often our most valuable single contribution to the sick is kindness."

—D. Levy, M.D.

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MAHONING COUNTY ACADEMY OF GENERAL PRACTICE

The Executive Committee meeting of the Mahoning County Academy of General Practice was held July 15, 1952, at the home of Dr. H. P. McGregor.

The next general meeting will be held Sept. 9, 1952, at the South Side Nurses' Home at 8:30 P. M. Dr. Samuel Schwebel will give a paper on Dermatology in Relation to General Practice.

Plans were made to hold our annual internes' essay contest at our October meeting. Plans were also made for a post-graduate course on Endocrinology to be held the first of next year.

—David H. Levy, M.D.

ST. ELIZABETH HOSPITAL STAFF MEETING

The regular monthly medical staff meeting of St. Elizabeth Hospital was held on July 1, 1952. It was called to order by Dr. W. H. Evans. Case histories of a cervical rib and trichinosis were presented and discussed. A short business meeting followed.

P. B. Cestone, M.D.

Health Department Bulletin

CITY OF YOUNGSTOWN

REPORT FOR JUNE, 1952

	1952	Male	Female	1951	Male	Female
Deaths Recorded	181	101	80	155	88	67
Births Recorded	605	341	264	646	331	315

CONTAGIOUS DISEASES	1952 Cases	Deaths	1951 Cases	Deaths
Chicken Pox	25	0	24	0
Measles	16	0	33	0
Mumps	1	0	3	0
Scarlet Fever	1	0	4	0
Tuberculosis	8	3	1	3
Whooping Cough	5	0	7	0
Gonorrhea	38	0	23	0
Syphilis	23	0	19	0
Meningitis	1	0	0	0
Salmonella	0	0	1	0

VENEREAL DISEASES

New Cases	Male	Female
Syphilis	9	11
Gonorrhea	20	15
Total Patients		55
Total Visits to Clinic (Patients)		426

W. J. TIMS, M.D.

Commissioner of Health



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CALIFORNIA OFFERS FIVE-YEAR RESIDENCY IN PSYCHIATRY

California now offers a five-year psychiatric residency, consisting of three years of training and two years of service as a staff psychiatrist. The program normally will fulfill requirements for the Board certificate. Salary starts at \$436 a month and rises in annual steps to \$530.

The California Department of Mental Hygiene now offers a five-year psychiatric resident program which it believes will prove attractive both in salary and professional development. The program was arrived at after long and careful study and consultations with recognized authorities.

Under the new arrangement, physicians wishing to qualify for the certificate of the American Board of Psychiatry and Neurology enter a five-year tour of duty in California's large, modern mental hospital system.

The first, third and fourth years of this term consist of regular psychiatric residency training. In the second and fifth years, the resident serves as a staff psychiatrist at a California state hospital or clinic.

The complete five-year program, therefore, will normally fulfill the requirements of the American Board of Psychiatry and Neurology for eligibility for the specialty certificate in psychiatry.

An important aspect of this program is the liberal starting salary. The increasing earning capacity of the developing psychiatrist is averaged out over the five-year period, and the resulting figure is paid immediately on appointment. Technically the physician enters a state civil service class designated as Psychiatric Resident (Five-Year Program) at a salary range of \$436-\$530. This means that \$436 per month is paid the first year, \$458 the second, \$481 the third, \$505 the fourth, and \$530 the fifth.

In addition, the Psychiatric Resident enjoys the regular State of California employment benefits of three weeks' paid vacation and eleven paid holidays annually, twelve days cumulative sick leave per year, and membership in an unusually liberal retirement system.

In every-day parlance, the opportunity might be referred to as a "package deal". It combines the training and practice necessary to qualify for the certificate required for either private practice or the higher brackets of public service. It also offers a realistic salary to the young physician with family financial responsibilities.

Not to be overlooked is the attractive field for experience and professional development offered by the California state hospital system. With some 40,000 patients in its care, the California Department of Mental Hygiene maintains eleven large, campus-like hospitals and is soon to build two more. It also operates eight out-patient clinics.

