

# BULLETIN

of the

Mahoning County  
Medical Society



"Facts are to the mind as  
food is to the body."...

*EDMUND BURKE*

March, 1935

Volume 5

Number 3



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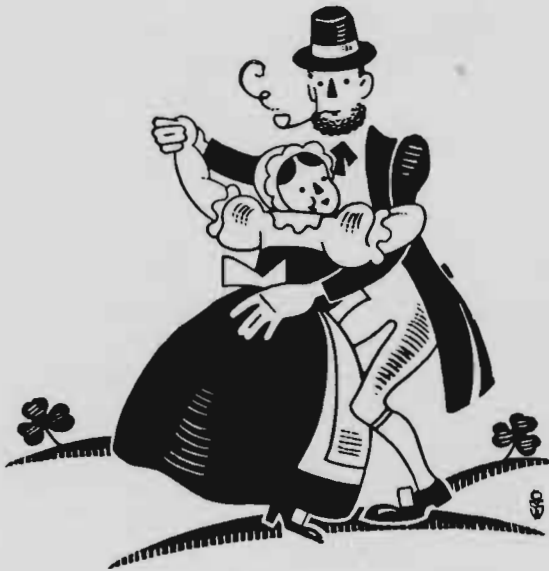
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## The "Continental" Breakfast is not suitable for a growing child

In far too many homes, a breakfast of a roll and a cup of coffee is the fare for children as well as adults. woefully deficient in vitamins and minerals, such a meal furnishes little more than a small amount of calories. A dish of Pabulum and milk, however, is just as easily prepared as a "continental breakfast," but furnishes a variety of minerals (calcium, phosphorus, iron, and copper) and vitamins (A, B, G, and E) not found so abundantly in any other cereal or breadstuff. The addition of a glass of orange juice and one Mead's Capsule of Viosterol in Halibut Liver Oil can easily build up this simple breakfast into a nourishing meal for the children of the family as well as the adult members. It is within the physician's province to enquire into and advise upon such matters, especially since Mead Products are never advertised to the public. *Serranus Fiden*, "We Are Keeping the Faith."

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 Dr. Ivan C. Smith, Home Savings & Loan Building, Youngstown, Ohio.  
 Published Monthly at 243 Lincoln Avenue, Youngstown, Ohio.  
 Annual Subscription, \$2.00.

Vol. V, No. 3.

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## PRESIDENT'S PAGE

A number of doctors feel that State Medicine or compulsory insurance is on the way and that its establishment in the near future is inevitable. They are always resigned and believe that the only thing to do is take it on the chin and go down as gracefully as possible for the long, long count. Some think that organized medicine may be able to modify the terms somewhat when it comes to actual enactment so that medical practice will at least be a little more bearable under State Control.

Still others, and a goodly number, are militantly opposed to regimentation and maintain that the medical profession itself is capable of handling the problems of medical service. The American Medical Association, for instance, representing the composite opinion of some 100,000 physicians has gallantly come forward at this crucial time and has spoken with all the authority which its prestige commands a warning against vicious and harmful legislation designed to corrupt, demoralize and lower the standard of medical practice.

When a great need exists, it is not enough for such an important group merely to point out weaknesses and oppose proposals which are unsuitable. It is imperative that something better be offered and no one is more in touch with the problem, more vitally concerned or more capable of offering its solution than the ordinary, every day practitioner who is so busy doing the work that he has little time to talk about it. The American Medical Association realizes this fact. They are also aware that there is no national panacea which can be applied in every community. Each locality has its individual problems which can best be solved by the doctors who live and work there. For the last ten years the American Medical Association has been encouraging County Medical Societies to put into effect plans to enable people of low income to obtain adequate medical care at costs which they can afford. Ten fundamental principles have been laid down as a guide, but the details of operation must be worked out to suit the needs of each locality.

Many County Societies have accepted the opportunity and have demonstrated conclusively that the thing can be done. It seems to me that if there were more Medical Societies who would take things into their own hands and offer these people an easily understood, workable plan of medical care it would be extremely difficult for the powerful foundations to foist a bureaucratic, autocratic form of State-controlled medicine upon us.

*I do not believe that it is too late for us to promote a plan. If we are to maintain our position as leaders in medical affairs, then we must assume leadership. We must wake up and accept the challenge. I should like to see Mahoning County take the lead in this important matter in Ohio.*

*March*



# BULLETIN

of the

## MAHONING COUNTY MEDICAL SOCIETY

M A R C H 1 9 3 5

### COUNTY GOVERNMENT REFORM

In governmental affairs we are strange creatures. No matter how illogical a set-up may be; how inefficient; how graft-inviting; how expensive—we just plug along with it indefinitely. It is only when public business has long borne heavily upon our pocketbooks that we take notice of it.

County government, everywhere, is a perfect example of the poorly organized public business that has now begun to press hard enough to claim our attention.

The subject presents a duality of interest to the Medical Profession. First, as citizens and tax-payers we want honest and efficient service for our money. Then, as physicians we wish that the same principles of honesty and efficiency shall operate specifically in behalf of the public health. The Commission has requested us to assist them with this phase of the problem.

The appointment of the "heads" of the departments should be the prerogative of the Chief Executive. But the Department of Health should be handled in a special way. Many believe that this department should include a "Board of Health", consist-

ing of 5 members, at least 2 of whom should be physicians selected from a list submitted to the appointive authority by The Mahoning County Medical Society, and one a dentist similarly chosen by the Dental Society.

To avoid certain over-lapping and conflict of duties (such as the social service investigations), some believe it would be more economical, and conducive to a more harmonious and efficient administration, to combine welfare and health work under one department to be known as "The Department of Health and Welfare", the director to be a physician, and the department to be guided by a "Board", as above constituted. In any case, it is the opinion of many that medical relief for the indigent should be handled by the health service.

Happily, the Commission in this County consists of a group of fine citizens, of the highest character and intelligence, who are earnestly seeking the right solutions. As Dr. W. X. Taylor so well put it, "It is refreshing to watch them work!" They will act upon the assumption that nothing is settled until it is settled right.

## SECRETARY'S REPORT

The regular monthly meeting of the Mahoning County Medical Society was held at the Youngstown Club, February 12, 1935, with 150 members and guests present. The guest-speaker of the evening was Dr. George Draper. His subject "The Emotional Factors in the Problems of Internal Medicine," was received with much enthusiasm, because it was entirely different. The Professor is a very interesting speaker. We, as practitioners of medicine, should use his suggestions in our practice more than we do. Following the scientific address there was a short business meeting. The following motion was passed: That the action of Council be approved and that the State refund be retained by the Treasurer of the Society and not refunded to each individual member.

