

of the

Mahoning County Medical Society



Organized 1872

December, 1936

Volume 6



Number 1



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THE MAHONING COUNTY MEDICAL SOCIETY BULLETIN

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Published Monthly at 2218 Market St., Youngstown, Ohio.

Annual Subscription, \$2.00.

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PRESIDENT'S PACE

Another year end rapidly approaches and it is customary, and oftimes profitable, to pause at this time and take inventory. Also to consider progress made, things achieved, problems still unsolved and goals yet to be attained. The committee reports appearing in the following pages of this issue furnish a partial summary of this year's Society activities. Your officers and committee men have given of their time and energy to an extent which many of you do not realize. Council has had many meetings, often lasting until well after midnight, in the attempted solution of many and diverse problems. I wish to take this opportunity to gratefully acknowledge the aid and assistance rendered by all of those who have been active both in the promulgation and support of Society activities. To my successor I commend you all and I take the liberty of assuring him now of the continued and united interest and support of all. With best wishes for a merry Christmas and a very happy and prosperous New Year.

L. GEO. COE., M. D.



• BULLETIN

of the

MAHONING COUNTY MEDICAL SOCIETY

DECEMBER 1936



CLASSIFICATION AND TREATMENT OF SECONDARY ANEMIA

Before discussing the types of secondary anemias in detail there are certain symptoms and signs which are common to all of them and which I believe can well be mentioned. They are: headache, vertigo, faintness, increased sensitiveness to cold, irritability, lack of power of concentration, black spots before the eyes, tirmitis, increased pulse rate and palpitation, systolic murmurs, venous hums, low blood pressure, dyspepsia, shallow breathing, slight elevations of temperature, glossitis and nausea, lack of appetite, constipation alternating with diarrhea; low specific gravity of the urine with slight traces of albumin present or even anuria, amemorrhea, tingling of the fingers and toes. At one time it was thought that glossitis and tingling of the extremities were symptoms of just pernicious anemia, but it should be realized that a true secondary anemia can give these same symptoms.

In classifying the secondary anemias etiology is used as the criterion. Whatever the etiology may be it exerts its effect upon either the red cells leading to their increased destruction or upon the bone marrow leading to its suppressed activity. One

or both factors may be involved. Increased destruction of the red cells without suppressed activity of the bone marrow gives blood smears showing increased numbers of reticulocytes, more than the normal number of nucleated red cells. Young red cells called normoblasts and polychromatophylia of the red cells; while suppressed marrow makes all of these elements lessened or absent and in addition shows decreased numbers of granular leukocytes and platelers. This result as shown by blood smears is an aid to the correct classification of the secondary anemias.

Anemia following hemorrhage. This must be subdivided into acute and chronic hemorrhage. (1) The acute type, usually easy to diagnose, shows an early leukocytosis and slight rise of platelet count. Then in 6 to 12 hours the red cells and hemoglobin drop as the body fluids dilute the blood stream to make up blood volume. The red cells increase in member before the hemoglobin. In two or three days there is a reticulocyte rise and nucleated red cells are mone apparent on the smear. It is estimated that the red cells regenerate 70,000 daily at first then slower is time goes on. A donor who gives 500 cc. of blood will show a perfectly normal smear at the end of a week,

(2) The chronic hemorrhage type of secondary anemia is often more difficult to diagnose. There is no increase of platelets or lekocytes. The red cells may be normal in number but the hemoglobin lags far behind. Keefer has recently discussed the most common causes and lists them as (1) uterine; (2) hemorrhoids; (3) peptic ulcer; (4) hookworm; and (5) diaphragmatic hernia of the stomach which causes congestion of the mucosa and seeping of blood. In treating this type of anemia liver with iron seems to vield the best results. In regard to treating anemia associated with a chronic slow bleeding peptic ulcer Kellog and Mettier have recently shown that the degree of alkaline therapy is directly proportional to the degree of anemia, bearing out the fact that iron is not absorbed as well from the stomach in an alkaline medium as in an acid medium. Therefor, large doses of iron (120 grs. ammonium citrate) should be given. This also is another proof that iron is not absorbed well where there is an achlorhydria. In testing for achlorhydria the giving of histamine during the test is very necessary to prove or disprove achlorhydria. No results are absolute without it.

These gastro-intestinal causes of chronic hemorrhage show the necessity of examining stools routinely in diagnosing secondary anemias and, if indicated, doing a gastro-intestinal series to determine if possible the cause of bleeding.

2. Secondary anemia due to infection—seems to be due to either an increased blood destruction or a defective blood formation or both factors. In this type the red cells and hemoglobin are both low. The red cells are of the microcytic type. The nucleated red cells and reticulocytes may show regeneration depending upon the condition of the marrow. In general the blood regeneration is slow. The most common infections are tuberculosis, typhoid fever, acute rheumatic fever, all septicaemias, streptococci infections in general, spirochaetal disease, B. Welchi & Variola. These infections demonstrate the necessity of doing repeated blood counts in the presence of chronic infection to watch for an early secondary anemia. Iron and small repeated transfusions (200 cc.) are of value here.

3. In anemia secondary to intoxication one or both factors of decreased production or increased destruction are present. Listing some of the important toxins:

Lead poisoning with the typical basophilic stippling of the red cells and normoblasts showing the attempt of the marrow to regenerate. There is no effect on the white cells. The action of the lead is to alter the surface tension of the red cells by precipitating insoluble lead phosphate and making the cells more brittle. This causes them to break up with the least trauma occurring in the circulation. In treating this type lead storage in the bones is induced with high calcium diet until the blood is regenerated, then slow deleading is allowed to recur.

Benzol has a selective depressant action on the entire hematopoietic system but the granular leukocytes (polys. basophile and eosinophiles) are the first affected even to a total absence of these cells from the smears. Soon the red cells show typical microcytic anemia with rare or no reticulocytes. There are no nucleated red cells and the platelets are reduced in number on the smear. The hemorrhages are due to the action of the benzol on the endothelium of the capillaries and to blood platelet destruction. The symptoms of benzol poisoning may not become apparent until several months after exposure.

Potassium chlorate and arsenic give rapid destruction of all elements and transfusion is the only method of value.