Interested physicians or senior medical students should write for the formal bulletin on entrance requirements and application procedure. Inquiries may be sent to the California State Personnel Board, 1015 L Street, Sacramento.

A LETTER

Dr. C. A. Gustafson, President

Mahoning County Medical Society

Dr. John Noll, Chairman, Home Care Committee

Youngstown Area Heart Association

Gentlemen:

In October of 1950, The Youngstown Area Heart Association called a meeting of representatives of Youngstown Hospital Association, St. Elizabeth Hospital, Mahoning County Welfare Department, Visiting Nurses Association, Child Guidance Center, Bennett School, and the Youngstown Area Heart Association, for the purpose of exploring the feasibility of establishing a Home Care Program in Youngstown. Since that time, with Dr. John Noll as Chairman of the Youngstown Area Heart Association's committee, practical means for initiating such a program have evolved.

Inasmuch as the success of any program of this type will depend on the enthusiastic cooperation of the physicians, the idea was taken to the Council of the Mahoning County Medical Society who gave approval prior to calling the first meeting. Now that considerable data have been collected which shows the need for such an activity, the President of the Mahoning County Medical Society, Dr. Gustafson, has been given this material in order that he may present it to the Council for further action.

Why is such a program necessary?

1. Our hospitals are set up for the care of the acutely ill.
2. An aging population means more chronic cases. Hospitals are now crowded and will become increasingly so.
3. Hospital per diem costs have necessarily increased to the point that sound economy dictates that patient days must be decreased if possible.
4. Many cardiac cases could be released from hospitals much earlier if adequate care at home were available. This is true also for cancer, orthopedic, and many other patients with long term illnesses.
5. The Mahoning County Home is over-crowded with no immediate relief in sight.

What are some of the reasons the patient cannot leave the hospital sooner?

1. He has no home.
2. There is no one at home to care for him without guidance. The wife must work to support the family or there are so many children that convalescence in this atmosphere is not practical.
3. The family refuses to accept the care of the patient.

Where will the funds for such a program be derived?

1. Care for the aged.
2. Relief funds.
3. County Commissioner.
4. Township Trustees.
5. Allied Council.

Who should participate?

1. Mahoning County Medical Society — as Director.
2. Visiting Nurses Association.
3. Hospitals: Laboratory, X-ray, Dispensary, Dietetic, Physiotherapy, Occupational Therapy.
4. Welfare Director.
5. County Commissioner.

6. Township Trustees.
7. Allied Council.
8. Red Cross.
9. Other Health Agencies.

What data have been collected?

1. Since the start of Home Care Program in the fall of 1950, ten cases were investigated, and five of these have received Home Care.
2. At present there are ten cases in South Side Hospital and six cases in St. Elizabeth Hospital, mostly cardiac, who could leave if they had a place to go. Many of these patients would be better off in places where they had a home environment and beds in hospitals could be released for acute cases.
3. An advertisement placed in the Vindicator for "foster" homes where such patients might be cared for resulted in nine replies. Rates range from \$90 to \$160 per month, depending on care necessary.
4. There are sixteen nursing homes in the community with rates ranging from \$60 to \$175 per month.

We believe that the Youngstown Area Heart Association has shown the need for a Home Care Program, has pointed out some of the difficulties and has offered a possible solution to this problem. We feel it was our duty to demonstrate the value of Home Care for the chronically ill patient and this duty has been fulfilled.

Yours very truly,

W. H. Bunn, M.D.
President, Youngstown Area
Health Association

List Features of Provisions of Keogh-Reed Pension Bills

The Keogh-Reed bills, which would establish a voluntary pension plan for the self-employed, including physicians, have been revised considerably, and Frank G. Dickinson informs me that there is a possibility that the new bills (H.R. 8390 and H.R. 8391, introduced on June 27) will be considered if Congress is in session at any time during the remainder of 1952. Otherwise the bills will be re-introduced in the next Congress.