### Dues

Several of our members have not paid their dues for 1935. This includes some of the honorary members, who are required to pay their own State dues, but not Society dues. These men are not members after March 1st, in the State Association and will not receive the State Journal or be eligible for malpractice protection after that date, unless their dues are paid. Please, get your dues in so you can be a member of our Society.

\* \* \*

Council meeting was held February 19, 1935. All members of the Society were invited. The meeting was called for the purpose of reviewing the plans that were to be presented to the County Home Rule Commission. Our Legislative and Public Relations Committees presented a plan that was approved by your Council and then was presented, on February 20, 1935, to the County Home Rule Commission for their consideration.

These Committees were commended for the large amount of work done on this subject and if the plan is accepted, it will benefit all of us, including the hospitals. In another part of the BULLETIN the plan is presented.

This is a trying time for our Legislative Committee because of the number and variety of bills that are being presented by the cults. Get behind the Committee. If you do not understand these new proposals contact the Legislative Committee Chairman, Dr. O. J. Walker, or this office. We need your help if the State Medical and Public Health Laws are not to be torn to pieces.

WM. M. SKIPP, *Secretary.*

## MEDICO-LEGAL

By D. H. S.

### Wife Injured by Husband's Negligence (48 Ohio App.)

It is the law of Ohio that a wife cannot sue her husband for injury even though he were negligent, but in the Metropolitan Life Ins. Co. case the wife was not only permitted to sue the company but got a judgment against the company for her injuries which were caused by her husband's negligence.

Defense offered no evidence, but asked the court at the end of plaintiff's testimony for a directed verdict. This was denied. Defense went on the theory that the wife cannot sue her husband, therefore she cannot sue his employer.

Evidence was then brought out that a supervisor of the husband knew the wife was accompanying the husband in his insurance trips and encouraged this, and the court states even though the wife cannot sue the husband she may sue his employer.

Decided December 11, 1933.

*March*

## PUBLIC HEALTH IN COUNTY REFORM

The Council, representing the whole of The Mahoning County Medical Society, earnestly wishes that the membership shall be fully informed upon any and all matters coming before it. In no case does the Council desire to take any action contrary to the wishes of the Society. The Council, the Committees, and the Officers of the Society urge you to study all important subjects as they arise, and to feel free to express your opinions. The objective is only the best good of the Society.

What follows was tentatively approved by the Council. The County Charter Commission had asked that the Society meet them on February 20th. for a "hearing" of our views on this subject. As Dr. Earl Brant said, "This is the first time in my 23 years of membership when any important civic body has asked for our opinion on any important matter." The rest of the Council, like Dr. Brant, felt that we should respond without delay.

These are the tentative proposals of the Legislative and Public Relations Committees, Drs. O. J. Walker and R. B. Poling, Chairmen, as approved by the Council, and as presented to the Charter Commission, subject, of course, to change.

### The Committees' Proposals

Members of the medical profession are intensely interested in all developments bearing on the reorganization of County Government, not only because as citizens and tax-payers physicians are vitally concerned in the operation and form of local governmental units, but because some of the proposals now under consideration, or contemplated, provide for changes in present systems of local public health administration and in local systems of providing relief for the poor, including medical service.

The medical profession realizes

that where and when complete, or partial, reorganization of local governments is attempted some changes in present methods of local public health administration may be necessary and advisable.

Being vitally concerned in the maintenance of public health administration on a sound effective basis, the medical profession will have no hesitancy in giving its support to suggested changes that will increase efficiency in public health administration, provide greater safeguards for the public, and strengthen the financial basis of official public health activities.

On the other hand, the medical profession is opposed to changes in local public health machinery that would impair, or destroy, the efficiency of local health departments, scatter the responsibility for public health protection, and cause health administration to lose its separate and important identity, which would result from making it but a subordinate division of public welfare.

Public health administration is a major and essential function of government and must be recognized as such. Whatever changes may be made in local government set-ups, serious consideration must be given to the question of keeping health administration on a basis where it can function properly and effectively.

The Legislative and Public Relations Committees of the Mahoning County Medical Society were asked to make a study of the report of Governor White's Commission on County Government. A report of this study, together with recommendations as to the various features pertaining to the County Health Department, County Welfare Department and the County Coroner, were submitted to the Council of the Medical Society for its approval. Recommendations

therefore, which we shall make to you are the result of the united study of the Legislative and Public Relations Committees, together with the Council of the Medical Society.

We do not deem it expedient at this time, to make recommendations as to which of the three forms of County Government we favor, but prefer to limit our discussion to the Public Health and Welfare Departments, and to the status of the County Coroner. By and large, we are in accord with the Commission's recommendations for the reorganization of these functions of County Government. However, there are certain important features and details in this reorganization which we would modify or change.

As stated by the Commission, "the legal status of the health districts is now somewhat anomalous", in that they are administrative districts of the State and are not part of County and Municipal government, although in practice, they function as a part of City or County government. We are in accord with the recommendation that as soon as possible the powers and duties of the various health districts be transferred to, and incorporated in, a County Department of Health as a unit, in the proposed reorganized County government. This will make for a more efficient performance of health service at the most economical cost, will put health matters under a more effective governmental control, and will allow health matters to be placed on a sound basis of financing.

Regarding the plan for the formation and administration of the Department of Health, we approve the Commission's recommendations which are summarized as follows:

1. Creation of a board of health as a stabilizing and co-ordinating body, appointed by the chief executive of the county or, if there is no chief executive, by the county com-

missioners.

2. The powers of the board should be limited to determining policies of the department and passing on the appointment and removal of personnel.

3. Administration of the department should be vested in a medical officer of health, appointed for an indefinite tenure, (a) in counties having a chief executive, by the chief executive on the recommendation of the board of health; and (b) in other counties, directly by the board of health.

4. Administrative authority in matters of health should be vested in the medical officer of health.

5. Ordinance-making powers in the field of health and the power of appropriation of funds for health purposes should be vested in the legislative authority of the county.

6. Other agencies, such as the county department of welfare and the schools, responsible for activities in which health service is incidental, should utilize the department of health so far as possible in the provision of such service.

However, we would further recommend that the membership of the County Board of Health, should consist of two physicians, one dentist and two lay-men, each member appointed by the chief executive or county commissioners for a period of five years, in the beginning, so set up that one new member only should be appointed each year. When the medical or dental members are appointed, such appointments should be made from a list of three to five names, submitted by, in the case of medical member, The Mahoning County Medical Society and in the case of the dental member, the County Dental Society. In so far as possible, this selection by the chief executive or county commissioners, should be made with a mind to geographical and numerical pre-

(Turn to page 90)

March

## OPINIONS OF OTHERS

By P. J. F.

### Important Suggestions

1. "Please read and reread word by word the following report."

