The Bulletin

Vol. XXXII—No. 9 • Youngstown, Ohio • September, 1962

BLUE SHIELD

CAMPAIGN REPORT:

20,000 MORE ENROLLED IN 65 AND OVER PLAN!

This was our second attempt in two years to provide Medical-Surgical Protection for this age group. The results were extremely gratifying . . . Thank You For Helping.

TWO OUT OF THREE GROUPS

. . . contacted and informed are converting to the more adequate "Preferred" and "Major" plans. However, many groups remain to be contacted while others are indecisive and have not acted. Your influence has been a major factor in our success and we ask that you continue to help us, so that more of your patients may take advantage of the better protection plans offered.

YOUR HELP IS MOST APPRECIATED . . . THANK YOU!

OHIO MEDICAL INDEMNITY, INC.

3770 North High Street, Columbus 14, Ohio

OFFICERS AND COUNCIL

OFFICERS

C. W. STERTZBACH, Pres.
3610 Market Street

ASHER RANDELL, Pres.-Elect
402 Mahoning Bank Bldg.

A. K. PHILLIPS, Imm. Past-Pres.
1005 Belmont Ave.

C. E. PICHETTE, Secy.
1005 Belmont Ave.

H. P. McGREGOR, Treas.
North Lima, Ohio

B. C. BERG, Editor
Youngstown Hosp. Assn.

Council		Delegates	Alt. Delegates
FRANK GELBMAN	R. B. McCONNELL	ASHER RANDELL (1962)	R. R. FISHER
H. J. REESE	F. A. RESCH	P. J. MAHAR (1963)	FRANK GELBMAN
M. S. ROSENBLUM	R. J. SCHEETZ	JOHN J. McDONOUGH (1964)	H. P. McGREGOR
JACK SCHREIBER	C. K. WALTER	G. E. DeCICCO (1965)	C. C. WALES

Representative to the Associated Hospital Service: J. M. RANZ

Executive Secretary: H. C. REMPES, JR.

TABLE OF CONTENTS

Vol. XXXII—No. 9 **September, 1962**

From the Desk of the President - - - - - - 298

Editorial - - - - - - - - - - - - 299

Legislators and Physicians - - - - - - - - 300

The Doctor's Fee - - - - - - - - - - 303

Youngstown to Host Surgeons - - - - - - - 311

Heart Meeting in Cleveland - - - - - - - 312

Bulletin Board - - - - - - - - - - 315

From the Bulletin - - - - - - - - - 319

Happy Birthday - - - - - - - - - - 320

ADVERTISERS' LIST

American Ambulance Co. 302
Blair's 316
Bowman, Inc. 307
Brown's Drug Stores 304
Butler, Wick & Co. 321
Chaney Pharmacy 316
Debald & Co. 309
Flynn's Pharmacy 309
Isaly's 323
Lederle Laboratories 318
Lester's 321
Lilly 317
Lyons Physicians Supply .... Cover
Mahoning Pharmacy 310
Maico 314
Parke-Davis 296
Schering 301
Smith, Kline & French 313
Stillson & Donahay Agency, Inc. 305
Squibb 322
Thornton's 309
Waldhorn's 307
White's Drug Stores 310
Youngstown Limb Co. 307
Zemmer 310

in urinary tract infections... the most common pathogens respond to

CHLOROMYCETIN®

(chloramphenicol, Parke-Davis)

That the urinary tract is especially vulnerable to invasion by gram-negative pathogens is an observation often confirmed. Also amply documented[1-5] is the finding that many common offenders in urinary tract infections remain susceptible to CHLOROMYCETIN.

In one investigator's experience, chloramphenicol has maintained a wide and effective activity range against infections of the urinary tract. "It is particularly useful against the Coliform group, certain Proteus species, the micrococci and the enterococci."[2] Other clinicians draw attention to the "frequency for the need" of CHLOROMYCETIN inasmuch as "...a high percentage of *Escherichia coli* and Klebsiella-Aerobacter are sensitive to it."[1] Moreover, enterococci, other streptococci, and most strains of staphylococci exhibit continuing sensitivity to CHLOROMYCETIN.[1]

Successful therapy in urinary tract infections is dependent upon accurate identification and susceptibility testing of the invading organism, as well as the prompt correction of obstruction or other underlying pathology.[6]

CHLOROMYCETIN (chloramphenicol, Parke-Davis) is available in various forms, including Kapseals® of 250 mg., in bottles of 16 and 100. See package insert for details of administration and dosage.