Radium acts by small amounts of radium salts being stored in the bones which in turn lead to slow destruction of marrow cells. The blood picture is essentially the same as benzol. The other poisons are phenylhydrazine used for polycythema vera and often leads to secondary anemia; tinitrotoluol (T. N. T.) in munition works may cause so severe a red cell destruction that jaundice is pronounced. Nitrobenzene or shoe dye poisoning has likewise a destructive action on the red cells.

Hence the importance of occupational history.

Chronic nephritis leads to a toxic secondary anemia due probably to the retained metabolic products. Likewise neoplasms and wasting diseases cause a microcytic anemia due probably to absorption of toxic products.

Pregnancy leads to two forms of anemia. The microcytic or true secondary form occurs in the mid-pregnancy. It is usually associated with some or total achlorhydria. Krause has recently reported from a series of cases of hypochromic anemia in pregnancy that 17 out of 30 had complete posthistamine gastric anacidity even after parturition and 10 had little or no free hydrochloric acid. Davies and Shelley had only 2 of 20 patients with normal gastric acidity. Though deficient diets enter as a cause here the insufficient absorption of iron means more iron should be supplied with dilute hydrochloric acid. The giving of .5 gr. of ferrous sulphate daily during the last trimester of pregnancy is good prophylaxis.

The other type of anemia of pregnancy is the macrocytic type. This occurs in late pregnancy or immediately follows parturition. It may be fatal in 4 to 6 weeks. On a smear it looks like Addison's anemia though the color index may be below one.

There is an increase of white cells, however, which serves to differentiate it from Addisonian anemia. The blood smear may show reticulocytes as high as 11% as well as megaloblasts and normoblasts. The treatment is plenty of liver and transfusions if needed. Following parturition the anemia often disappears never to return.

- 4. The parasites which can lead to a secondary type of anemia are malaria, hookworm, entamada hystolitica and a fish tapeworm called diphyllobothrium latum which is different than the bothriocephalus latum. These parasitic possibilities show the necessity of studying blood smears carefully and of examining stools carefully for parasites in diagnosing a secondary anemia.
- 5. Certain bone marrow diseases lead to a secondary anemia characterized by signs of intense crythropoiesis due to crowding out of young forms from the marrow by the invading disease. The two most common are:

 1) myelocytic leukemia; 2) multiple tumor metastases to bone marrow.
- 6. Secondary anemia of infants and children. a) The erythroblastic anemia of infancy. The other (b) is the so-called milk diet type due to lack of other food factors. In both of these anemias the use of copper in the form of 1/60 to 1/100 grain copper sulphate daily with iron is of value. This is the only secondary anemia where copper in conjunction with iron seems to be indicated.
- 7. Anemias of dietary deficiency. In treating the secondary anemias there are certain factors which may be used as a criterion of the efficiency of the treatment being used. These are the increase of the red cells, hemoglobin and reticulocytes. Many associate an increase of reticulocytes with just liver therapy. It is also a valuable guide for the efficiency of iron therapy.

The treatment par excellance of the secondary anemia group is the giving of adequate doses of iron, Iron and ammonium citrate is one of the old standbys but only recently have we realized that to give adequate dosage means 90 to 120 grains a day.

Iron of any type is absorbed from the stomach and also probably from the first portion of the duodenum. I have mentioned the necessity of sufficient dilute hydrochloric acid for absorption of iron in those cases of achlorhydria, whether moderate or severe.

Reduced iron requires a very definite acidity for absorption and there are cases of actual retention in the caecum.

Various iron preparations can be given intravenously or intramusculary, the latter often having more arsenic than the former. This method is only used for those who cannot take iron orally, however, and they are very few.

Recently Patek reported some cases of secondary anemia in which he had used chlorophyll. His results do not justify its use.

Copper and iron seems justified only in the milk anemias of children.

Using liver and iron together, as has already been mentioned, seems of value in the anemia of chronic hemorrhage. Also in the macrocytic anemias where there is as well a hypochromic factor.

Starkenstein and Heuber first called attention to the ferrous salts and now most authorities agree that ferrous sulphate can be given in 1/10 the amounts of iron and ammonium citrate and is absorbed with greater ease, so that 9 grains a day is considered adequate for the average case.

Many of the proprietary preparations on the market today have insufficient iron dosage recommended and only serve to line the pockets of the manufacturer with discouraging results to we practitioners.

In conclusion the sensible treatment of secondary anemia requires as accurate a diagnosis as possible *first*, then the choice of the proper form of iron in sufficient dosage and whatever other measures seem advisable.

Chart

- I. Anemia following hemorrhage;
 - (a) acute hemorrhage,
 - (b) chronic hemorrhage.
- II. Secondary to infections.
- III. Secondary to intoxications.
- IV. Secondary to parasites.
- V. Secondary to bone marrow disease.
- VI. Infants and children.
- VII. Diet deficiency.

Hemolytic Anemias

- 1. Congenital or familial;
 - (a) Hemolytic,
 - (b) Sickle cell,
 - (c) Erythroblastic in infancy.
- 2. Pregnancy.
- 3. Infections.
- 4. Chemical.
- Transfusion.

A plastic

- 1. Primary.
- 2. Secondary;

Exhaustion,

Benzol.

Irradiation.

Budget Committee Report

To the Officers and Members of the Mahoning County Medical Society.

Herewith wish to give you the Budget Committee report for the past year.

Several conferences were held with Chairman of the various committees relative to expenditures and received hearty coöperation from them. Think the disbursements were kept down to a minimum, but would suggest more coöperation of the various committee chairmen with the Budget Committee in the future.

M. H. BACHMAN, M. D., Chairman, Budget Committee.

READING LIST ON ENDOCRINOLOGY

General

Barker, Lewellys F., Editor. Endocrinology and Metabolism, D. Appleton & Co., New York, 1922. 5 volumes.

Engelbach, William. Endocrine Medicine, Charles C. Thomas, Springfield, 1932. 3 volumes and index.

Pituitary

Cushing, Harvey. Pituitary Body and Its Disorders, Lippincott, Philadelphia, 1912. (Now out of print and very valuable).

Cushing, Harvey: Papers Relating to the Pituitary Body, Hypophthalamus and Parasympathetic System, Charles C. Thomas, Springfield, 1932.

Calder, R. M. and Porro, F. W., Adenoma of Adrenal Cortex simulating Pituitary Basophilism (Cushing's Syndrome), Bull. Johns Hop. Hosp., 57:99-110, (August) 1935.