This advice is urged upon the Pennsylvania Medical Profession by their ten State delegates to the American Medical Association. It refers to the Report of the Reference Committee of the House of Delegates of the American Medical Association. You will find that report and a discussion of it on page 652, Journal of the A. M. A., Feb. 23, 1935. Many County Societies have passed resolutions endorsing this report. Should not The Mahoning County Society do likewise?

2. **The Epstein State Health Insurance Bill.** This bill is analyzed on page 400, Journal A. M. A., Feb. 2, 1935; and the details are, also, more fully set out and dissected on page 4 of The American Medical Association Bulletin for January, 1935. It is very important to the members of the Profession in Mahoning County that they understand this.

3. **County Government Reform.** The Recommendations of the Legislative and Public Relations Committees are published in part in this issue. Lack of space prevented our printing the entire report. But the question is of vital consequence, and should be carefully studied. The recently elected Commission meets each Wednesday evening at 7:30, at the Public Library. They welcome citizens who wish to attend their sessions, and you will find it well worth your while to listen in. The members of the Commission are: Judge Geo. H. Gessner, Chairman; J. C. Argetsinger, vice Chairman; Kenneth M. Lloyd, Secretary; and J. E. Bennett, Walter B. Collins, Vernon E. Crouse, W. I. Davies, Joseph Friedman, Mrs. Rebecca Fordyce Gayton, Warren E. Grant, Robert A. Man-

chester, Shurl Orr, John S. Stewart, and Clyde Wheeler.

4. The Cults are busy at Columbus—and how! Unless our united influence is thrown against these measures they *are certain to pass*. As Walter Winchell would say, "It will be in the news tomorrow!"

### The "Ten-Point" Program

The following is the 10-point program as enunciated by the American Medical Association:

1. All features of medical service in any method of medical practice should be under the control of the medical profession.

2. No third party must be permitted to come between the patient and his physician in any medical relation.

3. Patients must have absolute freedom to choose a legally qualified doctor of medicine from among all those qualified.

4. The method of giving the service must retain a permanent, confidential relation between the patient and a "family physician."

5. All medical phases of all institutions involved in the medical service should be under professional control, it being understood that hospital service and medical service should be considered separately. These institutions are but expansions of the equipment of the physician.

6. The immediate medical cost should be borne by the patient able to pay at the time the service is rendered.

7. Medical service must have no connection with any cash benefits.

8. Any form of medical service should include within its scope all qualified physicians of the locality who wish to give service.

9. Systems for the relief of low-income classes should be limited strictly to those below the "comfort level."

10. There should be no restrictions

(Turn to page 91)

## MEDICAL FACTS

By J. G. B.

In the acute stage of coronary thrombosis the rectal temperature is several degrees higher than the oral. Boyd's explanation of this phenomenon is that there is no heat loss by perspiration in the pelvis as there is in the face.

\* \* \*

In suspected tuberculosis leave the thermometer in the mouth for 5 minutes, since a rise of two-fifths of a degree is significant, and it may not be recorded if the thermometer is left in the mouth for only one or 2 minutes.

\* \* \*

In discussing a case of a 48-year old woman with a blood pressure of 285/170, and who died of malignant vascular nephritis, William B. Breed of Boston remarks: "She received during her stay 600 R units of radiation in two doses over both adrenals. That is one of the newer tricks in the treatment of hypertension. Experience in this hospital (Massachusetts General) with radiation of adrenal or pituitary glands, or both, caused no striking change in the blood pressure levels or symptoms in eight cases."

\* \* \*

Petechiae in the terminal stages of cardio-renal disease are of no significance. We may even find gross intestinal hemorrhages (usually in the ileum and large bowel) in the presence of uremia.

\* \* \*

The experience of many observers is that in any blood disturbance, except those following hemorrhage, transfusion retards bone marrow regeneration rather than stimulating it.

\* \* \*

In rheumatic heart disease the sedimentation rate may help in distinguishing between an active and an inactive lesion.

\* \* \*

Mallory says: "Most chests at 66 are barrel-shaped or begin to be, and

they may or may not be emphysematous. One has to have more than that to make a diagnosis of emphysema." But in discussing the same case, F. Denneth Adams remarks: "The systolic murmur over the precordium is a common finding at 66, being due to roughening of the arch, relative mitral insufficiency of an aging myocardium, or both."

\* \* \*

Polycythemia is frequently found in association with ulcer of the stomach.

\* \* \*

Hampton, in the X-ray department at the Massachusetts General, has made the very interesting observation in the past few years that if there is a lesion in what he calls the prepyloric region, the last 2 cm. before the pyloric ring, that lesion will turn out to be cancer almost every time, even if it has all the X-ray findings of ulcer.

\* \* \*

While cancer is a disease of middle or advanced age, cancer of the bowel is usually found in the third or fourth decades.

\* \* \*

Muffled heart sounds in an emaciated person may simply be due to the fact that the stethoscope is resting on top of a rib.

\* \* \*

In a paper on pulmonary tuberculosis read before the New Hampshire Medical Society, Robert M. Deming says: "The following five points given by Dr. Lawrason Brown will prove of much value in arriving at a diagnosis; with the exception of the first which is self-sufficient, at least two of the others must be present: 1. Tubercle bacilli in the sputum. 2. Persistent rales at one apex. 3. X-ray showing involvement over same area. 4. History of hemorrhage of at least one teaspoonful of clear blood. 5. Pleurisy with effusion.



## *This Month*

---

### DR. R. H. JAFFE

Director of Laboratories, Cook County Hospital  
Professor of Pathology, College of Medicine, University of Illinois

#### SUBJECT

“Malignancies of the Lung”

Tuesday, March 19th, 8:30 P. M.

YOUNGSTOWN CLUB

---

### DR. R. H. JAFFE

*The Society scores another triumph this month. Dr. Jaffe, the speaker, comes to us with that enviable composite of medical training formerly so much sought by ambitious American medical men; namely, the combination of the best in Europe and the best in America. The difference is that Dr. Jaffe secured his European training first.*

*The speaker is a native of Vienna. He graduated from the University of Vienna, in 1913. From 1914 to 1922, Dr. Jaffe was in the Institute of Experimental Pathology of the University of Vienna. He then came to Chicago as Director of the Uihlein Memorial Laboratory of the Grant Hospital. At this time he joined the Department of Pathology of the College of Medicine, University of Illinois. Since 1928, Dr. Jaffe has served as Director of Laboratories of Cook County Hospital, and, also, as Professor of Pathology, University of Illinois and Professorial Lecturer in Pathology, Rush Medical College, University of Chicago.*

*The Society takes pride in the privilege of hearing this able medical leader.*

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DR. FRANK C. MANN, Professor of Experimental Surgery  
and Pathology  
DR. HENRY W. MEYERDING, Associate Professor of  
Orthopaedic Surgery

*All of these are members of the faculty of the Postgraduate School,  
University of Minnesota, and "heads" of special  
divisions at Mayo Clinic.*

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dinarily attractive program, is sure to result in a very large attendance.  
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**WE MOST CORDIALLY INVITE  
OUT-OF-TOWN PHYSICIANS**

## POSTGRADUATE DAY PROGRAM

*(Tentative as to Arrangement)*

### MORNING SESSION:

- 9:00 a. m. Spondylolisthesis as a Factor in the Cause of Backache. Dr. Henry W. Meyerding.
- 10:00 a. m. The Treatment of Gastro-intestinal Neuroses. Dr. Walter C. Alvarez.
- 11:00 a. m. The Functions of the Liver. Dr. Frank C. Mann.