Dr. Dickinson listed these new features of the revised (identical) bills:

(1) A lifetime limit of \$150,000 on the total amount which an eligible taxpayer could exclude from taxable income for the purpose of saving for his old age; (2) eligible taxpayers now over age 55 could exclude more than the limits of \$7,500 or 10 per cent of earned income, whichever is the lesser; (3) only the self-employed and persons not covered by private or public employer-employee pensions plans are eligible; (4) the amounts excluded from current taxable income could be invested either in a restricted trust fund or a restricted retirement annuity issued by an insurance company; (5) a carry-over of unused exclusions for a period of not more than five years; (6) no withdrawals until age 65 (changed from age 60) unless totally disabled for more than three months.

Congressmen Keogh and Reed now believe that this bipartisan bill could be passed after January 1, 1953, if enough sustained effort is made by national organizations representing the self-employed.

—Secretary's Letter No. 223, July, 1952

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HERE AND THERE

Born: To Dr. and Mrs. Dean Stillson, girl, Jeanne Stillson, at North Side Hospital on July 23, 1952.

Dr. Edward Jones, Jr. is now certified by the American Board of Dermatology and Syphilology.

Frank W. Morrison, M.D. announces the opening of his office for General Practice at 1506 Market St., Youngstown, Ohio.

Dr. Samuel Schwebel announces the re-opening of his office at 318 Fifth Ave., Youngstown, Ohio for the Practice of Dermatology.

Commerce Department Reports on Physicians' Income for 1950 and 1951

Survey of Current Business, Commerce Department publication out July 23, carries the results of the latest survey of incomes for physicians, dentists and lawyers for 1950-51. Physicians' incomes rose at about the same rate as the general public's income. The sample of 639 physicians is compared with the results of the major Commerce Department survey for 1949 in which replies from almost 30,000 physicians were used. The Department statisticians weighted the returns in some respects to give a more accurate final average, but did not cover every possible contingency. The chart below shows the mean net income of all physicians with certain Commerce Department break-downs for the three years covered. Figures for 1949 are from the earlier study published in 1950.

	<u>mean net income in dollars</u>			<u>percent increase</u>		<u>No. of cases in sample</u>
	1949	1950	1951	1949-50	1950-51	
All physicians	11,058	11,538	12,518	4.3	8.5	639
Major independent	11,858	12,345	13,378	4.1	8.4	413
Major salaried	8,272	8,727	9,522	5.5	9.1	266
Non-salaried	11,744	12,324	13,432	4.9	9.0	349
All-salaried	8,434	8,794	9,542	4.3	8.5	165

—*Capital Clinic, Vol. 3, No. 29, July 23, 1952*

Cancer Symposium

On Thursday, September 18, 1952 sponsored by the Mahoning County Medical Society is the regular monthly medical society meeting. There will be no other meetings, so attend ! ! !

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GOVERNOR'S CONFERENCE ON NURSING NEEDS IN OHIO

Governor Frank J. Lausche called a special meeting to consider nursing needs in Ohio at 10:30 A. M. April 17, 1952 in his office. Sixty-eight representatives of various civic organizations as well as the medical and allied professions attended the conference. Mrs. Ivalu S. Brown, R.N., President of the O.S.N.A., and Mrs. Elizabeth P. August, R.N., General Secretary, were invited to represent the state association.

John D. Porterfield, M.D., Director of Health, presented a report of a survey of nursing personnel in Ohio. The results of this survey, which had been made by the State Department of Health, indicated that the state has 15,806 nurses with approximately 7,000 inactive nurses in the state. A recent survey conducted by the O.S.N.A. through its district offices indicated that if working conditions were more favorable at least 23,000 professional nurses were available in Ohio. Probably several thousand additional inactive nurses could be induced to serve in an emergency. We believe that improved personnel policies and better salaries would attract more nurses to return to nursing service positions. This was not, however, the conclusion reached through this special conference.

A series of excellent papers was presented on "Problems in the Nursing Field" by leaders in the profession. Miss Celia Cranz, R.N., served as discussion leader and introduced the following speakers:

Miss Muriel Dunlap, R.N., Director of Nursing Education and Nursing Service, Youngstown Hospital — *"Student Recruitment from the School of Nursing Point of View"*.