Silver, S., Simmond's Disease (Cachexia Hypophyseopriva). Report of case with postmortem observations and a review of the literature, Arch. Int. Med., 51:176-199, February, 1933.

Evans, H. M. and others. The Growth and Gonad-Stimulating Hormones of the Anterior Hypophysis, Cambridge University Press, 1934.

Thyroid

George Crile and Associates. Diagnosis and Treatment of Diseases of the Thyroid Gland, W. B. Saunders Co., Philadelphia, 1932.

Parathyroids

Cantarow, Abraham: Calcium Metabolism and Calcium Therapy, Lea and Febiger, Philadelphia, 2d edition, 1933.

Hunter, Donald. Critical Review: The metabolism of calcium and phosphorus and the parathyroids in health and disease, Quart. J. Med., 24:393-446, April, 1931.

Diabetes

Joslin, Elliott P., The Treatment of Diabetes Mellitus, Lea and Febiger, Philadelphia, 5th edition, 1935.

Joslin, Elliott P., A Diabetic Manual for the Mutual Use of Doctor and Patient, Lea and Febiger, Philadelphia, 1919.

Adrenals

Rowntree, L. G. and Snell, A. M. A Clinical Study of Addison's Disease, W. B. Saunders Co., Philadelphia, 1931.

Grollman, Arthur. The Adrenals, Williams and Wilkins, Baltimore, 1936.

Tice: Practice of Medicine, W. F. Prior Co., Hagerstown, Md. 10 volumes.

Small Books

Cameron, A. T. Recent Advances in Endocrinology, P. Blakiston's Son & Co., Philadelphia, 1935.

Grafe, Erich. Metabolic Diseases and Their Treatment, Lea & Febiger, Philadelphia, 1933.

Goldzieher, Max A. Practical Endocrinology, D. Appleton-Century Co., New York, 1935.

Zondek, Hermann: Diseases of the Endocrine Glands, William Wood & Co., Baltimore, 1935.

Hoskins, R. G. The Tides of Life, W. W. Norton Co., Inc., New York, 1933.

Glandular Physiology and Therapy, American Medical Ass'n., 1935.

Reese, Hans S., Poskind, Harry A. and Sevringhaus, Elmer L., Editors. 1934 Year Book of Neurology, Psychiatry and Endocrinology, Year Book Publishers, 1935.

Wilder & Wilbur: Yearly Article, Arch. Int. Med.

Journals

Endocrinology, published six times a year by Association for the Study of Internal Secretions, \$6.00 a year.

New York State Journal of Medicine. Symposium on Endocrinology, H. R. Geyelin, C. A. Elden, L. M. Davidoff, November 1, 1936.

SECRETARY'S ANNUAL REPORT

The business of the Society for the year was set in motion when President L. Geo. Coe called the first meeting of Council to order, January 9, 1936. Each committee chairman received instructions relative to their duties and what was expected of their respective committees.

The Economics Committee has again accomplished a full share of results. With the leadership of their chairman they were able to reach an agreement for a successful Medical Relief Program with the County Commissioners. This was done the first part of the present year. At the expiration of this agreement another one was made providing for Medical Relief during the latter half of the year. This plan with the Commissioners received widespread attention. It has been an aid to the local profession as well as to the relief patients.

The Mid-Year Organization Conference of the Ohio State Medical Association was held in Columbus, April 26, 1936. One hundred and seventy-five physicians from all parts of the state and representing the various County Medical Societies were in attendance. The purpose of this meeting was for the discussion of problems, chiefly economical, which are common to all. Mahoning County Society was well represented at this conference and three of its members took an active part in the program.

The Postgraduate Day held in the Stambaugh Auditorium April 30, 1936, was another success for the Society. The committee in charge are to be commended for their efforts. The success of these outstanding days for the Society requires ever-present vigilence. We are looking forward again to a similar occasion next spring.

The Home Talent programs fos-

tered by the organization are worthy activities. Local members have an opportunity to prepare and present papers on important medical subjects. In addition members of the profession are able to learn something of the qualification of their fraternity. Each of the two home talent meetings has been successful and those who presented papers are commended.

The various committees, the units of society organization, have been active throughout the year. The Public Health Committee has been virile in the drive on diphtheria immunization. This requires constant effort to secure a full measure of success. The Program Committee has furnished the members of the Society an array of talent which has been, as usual, enviable. It is no small treat to have the opportunity to listen to these masters. The Public Relations Committee has placed particular efforts in acquainting us with the Better Business Bureau. It is an organization with which we should have full knowledge. The Legislative Committee has come through with full honors again. This committee is ever vigilant. It is the light house of the local profession. If all counties were as fortunate as we in their selection of personnel of this important committee it would be easier to prevent laws fostered by the cultists. In addition the local legislators are willing to receive instructions from this committee.

The Speakers' Bureau has supplied essayists constantly for radio programs. This is no little task. The lectures to the radio public on health topics are well received. They represent a great deal of benefit. The Budget Committee is a new comer to the local Society. This group should have the cooperation of all other committees that it may judge the proper expenditures for the Society.

We cannot be unmindful of the numerous social advantages that were ours because of the activities of the Entertainment Committee. Not the least of these activities was the opportunity afforded us to be entertained by the Youngstown Sheet and Tube Co. recently. A luncheon, followed by a trip through the great mill was a real treat.

All of the other committees have been found ever ready to perform their function when necessary. No one has fallen down in their sacrifice for the local fraternity.

It is noteworthy to list the names of those outstanding medical essayists, who answered the invitation during the past year. They are:

Dr. Elliott P. Joslin, Harvard University.

Dr. Soma Weiss, Harvard University.

Drs. Walter W. Palmer, Allen O. Wipple, Dana W. Atchley, and Alvan L. Barach, of Columbia University.

Dr. Willis F. Manges, Jefferson Medical College.

Dr. Charles C. Wolferth, University of Pennsylvania.

Dr. Raymond C. McKay, Cleveland City Hospital.

Dr. L. C. Kress, New York Institute for the Study of Malignant Diseases.

Dr. A. J. Lanza, Metropolitan Life Insurance Co.

Drs. Roy and Perry McCullough, Cleveland Clinic.