Warning: Serious and even fatal blood dyscrasias (aplastic anemia, hypoplastic anemia, thrombocytopenia, granulocytopenia) are known to occur after the administration of chloramphenicol. Blood dyscrasias have occurred after both short-term and prolonged therapy with this drug. Bearing in mind the possibility that such reactions may occur, chloramphenicol should be used only for serious infections caused by organisms which are susceptible to its antibacterial effects. Chloramphenicol should not be used when other less potentially dangerous agents will be effective, or in the treatment of trivial infections, such as colds, influenza, or viral infections of the throat, or as a prophylactic agent.

Precautions: It is essential that adequate blood studies be made during treatment with the drug. While blood studies may detect early peripheral blood changes, such as leukopenia or granulocytopenia, before they become irreversible, such studies cannot be relied upon to detect bone marrow depression prior to development of aplastic anemia.

References: (1) Katz, Y. J., & Bourdo, S. R.: *Pediat. Clin. North America* **8**:1259, 1961. (2) Malone, F. J., Jr.: *Mil. Med.* **125**:836, 1960. (3) Ullman, A.: *Delaware M. J.* **32**:97, 1960. (4) Petersdorf, R. G.; Hook, E. W.; Curtin, J. A., & Grossberg, S. E.: *Bull. Johns Hopkins Hosp.* **108**:48, 1961. (5) Whitaker, L.: *Canad. M. A. J.* **84**:1022, 1961. (6) Martin, W. J.; Nichols, D. R., & Cook, E. N.: *Proc. Staff Meet. Mayo Clin.* **34**:187, 1959.

PARKE-DAVIS

PARKE, DAVIS & COMPANY, Detroit 32, Michigan

SEPTEMBER MEETING

Tuesday, September 18, 1962

MURAL ROOM

BUSINESS MEETING

Free Buffet Dinner

6:00 p.m. Social Hour

6:30 p.m. Free Buffet Dinner

7:30 p.m. Meeting

Send your reservation to:

Mahoning County Medical Society
245 Bel-Park Building
1005 Belmont Avenue
Youngstown 4, Ohio

GOLF MEET

MEDICAL-DENTAL BUREAU

Youngstown Country Club—September 27

POSTGRADUATE DAY

Wednesday, October 24—AKRON

From the Desk of the President

GRIEVANCE COMMITTEE — THEIR PROBLEMS

With the Senate tabling the president's Medicare Bill we have gained a temporary respite. We hope our actions will further delay any future similar legislative proposals. Our future success will depend largely on the prudence, consideration and attitude we are all so capable of sincerely demonstrating to our patients and citizens at large.

Being familiar with the problems our Grievance Committee has had to solve over the past eight months, I feel it my duty and responsibility to convey some of my observations and thoughts to you. I sincerely hope they will be of value to you and our profession.

On several occasions the representatives of insurance companies have questioned the fees of several of our members. Thus far the committee's stand and opinion has been that this is a matter to be worked out between the insurance company and the patient, or the patient and the physician. I sincerely hope that when a fee is questioned by either, the physician will show the courtesy becoming our profession and give a logical basis for his charges. Failing to do this is not in keeping with the true spirit of understanding and consideration for which our profession is noted. A fair and just fee, average for the community, is seldom if ever questioned. If and when it is, only a moment or two is required to give a logical justification. An inadequate insurance coverage in itself should not deter you from quoting your usual fair and average fee. Contrasting this a liberal insurance program should certainly not invite an over charge. This is not only embarrassing to the Grievance Committee but extremely damaging to the prestige of our entire membership.

A problem which exists elsewhere and which I hope we are never asked to explain, had to do with referred hospitalized patients becoming unnecessarily obligated to more than one physician. I'm sure any committee would be hard pressed to justify the referring physician's charges for a daily "hello" in an uncomplicated case and these visits are not at the family request or deemed necessary by the physician accepting the referral. The hospital chart should easily determine if such visits are for something more than the patient's welfare. When a patient, out of any necessity, needs the services of more than one physician for his or her well being, the family should be so informed immediately. To first learn, while convalescing at home, that these little daily bedside chats are for something more than his or her welfare leaves the feeling of a slightly over-sized bitter pill stuck in the "craw" of the patient or the one financially responsible.

The best public relations man that money can buy is the one you see every day in the mirror. I am confident our patients and citizens will help us in the next fight to keep medicine free if we show them the consideration and kindness they have learned through the years to associate with their doctor and his profession. We can not fail them!