Mrs. Elva Evans, R.N., Coordinator of Nursing Service, Cleveland Nursing Council — *"Student Recruitment from the Community Point of View"*.

Dean Helen L. Bunge, Frances Payne Bolton School of Nursing, Western Reserve University — *"Nursing Curriculum, Facilitation of Nursing Education"*.

Mrs. Gernie Bright, R.N., Director of Nurses, Trumbull Memorial Hospital, Warren — *"Nursing Duties"*.

Mrs. Neva Stevenson, R.N., Director of Practical Nursing School, East Vocational High School, Cincinnati — *"Practical Nurses"*.

Miss Anne Deeds, R.N., Director of Nursing Service, Lakeside Hospital, Cleveland — *"Nursing Auxiliary"*.

Miss Lois Roscoe, Director, Fort Hamilton Hospital, Hamilton — *"Economy of Profession"*.

Many phases of the problems facing professional nurses were presented by this panel, but the emphasis was on recruitment. The need for additional schools of practical nursing — particularly at the high school level — and funds to support such schools was also discussed. The suggestion was made that the State of Ohio might follow the example of other states and have money for scholarships in nursing education — professional and practical — appropriated by the state legislature. Governor Lausche stated that the State could not appropriate funds for all of the specialties and therefore could not give preference to one. There are shortages in medicine, psychiatry, dentistry, teaching and in other fields.

No definite action was taken at the conference but Governor Lausche announced he would appoint a special committee, with the help of Dr. Porterfield, to make recommendations.—*Ohio Nurses Review, May, 1952.*

KEEPING UP WITH A.M.A.

W. M. Skipp, M.D.

The Senate Committee restores funds which were cut by House from VA operating program. The Senate restored sixty-eight million dollars to the operating of medical, hospital and domiciliary services. The VA says it would have to close 21 existing hospitals and that proper staffing would be impossible and 24 new hospitals to be opened in 1953 could not be staffed. Most of the 4 million cut by the House for home town fee program has been restored by Senate.

..... The A.M.A. has asked for deferment of medical students from draft and reserve service until they complete their medical training. The A.M.A. has asked that (1) internships or residencies in government hospitals would not be considered as time spent in service as against total reserve obligations. (2) That the National Civilian Board have power to insure proper distribution of medical and other health reserves between military and civilian needs.

..... The National Guard Association gave detailed testimony objecting to the bill which is HR 5426 UMT. Those testifying in favor of the bill were Reserve officers, Secretary of Labor, director of Selective Service, Defense Department of Military Officers, American Federation of Labor, Marine Corps Reserve Officers Association and Air Reserve.

..... S 3267 June 2, 1952 Mr. McKellar, Tenn. To amend the water pollution act, to raise the limit on the size of loans which may be made under the act, to assist local government agencies in the construction of works for the treatment of sewage and other wastes.

The amendment would set up twenty-two and one half million dollars annually for five years for loans, would stop a former provision that 33 $\frac{1}{3}$ % would be all that could be loaned, raising the limit to 50%.

..... HR 7976 May 23, 1952. Mr. Rivers, South Carolina. This bill would extend the special inducement pay until June 30, 1953 for the \$100.00 per month for physicians and dentists. This bill is identical with S3019.

..... S 3019 June 2, 1952. This bill was passed with two amendments by the Senate. Voted that the \$100.00 per month be reduced to \$50.00 and that flight bonus and the \$100.00 per month could not be received together.

..... HR 7800 Social Security Bill was passed by the House on second vote, May 19. Same bill was defeated because of Sec. 3, which A.M.A. contended was back door socialized medicine giving Mr. Ewing too much power over how, when and where a disabled old age pensioner was to receive the \$5.00 per month increase. This bill was railroaded through without debate but now goes to the Senate who will hear the bill and no doubt will cut out the objectionable section.

..... HR 8087 Rep. Frances Bolton, R., Ohio, introduced this new bill for federal aid to nursing education. Her original bill HR 910 was tabled by the Committee March 8, 1952.