Council has been busy during the past year answering the various questions that arise in the organization. Some of these are of minor importance but many major problems were solved. The society "Bulletin" was incorporated this year, the plan for

medical relief was fostered; a plan for the care of venereals was promoted. This is still an unsolved question. Disciplinary action was taken with a few of the members; caused the hospital plan proposed by the Citizens Intelligence League of America to be investigated; and suggested a representative to serve on the Committee to Amend the City Charter. This represents but a fraction of the organization business that comes before Council.

The postgraduate course in Endocrinology consisting of 10 lectures has been a real success. Drs. Roy and Perry McCullough of the Cleveland Clinic were the instructors. The course has been well attended. Much valuable information was brought to the door of the local profession. These are opportunities, the cost of which is a mere pittance as compared to their value.

We are not unmindful that the Councillor for the Sixth District of Ohio is a member of our local Society; Dr. Wm. Skipp has been very active throughout the year. He has attended meetings in all the units of his District. He has promoted an active speakers' bureau for the Sixth District. Should speakers be desired at any time, communicate with the Secretary of the Union Medical Association of the Sixth Councillor District. The secretary's name is Dr. Kent M. Harrington, 218-A Ohio Bldg., Akron, Ohio.

It is Councillor Skipp's desire that those who have problems to be presented to the Council of the State Medical Association, should communicate with him relative to the same and in writing. Interest and suggestions to the officials of the Ohio State Medical Association are appreciated.

ROBERT B. POLING, Secretary.

Public Health Committee

The work of the Public Health Committee throughout the present year consisted mainly in carrying on the diphtheria immunization campaign that has been more or less successfully conducted for the past several years.

A short, intensive campaign was conducted for two weeks during the month of May, and, again during the month of November "The Fall Round-up" lasting one week was instituted. However, immunization against diphtheria was carried on continuously throughout the entire year, and the short, intensive campaigns were used as "an urge" to stimulate the doctors and their aides and the public at large, to a greater effort to rid Mahoning County entirely of diphtheria.

Youngstown City Council appropriated \$2,000.00 to pay the doctors a fee for immunization of the indigent of the city. Diphtheria toxoid and report cards were furnished free by the Boards of Health for all cases. The report cards were to be mailed to the Board of Health as a permanent record. Patients who were unable to pay signed the report card and the doctor doing the immunization in the city of Youngstown will be reimbursed at the rate of 50 cents per immunization.

The media for advertising these Public Health activities were through the local newspaper and radio channels, supplemented by announcements at various meetings and clubs. Cards were displayed in 150 stores throughout the city of Youngstown and a preportionate number distributed in Campbell, Poland, and Struthers. A special letter regarding the campaigns was mailed to individual members of the County Society. The welfare organizations (Visiting Nurses Association and the School Nurses) gave valuable aid throughout the year and deserve special mention for their services.

Immunizations given this year in:

Campbell	. ,					287
Poland						
Struthers						250
City of Youngstown						3231
Mahoning County .						490
Total						4281

As a result of this campaign 4281 immunizations were given throughout the county. This represents tabulations of reports received previous to November 23, 1936. This number is a decided increase over previous years and your committee feels grateful to all concerned in making the campaign a success.

The Syphilitic Clinic was discussed by your committee but due to lack of detailed information no definite action was taken.

Respectfully submitted,

E. H. NAGEL, M. D., Chairman.

Postgraduate Day Committee

Your Postgraduate Day Committee is grateful to the officers and members of the Medical Society for their splendid coöperation in making our last meeting successful both culturally and economically.

Special thanks is due Miss Herald of the Youngstown Printing Company for her cheerful aid in matters not particularly related to her own specialty. Mr. Ralph Reynolds of the Stambaugh Auditorium was indeed a very gracious host at the meeting.

Our pioneering in Postgraduate Day Assemblies has lead to many similar meetings in other counties. It behooves us, therefore, as pioneers to make our meetings extraordinary if we are to continue as leaders. Perhaps it would not be amiss to make changes in management, to encourage more outside attendance.

M. W. NEIDUS, Chairman, Postgraduate Day Committee.

December Meeting

Annual Election of Officers

Officers To Be Elected

President Elect Vice President Secretary Treasurer Councillor Delegates to State House of Delegates (2) Alternate Delegates to State House of Delegates (2)

Coming Events

January 9th, 1937

ANNUAL BANQUET YOUNGSTOWN CLUB

SPEAKER

MR. ELLIS MANNING

of the House of Magic, The General Electric Research Laboratory Schenectady, N. Y.

February 16th, 1937

Chemo-Therapeutic Aspects of the Treatment of Pneumonia.

DR. W. W. G. McLACHLAN

Pittsburgh, Pa.

Publicity Committee Report

Dr. L. G. Coe, President, Mahoning County Medical Society Home Savings & Loan Bldg., Youngstown, Ohio.

Dear Dr. Coe:

I hereby submit a report for the Publicity Committee of the Society.

We have endeavored to publicize each one of our scientific meetings by placarding the bulletin boards at each of the hospitals with notices in advance of each meeting.

For the campaign against diphtheria in the spring a series of three articles were prepared by this committee and these were submitted for publication in both local papers. We also assisted in the publicity for our annual postgraduate day and mailed out advance announcements, with the program, to every doctor who attended our annual postgraduate meeting in 1935. For the Anti-Diphtheria campaign which was begun November 7, 1936, another series of articles were prepared and submitted to the local paper.

I wish to take this medium of thanking Mr. George Madtes of the Youngstown *Vindicator* staff, who has been more than kind in assisting us with all publicity through his newspaper.

I wish to offer two suggestions for

the coming year:

1. That as Chairman of the Publicity Committee be appointed one of the numerous men in our Society who can himself paint or print notices for

our monthly meetings.

2. That a definite ruling be established by Council as to what publicity should be given to men who read articles over the radio or who speak before lay groups. For the past few months the names of some of our members have appeared much more often than has been the custom in the past. Please understand, however, that this has not been the fault of the speakers as this was done without the intent or knowledge of these speakers.

This matter should be taken up with the contact man from the newspaper office.

Respectfully submitted,
DR. JOSEPH ROSENFELD,
Chairman, Publicity Committee
Mahoning County Medical Society.