### AFTERNOON SESSION:

- 1:00 p. m. Rectal Cancer: Management and Prognosis. Dr. C. F. Dixon.
- 2:00 p. m. The Functions of the Spleen. Dr. Frank C. Mann.
- 3:00 p. m. The Clinical Aspects of Fibrosarcoma of the Soft Tissues of the Extremities. Dr. Henry W. Meyerding.

DINNER, YOUNGSTOWN CLUB, 6:00 P. M.

### EVENING SESSION:

- 8:00 p. m. The Diagnosis of Gastro-intestinal Disease Purely from a Good History. Dr. Walter C. Alvarez.
- 9:00 p. m. Essential Operations for Chronic Ulcerative Colitis. Dr. C. F. Dixon.

*The Evening Session at The Youngstown Club is both scientific and social. All the recreational features of the Club are yours to enjoy.*

### POSTGRADUATE COMMITTEE:

Dr. James Brown, <i>Chairman</i>	Dr. M. W. Neidus
Dr. A. E. Brant	Dr. L. W. Weller
Dr. W. D. McElroy	Dr. Sam Klatman

*Address all communications to Dr. James Brown, Home Savings and Loan Building, Youngstown, Ohio.*

## CYNANCHE TRACHEALIS

(From the Diary of a Student of Physic.)

By LOUIS S. DEITCHMAN, M. D.

*(Continued from February)*

DEC. 12, 1799.—At the break of day I was awakened by Christopher, who presented General Washington's compliments, & wished to know did I still persevere in my desire to ride with the General over the estate, the weather having become inclement. Answering in the affirmative, I hurriedly made ready & joined the General at the break-fast table. Although there was a generous quantity & variety of victuals, I took note that the General ate lightly, partaking only of three small Indian hoe-cakes & as many dishes of tea.

Break-fast done, the horses were brought. The General mounted with an agility uncommon for his age, & altogether he made an imposing figure on horseback. (My father often said that General Washington was the best horseman of his age.) As was his habitual custom, the General made his rounds of the estate to see that all his hirelings were in their places. He took note of those missing, several being indisposed, at wch the G. expressed his sorrow & made arrangements for their care. I was again impressed with the orderliness of the estate, the General appearing to have every detail under his hand & put every thing in motion.

The rounds included the smith's shop, the distillery, where whisky was being made from Rye & Indian corn, this usually a profitable enterprize; we next went to the stud stable in wch the G. took considerable pride. He had blooded horses, one named "Traveller" being particularly fine & at this time the reigning stallion. But the prize of his stable & most unusual & unique beasts were the Jack-asses, wch he was propagating. One called "Royal Gift" the G. appeared to re-

gard with particular affection & of him he told a curious history.

This Jack came by his name by the circumstance of being a gift from His Majesty the King of Spain. Contrary to a law forbidding their exportation, His Majesty, learning of the G.'s desire to propagate these beasts, sent him two. It seems that for a time after his arrival, though in fine appearance, "Royal Gift" paid no attention to the business of procreation, simulating in this his Royal master, who was past his grand climacteric, & the beast would have nothing to do with our plebeian mares. Fortunately, after a not inconsiderable period, he lost his evidences of aristocratic fastidiousness, & becoming better acquainted with our republican enjoyments, has now fathered a goodly progeny, wch is quite profitable to the stable. These witty remarks causing me to laugh uproariously, the General appeared to be pleased at having turned this humorous phrase.

Next we went to the water mill; finding some part of the machinery out of gear, the G. at once, divesting himself of his coat, proceeded to mend it, & with a show of a fine turn for mechanics, had it going in a short time. Here the G. remarked with pride that his flour was equal in quality to any made in this country. He also added that, in spite of the magnitude of his estate (he is one of the richest landowners) and the variety of products engendered therein, the property rarely produced a clear gain.

The weather had now turned exceedingly inclement, rain, hail & snow falling alternately with a cold wind. I therefore urged the General to return to the house, this he

*March*

declined to do until late in the afternoon, a circumstance wch at his age I considered something of an imprudence; his neck appeared wet & the snow was hanging on his hair.

I am extremely pleased & deem it a privilege of no small magnitude that I am able to spend these days so close to the General, to see with mine own eyes what manner of man he is. The mellowness of ripe age & the serene kindness wch we are taught to expect in older people he has to a fine degree, & a grace but rarely met. Withal he is most unaffected & human. Yes, human. I am impelled to say this because too many tales have been broidered around him, and a saint-like halo of no small size, & still growing, it being one of the weaknesses of a people to turn their leaders into saints, devoid of all human faults & foibles. Already people are wont to think of him as a mythical figure, incapable of being moved to anger or mirth, a man apart from the frailties of the world. I smile as I think of the storys told by my late father, who had occasion to observe him for years, & under diverse conditions.

"His Excellency" (as my father was apt to call the General) "though generally a tranquil & reserved man, has chained up devils inside of him; he could call a man—& he a general—a d—— drunkard; & the terrible language wch he used to Lee at Monmouth, when he failed him in the time of peril, will not bear repeating. Be it said that it was only under strain of the most extreme character that he lost his composure, & that but rarely. That he was able to keep his violent temper under controul, is so much the more to his credit, & he was capable of tenderness & extreme help to the meanest, & in the trials wch accompanied the campaigns of the War, he was ever solicitous of the wants of his underlings, & suffered with & for

them."

My father said that during the campaigns his Excellency seldom laughed & was given to cautious silence. By reason of this ability to retain his own tongue & his nature, wch was quick to wrath, he was considered, in the early days, weak, dull & slow in judgment. Yet, those who knew him best, well knew him to be most decisive in action & willing to stake all his fortune on a chance, risking his own life with the utmost indifference & courage; & though not given to coveting popularity or seeking favour among his men, he had their well-fare deep at heart. My own observations confirm the now generally held notion of the greatness of the man, & yet I like to think of him as one of real flesh, blood & sinew, rather than of a glorified mummy.