The new bill sets up scholarships over a 3 year period for nursing education and helps schools to improve and expand. The States would handle administration. The Surgeon General, PHS, can accept or reject State plans.

..... The Atomic Energy Commission beginning July 1, 1952, will make a charge of 20% of cost of radioisotopes used in the diagnosis and treatment of cancer. Since 1948 a full charge has been made for isotopes in other medical research or treatment; the reason given is that clinical application has become a routine, and that completely free distribution is no longer necessary.

..... Many stories of heroism and sacrifice are coming out of the flood area of the mighty MO and it is heart warming to know the part the physicians and

nurses in the 1,000 mile area performed. It is one of the bright spots in American medicine.

Dr. Raymond F. Barnes, medical director for the midwestern area of the American Red Cross, says, "the glorious job done by doctors and nurses did more to make me proud of my profession than anything I've seen in a long time."

James F. Melqueen, mayor of Council Bluffs, whose nearly entire population of 45,000 joined with thousands of Army troops, National Guardsmen and Army Engineers in a feverish, successful fight against the flood waters, says: "Our grateful thanks to the doctors and nurses who gave aid to the sick and injured."

The Pottawattamie County Medical Society at Council Bluffs met and laid plans for cooperative effort during the dark days ahead. The physicians cancelled all but emergency operations in all hospitals, neglected their own interests, and waded in deep mud during the harrowing nights to do all they could for the community.

James Cumiskey of Alexandria, Va., who headed the Red Cross disaster operations in Council Bluffs, said the cooperation of the doctors during the emergency was "excellent—in fact the very best."

. A.M.A. still opposed to Page Committee Recommendations on S 1140, 82nd Congress. The National Doctors Committee for Improved Federal Medical Services. Dr. Robert C. Page, chairman.

The A.M.A. believes that (a) this latest communication of the National Doctors Committee is another attempt to confuse and divide the profession with respect to legislative recommendations for consolidation of health services. (b) It opposes the transfer of the hospital systems of the Armed Forces and the VA to a Federal Department of Health, and it, therefore, cannot endorse any bill proposing such a consolidation. The transfer of the Armed Forces hospital system in time of either war or peace could disrupt the medical career system of the Armed Forces, and thereby seriously endanger the security of the nation.

The A.M.A. tried to work with the National Doctors Committee and Dr. Robert C. Page in regard to S 1140 but these efforts, however, have encountered an irresponsible publicity campaign and a succession of unfair and distorted circular letters to the medical profession.

. HR 5767. The House passed this fair trade bill by 196 to 10. Senate to date has not acted on this bill. This bill puts into effect policing powers of the 45 states with fair trades laws. This bill would return to the States two specific posers (a) the right to require compliance from all merchants including those who had not signed agreements with manufacturers. (b) the right to enforce price schedules on items that had traveled in interstate commerce. This would stop price cutting on drugs.

. HR 4373 and HR 4371. Hearing held May 13, 1952 by the House Ways and Means Committee.

The A.M.A. representatives testified on these bills which would allow physicians and other self-employed to postpone payment of federal income taxes on a portion of their net income, which would be paid into a restricted retirement fund. Income taxes to be paid at time of retirement and use of funds.

. The World Health Organization (this is not the World Medical Association) asks for over two million for its 1953 budget. The U. S. is only one of the 21 countries in this organization, the largest amount, 66%, is to come from