Report of the Medico-Legal Committee

At a meeting of the Committee during the month of September, the Committee was informed that two physicians were indicted, tried and convicted, and the Committee was asked as to their recommendation as to procedure. After a lengthy discussion, it was decided that this fell within the jurisdiction of the Licensing Board for their action.

It was also brought to the attention of this committee, that a physician in another county had complicated a medical-legal situation by the fact that he had not complied with the registration law. General Code No. 22 requires that every physician, before starting to practice, register at the Probate Court.

The younger physicians who have started practicing the last two or three years, unless they are positive they have registered, had better call at Probate Court and make sure of registration.

> D. H. SMEUTZER, M. D., Chairman, Medico-Legal Committee,

Report of the Program Committee

The Program Committee has been successful in giving the Society two excellent home-town programs, one arranged by Dr. McElroy and the other by Dr. Sisek. In addition, a highly successful postgraduate course on endocrinology has been given by Drs. Roy and Perry McCullagh of the Cleveland Clinic following arrangements made by Dr. McCann As to the regular monthly meetings, the Society best knows whether the program committee has been successful or not.

E. C. BAKER, Program Chairman.

Legislative Committee Report

Dr. L. G. Coe, Home Savings & Loan Bldg., Youngstown, Ohio.

Dear Dr. Coe:

Following the practice of the previous two years, the work of the Legislative Committee has been carried on through the Public Health Committee of the Allied Profession. Our most important task this year has been the interviewing of candidates prior to the election as to their attitude on health and medical matters. Eighteen candidates whose duties if elected would bring them in contact with medical and health matters were examined and after weighing their attitude, a report was made to the Society by a letter sent to the membership just prior to the election.

Throughout the year constant contact has been maintained with State Representatives and State Senators regarding pending legislation and like-wise with county and municipal officials. Satisfactory coöperation has been obtained at all times from these

officials.

A meeting with the successful candidates at the recent election will be arranged for early in December, at which time pending legislation and problems apt to arise pertaining to medical practice and public health will be discussed with them.

Sincerely yours,

O. J. WALKER, Chairman, Legislative Committee.

Housing & Library Committee Report

The activities of the Housing & Library Committee may be summarized as follows:

The full committee met in March and carefully considered the advisability of seeking new quarters for the holding of the regular meetings of the Society. Several different possible meeting places were considered but it was unanimously decided that none of them offered superior facilities to the Youngstown Club.

Further, the advisability of building or leasing a permanent home for the Society was considered but it was deemed unwise at this time.

In April, at the Annual Postgraduate Day program the committee assisted Dr. Scarnecchia, Business Manager, in arranging space for the scientific exhibits.

In November, the committee purchased a lamp for illuminating the blackboard used at our regular meetings.

Respectfully submitted,

H. E. McCLENAHAN, Chairman Housing & Library Committee.

The Speakers' Bureau

The Speakers' Bureau has been used very little throughout the year, though occasionally a speaker was requested by some organization. The members of the Society have not registered with the Bureau as has been repeatedly requested and neither have they notified the Bureau when they made a speech at any function. Consequently very little credit could be given to these efforts. It is to be hoped in the future that there will be better cooperation in this regard.

Radio Talks

Nov. 9, 1936, Dr. E. H. Nagel— Title: "Vaccines and Serum."

Nov. 16, 1936, Dr. W. W. Ryall—Title: "Why Have a Health Department."

Nov. 23, 1936, Dr. C. S. Lowendorf—Title: "Chronic Arthritis."

Nov. 30, 1936, Dr. H. E. Hathorn
—Title: "Mental Hygiene in Home
and School."

Radio talks have been given by the members of the Mahoning County Medical Society, throughout the year, each Monday morning at 11 o'clock. The material for these talks is furnished by the American Medical Association of Chicago, Illinois,

JOHN NOLL, Chairman.

Medical-Economics Committee

L. G. Coe, M. D., Home Savings Bldg., Youngstown, Ohio.

Dear Dr. Coe:

I send you herewith the report of your Medical-Economics Committee for the second half of the year nineteen hundred thirty-six.

On August 10th your committee signed with the Commissioners of Mahoning County a new agreement for the medical care of Relief clients. This agreement to be in effect until Ianuary 1, 1937. The basis of payment is the minimum fee schedule of the Mahoning County Medical Society as introduced and approved in its regular assembly of September, 1935, with one exception: no payment is made for services rendered to relief clients in hospitals. This item remains to be adjusted by the incoming committee with the Commissioners who begin their term of office on January 1.

Disbursement for Medical Relief since July 1st, totals \$18,000.

A special report dealing with the problem of venereal disease control was submitted to the Society on October 13, and during the same month this committee received a welcome addition in the person of Dr. Earl H. Young.

I now acknowledge my indebtedness to the members of my committee for any accomplishment this year. They were willing at all times to do their share when called upon. I am indebted especially to my predecessor, Dr. Walter King Stewart, who has proven a wise counsellor and invaluable aid. I proffer my services to my successor with a desire to emulate Dr. Stewart's example.

Respectfully submitted,

EDWARD J. REILLY, M. D., Chairman.

NEWS ITEMS

Dr. William Skipp attended the council of the Ohio State Medical Association at Columbus on November 28. At this meeting the following appointments were made:

- Dr. Heberding Laboratories Advisory Committee of the Medical Department of the Industrial Commission.
- 2. Dr. O. J. Walker was appointed to the Legislative Committee.
- 3. Dr. W. K. Stewart to the Relief Committee of the Division of Economics of the Ohio State Medical Board.

Dr. William Skipp recently addressed the Kiwanis Club of Hubbard on "Ancichrnology."

Dr. Gordon Nelson has just returned from a three weeks postgraduate course in surgery at Massachusetts General Hospital.

Drs. Schweble, Neidus, Hathorne, Askue recently attended a three day G. U. Clinic at Cleveland.

Dr. Charles Alba McReynolds and Miss Gertrude Onions, bride and groom of a few days are at home to friends on College St., Poland, Ohio.

The regular staff meeting of the Youngstown Hospital was held on the evening of November 10, with 40% of the staff in attendance. Dr. Bunn and staff were in charge of the program with Drs. Monroe, Deitchman, and Noll.

A complete account of their excellent papers on "Anemia" will be published in a later issue of the *Bulletin*.

Weekly conferences in Pathology are being held at the South Side Hospital on Fridays, at 11:30. You are missing a great deal if you don't attend.