Or the many conjectures & speculations as to the General's religious beliefs: I was in hopes that he would say something wch would enlighten me, & was tempted to introduce the subject, but refrained from so doing, being of the opinion that it is in bad taste to drag matters of faith into conversation. Yet, as opinion & expression has varied on this topic, some going so far as to hold the General an atheist, yet others assigning to him various creeds & sects, I once asked my father what he thought. He told me that he had not the least doubt that his Excellency is a God fearing man, & of a strong faith in a divine guiding Power, though not given to sectarian kind of religion. The General stated, & on numerous occasions, that to him it mattered not whether a man be Christian, Mahometan, Jew or any other faith, so long as he led an honest life, did a good day's work, & was upright in his dealings with his fellow creatures. Discussing this in the counsel of my own thoughts, I can say, without reservation, that this is a good eno'

creed for any man, & a simple one.

I cannot refrain from making regretful mention of an occurrence on this ride wch made me reflect upon some of the present day customs & practices. The General's attention having been called to a Negro stable boy, Pompey, who had been with a fever of some malignancy, he stopped to see him, & evinced much concern & solicitude toward the boy; he ordered to have him bled, this to be repeated on the morrow, in the absence of more favourable symptoms. From a cursory inspection, it appeared to me that the boy was labouring under a form of phrenitis with typhomanic symptoms, manifested by an alienation of the mind, rather than from any inordinate action of the arterial system or surcharge of blood; he was already markedly depleted & shewed a facies Hippocratica. Disposed though I was to controvert this method of treatment, wch was not only prejudicious but seemingly useless, I none the less refrained from making any suggestions, being fearful of offending.

What became of the boy, I have never learned; the incident, however, sett me to thinking upon a matter wch has been disturbing me for some time: The conviction has been growing upon me (as it has upon others) with increasing strength, that the present method of indiscriminate blood-letting of the sick, does not always have the salutary action ascribed to it, & that the free wielders of the lancet may some day be condemned by coming generations as a benighted & unphilosophical lot. How often have I seen professors Rush, Physick, Dewees, Kuhn, Shippen, & other doctors of the first celebrity, order bleedings for almost every inmate of a hospital ward, & these repeated, often daily. I recall the rows of beds, with their occupants bled until fainty & all but pulseless, bled for sundry & every

ailment, bled until their blue sclerotics & finger-nails seemed to cry out for that very living substance wch was being drained out of them. Yet, the very next day, another copious bleeding was ordered, for no better reason than what is called *ex rei necessitatis*. Even men like Dr. Mease, who have grown grey in the use of the lancet, are beginning to confess that it is difficult, perhaps impossible, in our present state of knowledge of disease, to determine how far blood-letting may be useful or pernicious, & that it has been employed, in a multitude of cases, without apparent advantage & sometime to the detriment of the patients. My opinion, wch I should hesitate to express openly, is that it will be proven, some day, as an incompetent & fruitless procedure. If that be the case, may posterity be charitable to us for the rivers of blood wch have been shed in the name of Aesculapius & Hygeia.

And yet, charity directs me to observe that we are not the worst offenders, as this blood-shed is presumably for the alleviation of pain & suffering, & is animated by zeal for the well-fare of our fellow man. What of the innumerable streams of good, healthy blood, wch for centuries have drenched this earth in the name of such vague causes, as patriotism, religion, liberty, democracy, &c., &c. If ours be a sin, how much more grievous is that of the temporal & ecclesiastical powers, who, not infrequently, are motivated only by hatreds & intolerances, when provoking this constant carnage & blood-shed, & mayhap have no more ethical or moral foundation for condoning their blood-shed, than we have scientific ground for ours.

As to the revolutionary tendency of these thoughts, I am quite unconcerned on this score, for there is a fashion in medical & other thought, as well as there is in dress, & each

system must have its day. Not many years ago Boerhaave was the *omnis homo*; he soon yielded his place to Cullen; Brown triumphed over Cullen, &c., &c. Or the vogue wch may be enjoyed by a drug or method, for a time, only to be supplanted by another equally ephemeral method or drug. Similar is the rotation of opinion in other fields. Yet, we prematurely flatter our art by attributing to it the qualities of an exact science! Witness the tendency to materialism wch endows living matter with laws, wch shall operate uniformly & perhuman oeconomy works with the exactness & nicety of a test-tube experiment & nicety of a test-tube experiment & may be reduced to an equation. This appears to me as being entirely unscientific, unphilosophical & unscriptural, for formulæ of one generation may be laughed at by succeeding generations as folly & superstition, even as our blood-letting & other accepted methods of practise may be held up to ridicule by a wiser & perhaps less charitable posterity. But I am proceeding beyond my depth & it is time to bed.

SAT., DEC. 14, 1799. — Having some friends to visit at Alexandria, I left Mt. Vernon early yesterday & did not return until late to-night. The ways of Providence being unfathomable, I had no suspicion that during my short absence a tragedy would unfold itself over Mt. Vernon, & that the grim King was stalking within its doors.

From Dr. Craik & Tobias Lear, the General's private secretary & confidential friend, I learned that on rising Friday morning, the General complained of sore throat. He had taken cold & was hoarse, but made light of it, as he would never take anything to carry off a cold, always observing: "Let it go as it came." The snow lay three inches deep on the ground & was still fall-

ing, causing him to omit his morning ride and to remain within doors until noon, when the clouds broke & the sun came out warm. He occupied himself before dinner in marking some trees on the lawn that were to be cut down, & with his compass & chain traced several lines for improvements. He spent the evening in the usual manner, & on retiring appeared to be in perfect health, except the cold wch he considered as trifling; he had been remarkably cheerful all the evening.

About two O'clock this morning he woke Mrs. W. & informed her that he felt very unwell & had an ague accompanied with pain in the upper & fore part of the throat, a cough, & a difficult rather than painful deglutition, also difficult breathing. Mrs. W. wished to get up & call a servt, but the Gen. would not permit her, less she should take cold. As soon as the day appeared, the G. desired that Mr. Rawlins, one of the overseers, who was used to bleeding the people, might be sent for, to bleed him before the doctor could arrive, as he would not, by any means, be prevailed upon to send for the attending physician till morning. By now his respiration was more difficult & he was hardly able to utter a word intelligibly. A mixture of molasses, vinegar & butter was prepared, but he could not swallow a drop, & whenever he attempted it he was distressed, convulsed & almost suffocated.

Mr. Rawlins soon came & prepared to bleed him; the G. observing Rawlins apparently agitated, said with difficulty "don't be afraid," & after the incision had been made, he remarked that the orifice was not large enough; however, the blood ran pretty freely, & after about  $\frac{1}{2}$  pt. had been taken, the string was untied. Finding that no relief was obtained from bleeding & that nothing could be swallowed, Mr. Lear proposed bathing the throat externally with Sal Volatile, wch was done, & a piece of flannel was put

around the neck. His feet were also soaked in warm water, but this gave no relief.