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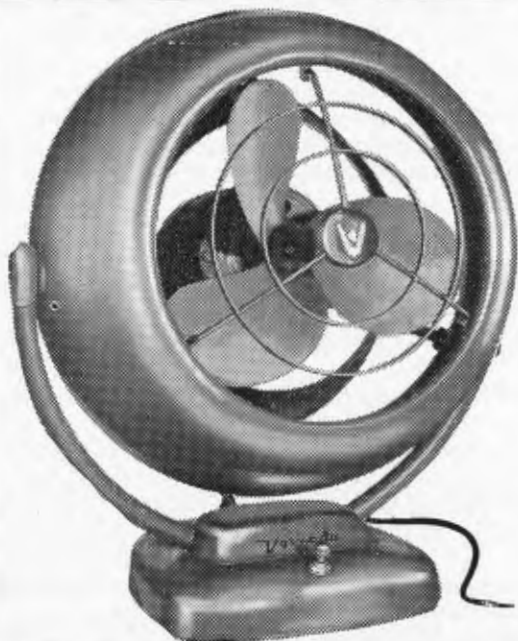
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your pocketbooks. We are always the Santa Claus for all organizations. There is a program to eradicate tropical diseases but why we should foot the bill is the question.

..... The International Labor Organization has 36 countries in the organization. U. S. A. is one. This organization, which is Russian sponsored, has set up compulsory laws for industrial health. Now our Congress should be watched to see if such an outside organization can compel us to pass such laws. Our legislatures should be contacted and requested to vote NO. We certainly are able to set up laws and regulations for health of all conditions without the I.L.O. telling us what to do.

The I.L.O. states that working mothers should be protected, which law was proposed in 1919. Women in industrial and non-industrial jobs would be eligible for 12 weeks maternity care before and after confinement. Cash and medical benefits would be sufficient to see that the mother and child would be kept up to suitable standards of living. These benefits would come out of **compulsory** social insurance or public funds. Again can be seen the type of compulsory health insurance this organization is setting up, (state medicine for U. S. A.)

Federal Security Administrator Oscar Ewing has turned aside from socialized medicine and now wants 50,000 high school graduates each year to have college education. The Charlotte (N. C.) Observer writes editorially: "It has long been an accepted principle that public education is the function of the state and not the federal government. But not until Oscar Ewing came on the scene was it ever suspected that the U. S. government was obligated to provide a college education for anybody. Whenever Mr. Ewing comes forward with one of his devices to give Washington bureaucrats a stranglehold on another aspect of life in this so-called free America, we should remember that the Supreme Court has held that the federal government has the right to regulate whatever it subsidizes."

..... July 1, 1952. New federal regulations raise the physical standards for truck, bus and taxicab drivers engaged in interstate commerce and require periodic physical examinations.

1. After Jan. 1, 1954 all drivers must have a physical every 30 days.
2. Eyes must be 20/40 with glasses.
3. At present (adequate hearing) will be supplanted by a definite measurement for hearing.

..... HR 7922 by Mr. Reed, N. Y. To amend title II Social Security Act to increase the old age and survivors insurance benefits so that old age can earn up to \$100 per month instead of 70 without losing benefits from the pension plan. This bill is similar to the program as outlined by HR 7800 but the section objected to by A.M.A. has been eliminated.

..... Mr. Ewing says the public is more insistent on national health insurance and added when talking to the New Jersey State Federation of Labor, "My friends, you will get it. But our work is far from done. The battle for security is only partly won. There are still big gaping holes in the fence we are building to protect your little bit of heaven. One of the biggest holes is the insecurity produced by illness . . . for the past few years we have been fighting to provide the people of this country with security against the catastrophe of illness. We have been advocating a simple, national health insurance plan along lines similar to social security.

"The noble profession of medicine was traduced and the reputations of the physician became a dishrag of politics. The honest, decent medical practitioners were compelled under threat of expulsion to contribute \$2 million to

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a smear campaign . . . I doubt if the medical association will be able to tax its members anew for another campaign against the health of the people. There is smoldering resentment among the rank and file of the medical profession. The honest, sincere, lovable practitioners do not wish to see their names befouled by the hucksters of Hipocrates."

In the same speech he takes credit for "this country has made fabulous strides in health." "That since 1932 life expectancy has increased 10 years and that we have virtually conquered most infectious diseases." Not the medical profession.

. The Senate Judiciary Committee held public hearing on S. J. 130, designed to prohibit international agreements which interfere with constitutional rights of U. S. citizens. The Resolution was introduced by Chairman O'Connor (D., Md.). 54 other Senators, including Senator Bricker, who testified that this legislation is directed primarily at the covenant on human rights drafted by United Nations Human Rights Commission. The Covenant undertakes to enact legislation to assure the right of all to medical service and medical attention in event of sickness. (Note: this is what is being proposed by International Labor Organization; also that is to have our laws conform to all socialistic programs).