Dr. Sam Sedwitz is spending a week in New York and Philadelphia studying "Peripheral Vascular Diseases."

MEMBERSHIP OF THE MAHONING COUNTY MEDICAL SOCIETY 1936

Alden, A. H. Allsop, W. K. Altdoerffer, J. Allan Arundel, Thomas J. Askue, Chester M. Autenreith, W. C. Axelson, O. A.

Badal, S. S.
Bachman, M. H.
Baird, Julia M.
Baker, E. C.
Baker, W. Z.
Banninga, H. S.
Basile, J. M.
Beight, C. H.
Belinky, Morris H.
Bennett, W. H.
Berkson, M. I.
Bierkamp, F. J.
Blott, H. E.
Birch, J. B.
Boyle, P. L.
Brant, A. E.
Brody, J. G.
Brown, J. D.
Brandt, A. J.
Brungard, O. D.
Buchanan, J. R.
Buchanan, J. R.
Buchanan, J. U.
Bunn, W. H.

Campbell, C. H.
Cavanaugh, J. M.
Cervone, Louise
Clark, C. R.
Cafaro, S. Raymond
Cliff, E. W.
Coe, E. W.
Coe, L. G.
Colbert, W. J.
Colla, Joseph
Coy, W. D.
Couchman, Lloyd
Curtis, W. S.

Davis, George Y. Deitchman, Louis Deitchman, Morris Dilorio, Enrico Dreiling, B. J. Dulick, John F.

Evans, W. H., Elsaesser, Armin

Fenton, R. W. Fisher, J. L. Frye, A. E. Fussellman, H. E. Fusco, P. H. Fuzy, Paul J. Getty, L. II. Goldblatt, L. J. Goldcamp, E. C. Goldcamp, S. W. Golden, T. K. Goldstein, M. B.

Hake, E. H.
Hall, Joseph C.
Hall, L. L.
Hall, Raymond
Hardman, J. E.
Hartzell, S. W.
Harvey, J. P.
Hathorne, H. E.
Haulman, O. W.
Hauser, C. D.
Hayes, M. E.
Heberding, John
Heeley, J. H.
Himman, A. V.

Jones, E. H. Jones, W. L.

Kaufman, H. B. Kaufman, P. M. Kennedy, P. H. Keyes, J. E. Kirkwood, E. E. Klatman, S. J. Kocialek, M. J. Kramer, G. B. Kling, Herman Kupec, J. B.

Landers, T. A. Lawton, O. M. Leimback, P. H. Lewis, John S. Lindsay, J. F. Lowendorf, C. S.

McReynolds, C. A. Mahar, P. J. Mahrer, M. P. Malock, L. J. Marinelli, A. Mariner, J. S. Mermis, W. O. Merwin, F. S. Mever, N. N. Middleton, R. H. Miller, H. C. Monroe, F. F. Montgomery, D. E. Montani, A. C. Morrison, R. M. Mossman, R. G. Morrall, R. R. Moyer, L. H. Miglets, A. W. Mylott, E. C.

McCann, J. N.
McClenahan, H. E.
McConnell, P. R.
McCurdy, S. M.
McElhaney, B. B.
McElroy, W. D.
McNamara, F. W.
McOwen, P. J.

Nagel, E. H.
Nagel, Joseph
Nardacci, N. J.
Neidus, M. W.
Nelson, Gordon
Nelson, J. B.
Nesbir, Dean
Norris, Claude B.
Noll, John

Osborne, H. M. Odom, R. E.

Parillo, Guy A.
Patton, S. G.
Patrick, H. E.
Phillips, D. B.
Philips, L. E.
Piercy, F. F.
Poling, R. B.
Porembski, Joseph
Ranz, W. E.
Redd, W. C.
Reed, C. M.
Reilly, E. J.
Rinehart, E. C.
Rosapepe, A. R.
Rosenblum, A. M.
Rosenblum, Morris
Rosenfeld, Joseph
Rothrock, D. M.
Rummell, R. W.
Russell, J. M.
Rysell, J. M.
Rysell, J. M.

Scarnecchia, J. L. Schmid, Henri Scofield, Charles Sedwitz, S. H. Segal, Lawrence Shaffer, J. W. Sherbondy, J. A. Skipp, William M. Schwebel, Samuel Slosson, C. H. Smith, I. C. Smith, P. B. H. Sisek, Henry M. Speck, M. H. Stefanski, Clarence Stewart, C. C. Stewart, W. K.

Tamarkin, Samuel Tamarkin, Saul J. Taylor, W. X. Thomas, E. R. Tidd, A. C. Tims, W. J. Turner, W. B.

Vance, J. C.

Walker, J. A. Walker, O. J. Wallace, C. R. Warnock, Chas. Warnock, G. C. Welch, H. E. Welsh, W. A. Weinberg, H. W. Weidermier, Carl H. Weller, L. W. Wenaas, E. J.

Yauman, C. F. Young, Earl H. Young, W. P. Youngblood, L. C.

Zeve, H. S. Zervos, M. S. Zimmerman, J. S. Associate Members

Clark, Wm. A. Chalker, H. E. Maxwell, H. D. Robinson, J. W. Tuta, Joseph Williams, D. R. Williams, Paul Wilkinson, J. B.

Honorary Members Bennett, James Gibson, R. D. Whelan, R. E.

THE OHIO STATE MEDICAL ASSOCIATION COLUMBUS, OHIO BULLETIN TO COUNTY SECRETARIES

Bulletin No. 20

November 24, 1936

Important Memo Regarding Social Security Act Taxes and Physicians; Please Transmit This Information To All Your Members

This information supplements the article on Social Security Act taxes and the medical profession, published on pages 260-261 of the March, 1936, issue of The Journal.

Various Social Security Act forms are being distributed at this time to millions of employees and employers.

What is the status of physicians?

A physician who employs one or more persons in his office is an employer as defined by the Social Security Act. He, as well as his employee or employees, are subject to the taxing provisions of Title No. 8 of the Act which deal with old-age benefits.

A physician in the classification of "employer" should fill out the Social Security forms. So should his employee or employees. Forms should be filed with the local postal authorities or the district Internal Revenue Office.

Unless a physician has eight or more employees, he is exempt from Title No. 3 of the Act relating to unemployment compensation and is not subject to the payroll tax imposed by that part of the Act.