—C. W. Stertzbach, M.D.
President

BULLETIN of the Mahoning County Medical Society

Published Monthly in Youngstown, Ohio
245 Bel-Park Bldg. 1005 Belmont Ave.

Annual Subscription $2.00
RIverside 6-8431

The opinions and conclusions expressed herein do not necessarily represent the views of the Editorial staff or the official views of the Mahoning County Medical Society.

Volume XXXII **September, 1962** **Number 9**

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

Editor
Ben C. Berg, M.D.

Associate Editors

George L. Altman, M.D.
William H. Bunn, M.D.
Leonard P. Caccamo, M.D.
Alexander Calder, M.D.
Gabriel E. DeCicco, M.D.
James L. Fisher, M.D.
Robert R. Fisher, M.D.
Samuel F. Petraglia, M.D.
Joseph W. Tandatnick, M.D.

Editorial

"Left-overs"—Good Cooks or Bad

It is sometimes said the left-overs are a problem only to bad cooks—that good cooks find them an asset.

There are many "left-overs" from the recent Medicare struggle—we must be good cooks and use the "left-overs" to advantage.

The Legislative committee has collected some of these "left-overs" in an important, concise report which the Bulletin is most anxious to present.

Last month's editorial dealt with some of our duties as Doctors and our responsibilities to self and patient.

We must now expand our interests and participation to include our Community level. To be heard and be heeded on issues that touch on our interests we must hear, heed, *and be heard* on issues of community interest. We must become involved in "Government."

Read the report of your Legislative committee in this issue—and as good cooks mix and blend these "left-overs"—important lessons to be learned.

LEGISLATORS AND PHYSICIANS

(Members of the legislative committee of our society interview all local candidates for the legislature. Some opinions and impressions are worth reporting.)

Legislators are surprisingly well informed. The old stereotype—the cigar smoking, baby kissing, ward heeler who knows nothing except how to get elected—is not true.

A legislator feels that when a group is not "for" him, the group is "against" him. Of course, everyone is guilty of this human tendency.

Legislators cannot comprehend that a medical society is not and cannot be a political action group.

Legislators are far more sensitive and responsive to their constituents than the groups that represent their constituents. We should reply upon our own direct contacts with legislators as well as the state medical association.

* Legislators are not only keenly aware of any support and opposition, but also are sensitive to constituent reactions after a legislative vote. For example, they like to answer a letter asking for explanation of why they voted for a measure that a constituent opposed. They, just as any other person, react negatively to a letter of open protest and insult—but not to a reasonable letter of dissatisfaction that asks for clarification and explanation.

The legislators would like to meet physicians at informal meetings—after election. They desire to meet us for an exchange of ideas, not to make speeches. They desire to know us—they meet with groups of teachers, bankers, mechanics, nurses, etc. They have not been to a medical society meeting.

Legislators desire to inform physicians, through each society as well as the state office, regarding all pending medical and health legislation. This is not some special privilege—they do this for all associations. If they provide this service, physicians as individuals and society committees must take more action in government. Legislators dislike the word "politics"; they like "government."

What are their criticisms of physicians?

* Physicians are not interested in government—physicians are interested only in specific issues that directly effect them. We took an active role regarding "medicare" but have done nothing, for example, regarding local water pollution, a program for retarded children, the increasing cost of state mental hospitalization.

* Legislators react that physicians try to dictate when they desire some legislative action and do nothing when they could offer informed opinions and leadership regarding general problems related to medicine.

These observations and opinions are worth some consideration. Action or inaction must be the choice of each individual in our republic.

—*Frank Gelbman, M.D.*

(—The Editor —these paragraphs are of particular importance.)*

METRETON® tablets

Schering

brand of corticoid-antihistamine compound

combined antiallergic action for a therapeutic "plus" effect

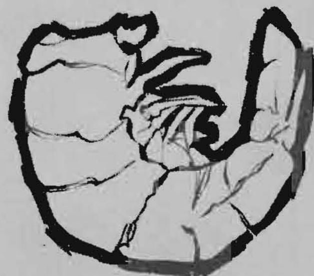
"Meti"® steroid + Chlor-Trimeton® + ascorbic acid

for optimal anti-inflammatory and antiallergic action in low-dosage combination with...

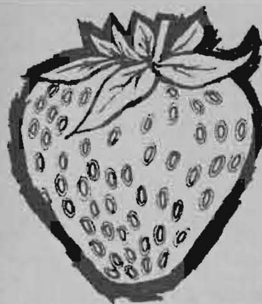
unexcelled for rapid and prolonged relief from hay fever and other allergies and...