. Reflecting first of the year changes: Hospital costs up 12.6% since last December (this from the Bureau of Labor Statistics), medical care, including drugs, 2.2%, physicians' fees up 1.9% in a three month period.

Blue Cross premiums 2%, optometrists' fees, 0.6%, RX drugs 0.4%, dentists' fees 0.3%.

All miscellaneous goods and services which include medical care, 1.6% over December 1951.

Advisory Committee to study foreign students and visitors so that the work can be coordinated in all health fields, relationships with training centers which may have visitors assigned, such as medical schools. The A.M.A. is a member of the Committee.

Fiske Fund Prize Dissertation . . .

The Trustees of the Caleb Fiske Fund of the Rhode Island Medical Society announce the following subject for the prize dissertation of 1952:

"THE PRESENT STATUS OF ANTI-COAGULANT THERAPY"

For the best dissertation a prize of \$200 is offered. Dissertations must be submitted by December 1, 1952, with a motto thereon, and with it a sealed envelope bearing the same motto inscribed on the outside, with the name and address of the author within. The successful author will also agree to read his paper before the Rhode Island Medical Society at its Annual Meeting on May 7, 1953. Copy must be typewritten, double spaced, and should not exceed 10,000 words. For further information write the Rhode Island Medical Society, 106 Francis Street, Providence 3, R. I.



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BESIDE THE TRAIL

The maxim of Sir William Hamilton that "What is part of a part is part of the whole," is a logical statement that presumes uniformity in content. When it is applied to the administration of national affairs, homogeneity, whether real or assumed, is inimical to good government. Those who choose to remain, when remaining means conformity, are responsible for their part of the whole. If the whole be bad, their's alone cannot be good; nor can their's be good if it be not genuine. In good government, there must be room for dissent.

This principle is operative with ourselves as citizens and as individuals who are seeking our own interests while trying to keep democracy working. Dissatisfaction with the state of our economic affairs is becoming more general, but not in a concerted way. Each group utters its complaint while absolving itself. They would agree in common that change is imperative; but that it might, to social advantage, begin with themselves, none are willing to admit. Each group can be a party to the alarming increase in cost of government and yet remain blind to its responsibility for the good of the whole.

This is democracy which will periodically get itself into economic chaos through group competition and selfish practices. These are the common people, demanding equal rights for all, yet coming together into special classes, each seeking its own advantage. These are the advocates of liberty, who would restrict yours yet fight to retain their own. These are the free thinkers whose freedom of thought takes the form of labor leaders who tell them what to think and what they must do. Through capitalization of their selfishness freedom disappears.

Some of our people have become aware that they are parties to their own victimization; but these are few, the majority continues to attach blame to others. Until there is more general enlightenment, power-hungry men will continue to magnify differences, and play them to their own advantage. In the absence of a common objective, the people will not cease to utter slogans and consume propaganda.



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CHANGES IN THE MEMBERSHIP AND FELLOWSHIP STRUCTURE OF THE AMERICAN MEDICAL ASSOCIATION 1949-1952

- 1918 to 1949—Prior to 1950, and since the year 1918, all physicians who were active members of their State Society were non-dues paying members of the American Medical Association.
Of the 144,211 members of the A. M. A. in June, 1949, 77,723 were listed as fellows. Fellows paid dues to the A. M. A. and received THE JOURNAL A. M. A.
- 1949—The House of Delegates of the A. M. A. assessed all members of the A. M. A. \$25.00, but this assessment was voluntary and not compulsory. This was the only assessment made.
- 1950—There was no assessment in 1950. The A. M. A., for the first time, set the dues for membership in the A. M. A. at \$25.00 a year. If these dues were not paid by the end of the year the member was dropped for non-payment; before he could be reinstated, it was necessary for him to pay the delinquent year's dues.
The 1950 dues did not include a subscription to THE JOURNAL A. M. A. A member in 1950 again had to pay fellowship dues to receive THE JOURNAL A. M. A., or could subscribe to it separately.
- 1951—The membership dues in the A. M. A. in 1951 were \$25.00 and included a subscription to THE JOURNAL A. M. A. Fellowship dues were reduced but no longer included a subscription to THE JOURNAL A. M. A.
- 1952—The same as 1951, except that there are no fellowship dues and fellowship cards are not being issued. Fellowship will probably be abolished after the Annual Meeting of the A. M. A. in June, 1952.