About 9 O'clock Dr. Craik arrived & put a blister of cantharides on the throat, & had some vinegar & hot water sett in a tea-pot, for him to draw in the steam from the spout. He also had some sage-tea & vinegar mixed & used as a gargarism. When the mixture came out of his mouth some phlegm followed it & he would attempt to cough, but without effect. Two moderate doses of calomel & an injection was administered, wch operated cathartically on the lower intestines—but all without perceptible advantage—the respiration becoming still more difficult & distressing.

Discovering the case to be highly alarming & foreseeing a fatal tendency of the disease, Dr. Craik suggested that two consultants be immediately sent for, in the interim the General was administered two copious bleedings. Dr. Dick came about 3 O'clock & Dr. Brown arrived soon after; upon consultation of the three physicians, it was agreed, as there were yet no signs of accumulation in the bronchial vessels of the lungs, to try the results of another bleeding, when about 32 ounces were drawn; the blood ran slowly, appeared very thick & did not produce any symptomata of fainting or the smallest apparent alleviation of the disease.

At four O'clock he could swallow a little & ten grains of calomel were given, succeeded by doses of emetic tartar, amounting in all to five or six grains, but with no other effect than a copious discharge from the bowels. The powers of life seemed now definitely to be yielding to the forces of the disorder; blisters were applied to the extremities together with a cataplasm of bran & vinegar to the throat.

The two consulting physicians finding that what had been done was without effect, retired, except Dr. Craik. The General said to him:

"Doctor, I die hard, but am not afraid to go. I believed from the first attack, I should not survive it." The doctor pressed his hand but could not utter a word; he retired from the bed-side & sat by the fire absorbed in grief. I can understand how he felt.

From about eight O'clock on the General appeared to breathe with less difficulty, but was very restless, & about ten O'clock he made several attempts to speak to Mr. Lear before he could effect it; at length he said: "I am just going. Have me decently buried, & do not let my body be put into the vault in less than two days after I am dead." Noting that he was understood by Mr. Lear he said, "'t is well," these being his last words. About ten minutes before he expired he felt his own pulse & soon after, his wrist dropped from his hand. Dr. Craik came to the bed-side, felt his pulse & placed his hands over his eyes.

The General was apparently fully impressed through all the stages of the disease that its conclusion would be mortal, submitting to the several exertions made for his recovery as a duty rather than from any expectation of their efficacy, & considered the operation of death upon his system as co-eval with the disease, & several hours before his decease, after repeated efforts to be understood, succeeded in expressing a desire that he might be permitted to die without interruption.

During the short period of his illness he economized his time in the arrangement of such few concerns as required his attention, with the utmost serenity. About half past four he sent for Mrs. Washington & made dispositions about his will, & gave Mr. Lear instructions about the arrangement of his papers & settlement of accounts.

The General expired without a struggle or sigh, retaining to the end the full possession of his intellect &

*March*



with every demonstration of that equanimity for wch his whole life had been so uniformly & singularly conspicuous.

The unforeseen tragic occurrence, shewing that at best our feeble efforts are often futile in the presence of the operation of natural forces, leaves me, as it does every one else, stunned & dumfounded. As is usual when a famous man dies, there will, most probably, be much discussion & criticism of the methods adopted by the physicians. But is there cause for criticism of the treatment of the General's last illness?

The disease, the conjecture occurs to me, was probably an oedematous & anasarous swelling of the glottis & surrounding parts, due to a torpor of the absorbent vessels of the larynx, since the tonsils, commonly called the almonds of the ears, were not inordinately affected, as is found in Synanche Tonsillarlis (also known as Quinzy.) Cynanche Maligna may be definitely dismissed, as it is an affection of infants & children, & since the usual sloughs & specks, & hoarse cough found in this malady were not noted. The disease (Cynanche Trachealis) wch attacked the General is at best, & in constitutions better equipped, frequently fatal. The attending & consulting physicians, all men of sound judgment & well trained in our art, were governed by the best lights we have, & employed the accepted methods of our time. To be sure, there was a good deal of bleeding, & it is barely possible that if Tracheotomy were performed, the General's life might have been spared, but this would have been a highly speculative & dangerous procedure & it is doubtful whether it would have altered the issue. It seems that the inevitable cannot be averted, & this should be to me a lesson in humility, shewing the imperfection of our art, & directing me to beware of being critical of the practices of other phy-

sicians.

As for the General, it should be a source of comfort to all who loved & venerated him, that he had lived to within a short space of the allotted three score & ten, spending his life in rendering invaluable & immortal service to his country, so let us usher him into the Unknown without rancour or bitterness.

### Speakers' Bureau

By W. M. S.

The following doctors have given addresses since the last report:

Dr. O. J. Walker, to the Phi Rho Forum, at the Pittsburgh Academy of Music, January 19, subject, "Fatal Complications of Mastoiditis."

Dr. W. M. Skipp, to The Summit County Medical Economic Association, January 25, on "Medical Economic Problems"; to the Quota Club, February 11, on "The Pure Food and Drug Law"; to the "Y" Men's Club, February 21, on "The Sex Factor in Human Life"; to the Beta Rho Gamma Club, February 25, on the same subject.

Dr. R. R. Morrall, to The Mothers' Club of the First Presbyterian Church, February 7.

Dr. S. H. Sedwitz, to the Riverside Hospital Staff, Warren, February 8, on "Spinal Anesthesia."

Drs. Skipp and W. K. Stewart, to the Stark County Medical Society, Canton, February 15, on "Medical Economics."

Dr. F. F. Piercy, to the Fort-nightly Club, February 16, on "Progress of Medicine."

Dr. M. H. Bachman, to the Round Table Club, February 18, on "X-ray in Modern Medicine."

Dr. P. R. McConnell, to the Jester Club, February 18, on "Venereal Diseases."

Dr. E. H. Jones, to the Parmalee Parent-Teachers' Association, February 19, on "Skin Diseases Common among Children of School Age."

*March*

## STAFF ACTIVITIES—YOUNGSTOWN HOSPITAL

By FREDERICK S. COOMBS, M. D.

A simplified terminology for the classification of inflammatory changes in the kidney was proposed by Dr. G. B. Kramer, pathologist of the Youngstown Hospital, in discussing the pathology of Bright's Disease at the monthly staff meeting, January 25.

He suggested that instead of acute, subacute, and chronic nephritis the terms first, second, and third stages be applied. Dr. Kramer pointed out that all of these patients have an attack of acute nephritis at one time or another, with subacute nephritis being likened to a nephritis, and finally the terminal stage of chronic nephritis sets in.