The old-age benefit taxes imposed on employers and employees apply to wages paid on or after January 1, 1937. Tax returns must be filed and the tax paid monthly. Information returns must be made quarterly. The present tax is 1% and is imposed on the first \$3000 of wages paid to any employee during the calendar year.

Detailed information on forms, taxes, procedure, etc., will be found in Regulations 91 relating to employees' and employers' taxes under Title No. 8 of the Social Security Act. If a copy of Regulations 91 cannot be obtained from local postmasters, one may be obtained from the Collectors of Internal Revenue of the respective Ohio districts.

CHARLES S. NELSON, Executive Secretary.

Treasurer's Report

Dr. L. G. Coe, 224 N. Phelps St., City.

Dear Dr. Coe:

Possints.

Below you will find financial report for the audit period beginning November 17, 1935, and ending with November 27, 1936, prepared by a Public Accountant and approved by the auditing committee of our Society.

Receipts:	
Bank Balance as of November 16, 1935 Receipts from Bulletin\$3302.36	\$ 151.73
Receipts from Meetings & Affairs 588.10	
Receipts from Postgraduate	
Receipts from dues	
Overage not accounted for in the distribution of receipts	4
Total receipts for period	7740.09
Total cash available	\$7891.82
Disbursements:	
Bulletin expense	
Meetings & Affairs expense	
Postgraduate Expense	
Dues paid to State Association 985.00	
Secretarial Expense	
Stationery, Office Supplies & Miscellaneous Expense 443.02	
Total Expenses	
Transfer to Union Bank Savings Fund 500.00	
Total Disbursements	7389.22
Balance as of Nov. 27, 1936, on Checking Acct. in Union National Bank	\$ 502.60
Other Funds:	
First Federal Savings & Loan Bank\$5395.87	
Union National Bank, Savings Account 2971.64	
City Trust & Savings Bank	
Mutual Holding Company	
Total\$8746.85	

Bulletin Receipts & Disbursements

	Receipts	Disbursements
December, 1935\$	214.39	\$ 194.65
January, 1936	256.17	297.77
February	188.40	213.96
March	266.22	214.39
April	202.20	218.58
May	643.79	200.87
Tune	241.94	212.99
July	102.95	238.05
August	382.50	212.84
September	241.50	197.30
October	233.70	194.84
November	328.60	195.84
Tovelloci	320.00	175.01
\$	3302.36	\$2592.08
Meeting Receipts & Disbursements		
		Disbursements
November, 1935	63.87	\$ 134.26
December, 1935		38.63
January, 1936—Annual Banquet	119.23	250.00
February		79.55
March		112.67
April		35.92
May		83.95
June		20.00
August		28.59
September		20.00
September Outing		34.75
October		40.50
November		32.50
November Endocrinology Course	405.00	
	102.00	
\$	588.10	\$1314.49
To summarize, in plain words, the Society assets	are as	follows:
Deposits & Savings Account		
Federal Savings & Loan Bank		\$5395.87
The Union National Bank		
City Trust & Savings Bank		
Mutual Holding Company		124.56
Checking Account		
The state of the s		502.60
Union National Bank	623	302.00
Total		\$9249.45
Other Assets		
Notes Receivable for Dues		\$ 65.00
Accounts Receivable from Bulletin Advertising		582.40
Grand Total		\$9896.85
Liabilities		and the same
A-20023-5120-51-0		
		December

During the year \$500.00 was added to our permanent fund. We were able to do this on account of profit from the *Bulletin* and Postgraduate day and not from receipts from dues.

I wish to thank all the members for their prompt payment of dues and the Bulletin and Postgraduate Committees for helping the Society finances.

I am not a candidate for reëlection to this office, and in retiring I wish

to make several suggestions:

(1) That the Bulletin funds be handled as a separate account. This will facilitate the bookkeeping and also provide an independent reserve for the *Bulletin*.

(2) Our social functions usually result in a deficit to the Society and are a drain on the treasury. If possible, the outings and annual banquet

should be put on a self-sustaining basis.

(3) That savings account be divided among the various local banks so

that no account shall be over \$5,000.00, and thus be insured.

(4) That the reserve fund be kept intact and increased when possible so that in the future it may form a nucleus for a building fund for a home of our own.

It has been a pleasure to serve you and a Society which holds the State record for prompt payment of dues as well as in many other lines of activity.

Respectfully submitted,

L. S. DEITCHMAN, Treasurer.

ENJOYABLE OUTING

The Mahoning County Medical Society and the Corydon Palmer Dental Society were the guests of the Youngstown Sheet & Tube Company, on Thursday, Nov. 19, 1936.

The members gathered at the plant offices at 12:00 noon where luncheon was served to nearly 200. Dr. F. W. McNamara expressed the appreciation of the Societies for the courtesy shown and introduced the Vice President in charge of operations, Mr. W. B. Gillies. Mr. Gillies sketched the growth and development of the company. He also gave figures as to the amount of money invested in the Campbell plant and the amount put into it during the depression, to rehabilitate the plant and put it in condition to compete in the modern production of sheets. He sketched the plan of organization of the plant workers into an organization for the amicable adjustment of wages, working conditions, and sickness and accident benefits. He expressed the management's willingness to meet any and every fair demand for increase in wages and improvement in working conditions, as worked out by this organization, but he emphatically declared against attempts on the part of outside labor organizations and agitators to arouse the minority of discordant workers into a belligerent force.

Following Mr. Gillies' address, the visitors were conducted into the plant under the guidance of Mr. Gillies, Mr. Welch, Mr. Smith, Mr. Badger, Mr. Stanier and others of the operating department, and shown through the open hearth, the hot roll mills, and the cold strip mills. This was an enlightening experience to most of us, and we came away with a fuller appreciation of the vital part this company plays in the economic welfare of our community, and of the humanitarian way in which the management safeguards the well-being of the men.

Thank you, gentlemen of the Youngstown Sheet & Tube Company, for a very pleasant and instructive

afternoon.

PHYSICIANS AND OLD AGE PENSION TAXES UNDER THE SOCIAL SECURITY ACT

Preliminary procedures are under way to make effective the old age benefit provisions of the Social Security Act. The regulations that have been promulgated by the Bureau of Internal Revenue looking toward the assembly of the mass of detailed data with respect to the employers and employees from whom the taxes are to be collected are of immediate interest to physicians.