The following summary will further clarify the changes from 1949 to 1952:

	Membership in the American Medical Assn.	Fellowship in the American Medical Assn.	Subscription Price of The Journal A.M.A.
Year	Membership dues in the A. M. A. never included Fellowship dues. Membership dues have been payable only through the County and State Societies.	Fellowship in the A.M. A. was dependent upon membership in the State and County Societies and the A.M.A. Fellowship dues were payable to the A. M. A. and were in addition to the membership dues.	Since January 1, 1951, the price of The Journal has been included in membership dues; rates below for 1951 and 1952 are for non-members, and laymen. Anyone may subscribe to The Journal.
1949—	Assessed \$25.00 but payment not compulsory.	Dues of \$12.00 included The Journal A.M.A.	\$12.00
1950—	Dues of \$25.00 did not include The Journal.	Dues of \$12.00 included The Journal.	12.00
1951—	Dues of \$25.00 included The Journal.	Dues of \$5.00 did not include The Journal.	15.00
1952—	Dues of \$25.00 include The Journal.	No fellowship dues for 1952.	15.00

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FROM THE BULLETIN

J. L. Fisher, M.D.

TWENTY YEARS AGO — AUGUST 1932

There was an old time picnic that month at Heberding's Indian Creek Farm. They had a good sized lake on the place then and some ninety members enjoyed swimming, boating, horseshoe pitching and baseball. They watched the Holsteins being milked by the mechanical milker while the electrified screens killed all the flies. The roast corn and fried chicken were delicious and the men ate so much that there was none left for Dave Smeltzer's Committee when they got around to eating.

The pinch of the depression was reflected editorially in the *Bulletin*. It was suggested that medical care of the destitute was everybody's responsibility and should be paid for out of public funds.

Byron Stewart, Superintendent of Youngstown Hospital, reported that hospital income had been cut from \$18,000 to \$5,000 a month.

A leading article by Abraham Rongy, M.D. of New York, on "Stock Taking in Medicine" stated that the family doctor to a large degree, was responsible for the tremendous and often unnecessary hospitalization of patients. This exhausted the patients' finances so that he was not able to pay the doctor. That was before the days when everyone had hospitalization insurance.

Five cases of typhoid fever were reported. Arsenicals for treating syphilis were being supplied free by the State.

Here is an honor roll of some of the fine old business firms that supported us with their advertising during those dark days: White's Drug Stores, The Zemmer Co., Laeri's Pharmacy, Lyons Physicians' Supply, Helen Mantle Foster, Mead Johnson and Company. If you look you will find them still backing your *Bulletin* today.

TEN YEARS AGO — AUGUST 1942

Chief Mobilizer McNutt's speech at the A.M.A. Convention and other factors produced such a rush of applications that the Office of Procurement and Assignment was swamped. About one-fourth of our members were gone or about to go to the armed forces.

New names added to those in service: B. I. Firestone, H. E. Hathorn, P. M. Kaufman, J. E. L. Keyes, Herman Kling, P. R. McConnell, W. D. McElroy, Ivan Smith. In addition there was a list of names published of those who had applied for Commissions. It looked like a roll call of the entire membership.

Here are some of the business firms who have supported the *Bulletin* for the past ten years: Beil-Rempes Drugs, Blair Dry Cleaning, Cross Drugs, Renner's Brewing Co., The Scott Co., Strouss-Hirshberg's, Thornton Dry Cleaning Co.

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