He described the gross and microscopic pathology of each stage, correlating the changes in the pathological picture with the alterations in physiology. Sooner or later all cases come to have a hypertension which is due to blocking of capillaries. In the first stage, he asserted, hypertension occurs in only one-third of the cases. Albumin appears in the urine due to the breaking of the renal filter, the glomerulus.

Vascular lesions of the kidney, or nephrosclerosis, is further subdivided into two groups—benign and malignant. Benign nephrosclerosis is the primary contracted kidney, he pointed out. These patients die of cardiac insufficiency or cerebral accidents. Malignant nephrosclerosis, which is associated with hypertension, also causes death from heart failure, coronary disease, or cerebral accidents. Few die of uremia.

Degenerative renal disease, or nephrosis, is very much like the second stage of nephritis. Here there is edema, albuminuria, and a pale swollen kidney. These patients die of intercurrent infection.

Dr. Kramer's lecture was illustrat-

ed with slides showing microscopic pathology.

\* \* \*

Weekly pathological conferences at the South Side Unit during the month of February have produced a number of interesting cases with the following distribution: pulmonary emboli (two); hemorrhagic encephalitis; cerebral hemorrhage; luetic aortitis and aneurism; psoas abscess; hypertensive heart disease with pulmonary infarcts; acute bacterial endocarditis; ovarian abscess with amyloid disease of spleen and kidney.

Some of the ideas which have been expressed in these cases are that pulmonary emboli are of two types—the massive, which produce suffocation, and the minute, bringing on shock; no digitalis early in coronary occlusion unless there is "delirium cordis"; myocardial degeneration does not always accompany a failing heart.

Discussion is becoming more enthusiastic without attempting to embarrass anyone.

\* \* \*

Among the changes in the Youngstown Hospital Staff for the coming year, Dr. J. F. Lindsay, formerly chief of one of the medical services, was elevated to the position of consultant in medicine. Three new medical chiefs were appointed. They are Dr. R. W. Fenton, Dr. E. C. Rinehart, and Dr. W. H. Bennett. Dr. Fenton succeeds Dr. Lindsay, while Drs. Rinehart and Bennett succeed Drs. W. W. Ryall and D. B. Phillips who became members of the emeritus staff.

Other appointments included Drs. Lawrence Segal, C. H. Warnock, and Sam Klatman to medical services, and P. H. Fusco to the pediatric service.

*March*

## OH, NURSE!

At the annual meeting of the Nurses' Official Registry, Miss Lucy Humason was elected chairman of the Board of Trustees and Miss Elizabeth Evans registrar for the year.

\* \* \*

There are now 108,956 members of the American Nurses Association. This is an increase of 30,396 since 1929. There are many graduate nurses not members of the A. N. A. and it is estimated that there are 153,443 practical nurses in the United States. Many of these practical nurses have no supervision as to training, wages or hours. In 1910 there was one nurse to every 1117 persons, but at the present time in Ohio there is one nurse to 273 persons.

\* \* \*

In Maryland, Dr. George Walker, one of the leading urological surgeons of Baltimore City, has interested himself in preparing and submitting a Bill to the Legislature for the improvement of the status of nursing schools and the better education of nurses. Dr. Walker has always been interested in social problems and has done much research work concerning venereal diseases and has made a recent study along nutritional lines among the poor whites of the south.

Many of the propositions in this Bill for nurses seem too radical to be adopted immediately, but some points that are brought up are equally pertinent to the conditions prevalent in many other states.

His principal points are: (1) state control of nursing schools; (2) eliminating nursing schools in hospitals having inadequate clinical facilities; (3) better preparation of those responsible for the education of nurses; (4) nursing schools should be removed from hospital control and should be governed by those with a thorough understanding of modern

educational requirements and methods.

The Bill attempts to equalize the practical nursing work done by the pupil nurses. A study of the curricula of the schools in Maryland (also other states) shows that (a) there is a great disproportion between the surgical nursing and medical nursing; (b) the nursing service in pediatrics in some schools is deficient; (c) the practical work in mental diseases needs to be augmented and greatly improved; (d) the opportunity for instruction in communicable diseases is limited; (e) the experience in dispensary and accident work is often missing. It surely would be highly advantageous if the work could be systematized and equalized by a governing board.

The Baltimore Evening Sun had criticised Dr. Walker's proposals and he countered by asking The Evening Sun if increasing the intelligence, the knowledge and the skill of a nurse who is constantly in charge of an acutely ill patient signifies a lack of progress.

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### Thanks, Mr. Councilman

H. E. McClenahan, M. D.,  
43 West Evergreen Ave.,  
Youngstown, Ohio.

Dear Sir:

Delighted to hear that City Council was able to do some good towards the Diphtheria Immunization Campaign.

I also want to thank you for your letter of appreciation for it is not very often that City Council receives any praise for the work that it does.

Any time that we can be of service to you, please do not hesitate to call upon us and if it is within our means we will be glad to go along with you.

Very truly yours,

M. J. KIRWAN, Councilman.

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COUNTY (From page 76)

ponderance of population, so as to preserve an equitable representation on this board. Ordinance-making powers in the field of health and the power of appropriation of funds for health purposes should be vested in the legislative authority of the county, who should give particular weight to the recommendations of the Health Board in these matters. Health and medical service which is incidental in other agencies, such as schools, should be put under the control of the Board of Health in so far as possible.

Great stress is made in the Commission's report relative to the need for unification of activities and concentration of authority in the field of public welfare through the establishment of a single county department of welfare. The Commission's recommendation for the appointment of a Welfare Board which in turn should appoint the Director of Welfare, establishes a set up very similar to that recommended for the Department of Health. Here again, we would suggest that the membership of such a Board should consist of at least one physician, one dentist and one registered nurse and these should be selected from lists submitted by the organizations representing the Medical, Dental and Nursing professions. Health and medicine are so intimately associated in all welfare activities that it would seem expedient to the most efficient and sympathetic administration of welfare work, that the members of these organizations whose training and mental processes have been most closely associated with these problems, should have a place on the Welfare Board.

*(To be continued)*

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**FOR RENT**—Office rooms for physician or dentist; heated. Very reasonable. 1006 Market St., opposite Pyatt St. Phone 39459.

*March*

OPINIONS (From page 77)

on treatment or prescribing not formulated and enforced by the organized medical profession.

\* \* \*

At regular intervals from varied sources comes the inquiry why "something isn't done" about this or that. We are confronted with problems and conditions that are not to a doctor's liking. Their solution is not born of the moment. Many of them will never be solved or adjusted until every doctor relinquishes the argumentative attitude for one of cooperative action and support.