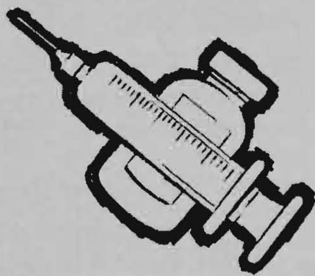
to help counter stress and avoid vitamin C depletion

supplied: METRETON Tablets, bottles of 30 and 100. Each METRETON Tablet contains 2.5 mg. prednisone, 2 mg. chlorpheniramine maleate and 75 mg. ascorbic acid. "METI",® brand of corticosteroids. CHLOR-TRIMETON® Maleate, brand of chlorpheniramine maleate.

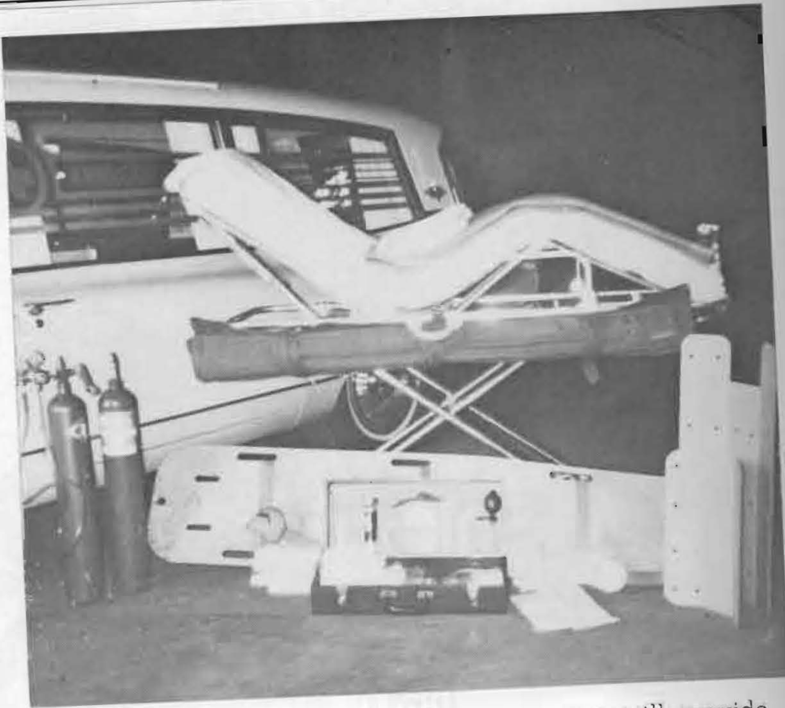


adds up to more positive results





in severe hay fever, asthma, urticaria, perennial rhinitis, allergic dermatoses and other allergies



The finest equipment and elaborate training will provide the utmost in patient care and comfort.

We include the following equipment in all our ambulances:

- ★ BACK BOARDS
- ★ SPLINTS
- ★ REEVES STRETCHERS
- ★ OXYGEN INHALATION EQUIPMENT
- ★ ADJ. HI-LO COTS
- ★ ASPIRATORS
- ★ MOUTH-TO-MASK RESUSCITATORS
- ★ COMPLETE FIRST AID KITS

"The Youngstown Area's Best Equipped Ambulance Service"

AMERICAN AMBULANCE COMPANY

DONALD P. DOEPPING, *Owner and Manager*

Phone: RI 3-1121

981 ERIE STREET YOUNGSTOWN, OHIO

Member
"International Rescue and First Aid Association"

THE DOCTOR'S FEE

Why is the surgeon's fee more for a cholecystectomy than for an appendectomy? Why does the internist charge more for a first call on a coronary thrombosis case than to a sufferer from hay fever? Why is a visit to a psychiatrist more costly than one to a general practitioner?

These are questions organized medicine must be prepared to answer fully and the answers must be sound, unless we are willing to accept what various third parties choose to have us receive, not only from them, but from our patients in whatever will be left of private practice. There are three approaches to finding the answers.

1. Law of supply and demand. This is simple in a truly free economy, but unworkable in a country where the recompense of the farmer depends on governmental regulation of acreage and parity payments, where the wages of the laborer and mechanic are set up by negotiations between union and management, and where business activity is controlled by governmental manipulation of the money market. Whether this is good or bad is not part of the discussion. One cannot, however, expect the law of supply and demand to operate in an era of fast-moving price changes with a commodity, such as a doctor, which takes twelve years to produce.