Each person who on November 16 was the employer of one or more persons, subject to the exceptions noted, must have reported that fact prior to November 21 to the postmaster from whose post office the employer obtained his office or business mail. He must also have made application on form SS-4 for the assignment of a number - an "identification number" to be used for identification purposes in connection with the collection of taxes under the act. Physicians who were employers on the date named were required to comply with this requirement. If they failed to do so they should now communicate with their local postmasters for instructions as to how to proceed to make the delayed application. A physician who became an employer after November 16 must also apply for an identification number within a period of thirty days after the relationship of employer and employee is established. This application, the regulations provide, must be made to the field office of the Social Security Board in the area in which the office of the physician is situated or, in the absence of such field office, to the Social Security Board at Washington, D. C.

Persons who were employees on November 24 are likewise required to obtain numbers, called "account numbers," by filing application on form SS-5, on or before December 5, with the local postmaster. Persons becoming employees after November 24 must also file application for numbers thirty days after the employment begins. While physicians generally are considered, under the regulations, as independent contractors and consequently not subject to the taxes imposed on employees, if physicians are employed on a full time or part time salary basis they are apparently to be considered as employees. Such physicians must file application for "account numbers" on form SS-5. As employees they are subject to the tax on employees, and their employers must pay the employer's tax with respect to them.

Certain employments do not come within the old age benefit provisions of the Social Security Act. Among the exceptions are agricultural labor, domestic service in a private home, casual labor not in the course of the employer's trade or business, service performed by an individual who has attained the age of 65, service performed in the employ of the United States or of any state or subdivision or instrumentality of either, and service performed in the employ of a corporation, community chest, fund or foundation organized and operated exclusively for religious, charitable, scientific, literary or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual. Physicians who employ only persons embraced within these excepted employments or who are themselves engaged in such excepted services are not required to make application for identification or account numbers.

Employers' and employees' taxes will be collected by means of monthly returns to be filed by employers, who not only must pay to the local collector of internal revenue the tax imposed on employers but also must deduct from the wages of their employees the employee's tax and transmit that also to the collector. The first returns will be due not later than March 1, 1937, covering wages paid for services rendered during the month of January. The regulations that have been promulgated cover in detail the records that must be kept by employers, the method of executing returns, the information they must contain and other matters relating to the tax. Physicians should promptly familiarize themselves with all the requirements, so that as much confusion as possible may be avoided. The Bulletin will from time to time offer suggestions to aid physicians in meeting the requirements of the act.

QUICK—Call a DOCTOR

Let us help you meet such emergencies, keeping your car fit.

BILL HARKLESS

SERVICE STATION

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Not Worth It

A boy entered a grocery store and said to the storekeeper:

"Gimme a dime's worth of asafetida."

The storekeeper tied up the package and the boy said: "Dad wants you to charge it."

"All right; what's your name?"

"Shermerhorn."

"Take it for nothin'," he said. "I ain't goin' to spell 'asafetida' and 'Shermerhorn' for no dime."

Be a Bit of Sunshine

Work a little, sing a little,
Whistle and be gay;
Read a little, play a little,
Busy every day;
Talk a little, laugh a little,
Don't forget to pray;
Be a bit of sunshine
All the livelong day.

-Author Unknown.

Correction

The report of the proceedings of the Interstate Medical Association meeting at Minneapolis, which appeared in the November Bulletin, was submitted by Dr. A. M. Rosenblum. The Editor regrets, exceedingly, the error in authorship.

CHURCH HILL REST HOME

Recommended by Physicians for Convalescents and Invalids

THELMA MEDLEY

Phone 74951

Belmont Ave. Extension

Doctors are welcome to inspect our home at any time.

Membership Committee Report

The following men were taken into the Society during the year 1936:

BANNINGA, H. S., 204 Arlington Street.

Belinky, Morris H., 2004 Elm Street.

BUCHANAN, J. R., Central Tower.

KUPEC, J. B., Central Tower.

Odom, R. E., Dollar Bank Bldg.

RUMMELL, R. W., 1506 Market Street.

WENAAS, E. J., Dollar Bank Bldg.

The following member lost during the year by death:

PROUDFIT, S. R., 66 Warren Ave.

The following applicants were referred to council at the last meeting:

CONTI, MARTIN E., Home Savings and Loan Bldg.

LEVY, DAVID H., Keith Albee Bldg.

STEINBERG, MORRISH, Dollar Bank Bldg.

SHERK, A. B., cor. Robinson Road & Short St., Campbell.

WEAVER, SAMUEL WOOD, Home Savings & Loan Bldg.

McGowan, Joseph F., Home Savings & Loan Bldg.

The Mahoning County Medical Society has at this present report 199 members in good standing. There are 8 associate members, 2 honorary members.

Respectfully submitted,

LAURENCE SEGAL, Chairman.

Auditing Committee

Dear Doctor Coe:

We have this day audited the books and statement of the treasurer of the Mahoning County Medical Society covering the past year, and find that all receipts and disbursements, together with his report are correct in every detail.

Yours respectfully,

A. E. FRYE, M. D., Chairman.

DR. M. H. BACHMAN announces the removal of his office and X-ray Laboratories on January 1, 1937, from 314 N. Phelps to 908 Central Tower.

PATRONIZE
OUR
ADVERTISERS
AND MENTION

THE BULLETIN



ALKALINE WATER

NOT A LAXATIVE UNIFORM STRENGTII—PURITY

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New York City

PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN

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Get your patient's credit rating before extending unlimited credit.

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1204-05-06 Central Tower

Phones 4-4513

Pulmonary Pathology

especially of the exudative and congestive type, so outstanding in

PNEUMONIA

involves the pulmonary capillaries.

ANTIPHLOGISTINE

with its retained heat, medication and hygroscopic qualities, tends to re-establish the capillary circulation, to replace congestion with active hyperemia, to remove toxic products and restore normal gaseous interchange across the respiratory epithelium.

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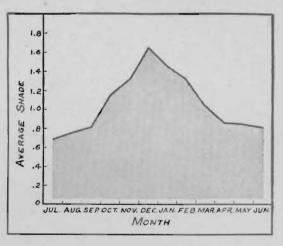
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