If you render services at a discount or a split of the regular fee; if you serve in a clinic or dispensary where persons able to pay receive free service; if you are filling out insurance certificates for no fee; if you are failing to practice preventive medicine and stand by while parents take their children to health clinics; if you neglect to cultivate and enlighten your

senator and representative—if—well, if you fail to play an active part in your county society and your community you will find the answer is because of YOU. If all the "yous" would rally in support of your County Society, satisfactory solutions would be attained. Will "you" get busy? Will "you" go to work? File your answer at your next county meeting. — *Michigan State Medical Society Journal.*

Mother: You know, Geoffrey, Norma is nearly 17 years old, so today I had a frank discussion with her about the facts of life.

Father: "Ah! Did you learn anything new?"—*Everybody's.*

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## LET GEORGE DO IT? HE DID!

By D. H. S.

On February 12th, it was the extreme pleasure of the Mahoning County Medical Society to have as their guest-speaker, Dr. George Draper. The talk was very instructive to every one. At times speakers appeal to one particular class or group, on account of the marked limitation of the topic. This was not the case with Dr. Draper's lecture. Considerable comment was gathered after the meeting regarding the vocabulary and illustrations. This talk could have been very dry and monotonous had the speaker used high-sounding psycho-analytical terms. If in his illustrations he had drawn some complicated mental gymnastics the majority of the Society would have been reposing very peacefully.

Lectures of the type and caliber that Dr. Draper gave us are sure to make The Mahoning County Medical Society bigger and better.

### ANTIPHLOGISTINE

Muscular Rheumatism, neuritis, sciatica, lumbago, torticollis, as well as other forms of fibrositis, are the cause of a great deal of disability in all walks of life, with a corresponding economic loss.

In the physical treatment of these conditions, heat as supplied by a poultice of Antiphlogistine, which maintains a warm, even temperature for hours, may afford more grateful relief to the patient than any other measure.

By promoting correction of the local blood and lymph circulations it helps to relieve the inflammation and congestion, so that the pain is reduced and greater ease of movement follows.

Its therapeutic advantages, coupled with the plastic and adhesive nature of the Antiphlogistine, go far towards helping the patient to carry on efficiently with his daily tasks.

March

## HEALTH NEWS

By H. A. K.

Influenza in epidemic form continues in our community. A rapidly increasing number with signs of catarrhal inflammation of the upper respiratory passages, sudden onset with fever and often chills, aching of musculature, and feeling of debility and depression out of proportion to the duration of the illness and the severity of other symptoms, justifies assumption of an epidemic. These epidemics have occurred two successive years, with a lull of one year between since 1920; that is, every third year has found us fairly free of the disease.

Scarlet fever in January still shows a marked increase, to 4 times that of last year, 179 in the county, with 115 of these in Youngstown.

At this time of the year, it would be well to freshen your minds on the notifiable diseases according to the Ohio Sanitary Code. These should be reported immediately to the Board of Health so that the fact of, and gravity of, epidemics may be properly evaluated and handled. Influenza and Pneumonia especially are not being reported.

Class "A": Chickenpox, diphtheria, influenza, lethargic encephalitis, malaria, measles, German measles, meningococcus meningitis, mumps, paratyphoid fever, pneumonia, poliomyelitis, scarlet fever, septic sore

throat, smallpox, tuberculosis, all forms; tularemia (rabbit disease), typhoid fever, undulant fever, whooping cough.

Class "B": Chancroid, gonorrhea, syphilis.

Class "C": Erysipelas, diarrhea and enteritis under two years of age; puerperal septicemia.

Class "D": Ophthalmia neonatorum, any inflammation of the eyes of the newborn.

Class "E": Anthrax, cholera, Asiatic; dysentery, food poisoning, foot and mouth disease, in man; leprosy, mild sickness, plague, rabies, in man; tetanus, trichiniasis, in man; typhus fever, yellow fever.

Class "F": Any disease or disability contracted as a result of the nature of the person's employment, such as, lead poisoning, anilin poisoning, and the like.

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### Medical Gleanings

By W. M. S.

Dr. R. M. Morrison is back at his job after being laid up for several days.

Dr. McReynolds is spending a couple of weeks at his home in Denver, Colorado.

Dr. Karl Allison is ill at the North Side Unit Hospital. He is recuperating nicely, and "they say" he is a very model patient, too.

By F. S. C.

Dr. H. E. Blott, who was a patient in the North Side Hospital, is back at his home again.

Dr. J. R. Buchanan, who left the city several years ago to do post-graduate work at the University of Iowa in Orthopedics, has returned and opened an office in the Central Tower.

Dr. S. M. Hartzell, who was seriously ill in the North Side Hospital a month ago, is now completing his convalescence with a cruise to Bermuda.

Dr. W. K. Allsop has the sympathy of all the Society in the loss of his mother, who recently passed away.

By S. J. T.

Mrs. R. E. Whelan is convalescing nicely from a recent major operation.

Dr. H. B. Thomas, former resident intern at St. Elizabeth's Hospital, is now in Gallipolis, as physician to a Federal Construction Work.

Dr. E. H. Chalker, brother of Dr. H. E. Chalker of Girard, has accepted a C. C. C. appointment. He is stationed in Portsmouth.

The scientific program at the February meeting of the staff of St. Elizabeth's Hospital consisted of a symposium on "Diseases of the Thyroid." Papers were presented by Drs. J. G. Brody, F. W. McNamara, Saul Tamarkin and R. B. Poling.

Dr. J. Rosenfeld, suffering with a back ailment, is now in Florida. He is accompanied by his wife and expects to be away for about a month.

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We think S.M.A. is an excellent choice for infants deprived of breast milk because of its significant resemblances to breast milk. Even the fat of S.M.A. has the same character numbers and answers the same tests in the same way as does the fat of breast milk. Adaptation of the fats is practically impossible to achieve outside of a laboratory.

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**T**hat what you  
**G**ive is  
**R**eturned to you  
**A**s surely as  
**D**ay follows night—  
**U**sually with compound interest;  
**A**nd this applies especially  
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**E**ven more than ever before!

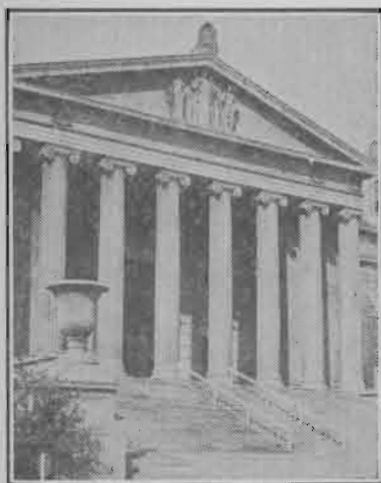
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POSTGRADUATE DAY  
Thursday, April 25, 1935

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Postgraduate Number  
**BULLETIN**  
of the  
Mahoning County  
Medical Society



STAMBAUGH AUDITORIUM

"Pity the man that grows not in knowledge."

*Shakespeare*

April, 1935

Volume 5

Number 4