2. The "going rate." This is the current answer, and it is a poor one, as evidenced by the constant complaints, and the pressures being exerted to change the going rate. The rate is kept up by imponderables that the third parties choose to ignore, such as the benefit of free choice of physician, the improvement in medical performance under the stimulus of competition among doctors for that choice, and the personal interest and sense of responsibility on the part of doctors in response to the faith implicit in that choice.

3. A cost-accounting of medical service. This is not only scientific, as befits a discipline such as medicine, but essential in this day of living by negotiation, legislation, and bargaining for everything. We may not like to bargain, but the alternative is to accept a third party's evaluation of our worth.

The hardest problem facing any young doctor today is learning how much to charge. Can we help him, and ourselves, by analyzing what goes into medical service and how much each factor is worth in terms of dollars?

(1). Overhead. It is easy enough to calculate the gross overhead from the income tax returns, but a cost accountant would insist on breaking it down for specific activities. Are the office and equipment and personnel used on the basis of an eight-hour day or the doctor's more usual ten-hour day? Does the rural practitioner make a penny out of a call way out in the country after he has included as part of the overhead of that call not only the gasoline and deterioration of the automobile and the overtime he pays his help when seeing the patients in the office he could have seen while making the call, but also the patients he lost to his colleague while out on the call, or the laboratory or X-ray work he missed doing and getting paid for? It is easy to establish the overhead for the year, or even the month, but it is essential to establish the true overhead for the *average work hour and for the specific surgical operation* or *medical procedure*.

(2). Amortization of education cost. This is made up of two parts: (a) the actual cost of the education since graduation from liberal arts college; to include residency training in a specialty (less salary received), and (b) the loss of earning power during those years, both by personal effort and by investment of the money spent for the education. This total must be

divided by a specific number of years which will take into consideration the slow start a doctor makes. This must be in comparison with his college classmate of equal ability and intelligence who went into industry, where a graduated increase in salary is given periodically. Once the annual figure is obtained, the monthly, weekly, and hourly value can be established, to be added to the cost of practicing medicine.

(3). Time spent in the procedure. The average cholecystectomy takes longer than an appendectomy. But the average labor and delivery of a child takes five to ten times longer than either. An office visit can consist either of a detailed history and careful examination or a brief "If you are not getting better we'll double the dosage." A hospital visit can mean a two-hour close observation of the patient's reaction to an injected drug or a brief greeting and a perfunctory glance at the temperature chart. Yet the insurance company makes very little distinction between these various services. The doctor, chained to the philosophy of the "going rate," may be grossly overpaid for some of his services, but is woefully underpaid for others. If he spends an hour in the office with one case offering a real diagnostic problem for which his fee is limited to five dollars, he makes it up by the fees collected for "shots" given by his office nurse. The trouble is that the patients who pay excessively for the injections complain and scream for socialized medicine, while the diagnostic problem patient has no concept of the bargain he received.

The fact that doctors' annual net income is of high order indicates that this process of robbing Peter to pay for Paul's bargain is not hurting the doctors' pocketbooks, at least not yet. However, there are two very bad features to it. The first should make the responsible labor union executives very uncomfortable. The doctor's good income is due largely to overtime work without due consideration of the forty-hour week law for which they fought so hard as a matter of principle or the "time-and-a-half for overtime"

BROWN'S DRUG STORES

NOW ON THE CENTRAL SQUARE

in the

Union National Bank Bldg.

and

FOUR CONVENIENT NEIGHBORHOOD LOCATIONS

1841 OAK ST. YOUNGSTOWN	2000 CANFIELD ROAD YOUNGSTOWN
5106 SOUTHERN BLVD. YOUNGSTOWN	114 S. BROAD ST. CANFIELD

principle. The fee for an appendectomy is the same whether it is done at 10 a.m. or at 2 a.m. Which is just another way of robbing Peter to pay for Paul's bargain. The other bad feature is that the Peters in the country are the ones who are complaining of the high cost of medical care and the Pauls are helping them because "a doctor is supposed to be available any time of the day or night." Gratitude of a patient for night calls does not help send the doctor's children to college, and the "third parties" who control our fees are not interested in gratitude.

(4). Insurance The doctor, almost alone in this country, must make his own provision for his disability due to sickness, or accident, his old age, and the protection of his widow and children. The doctor's college classmate works for a company with sick-leave pay, pensions, and Social Security. Almost every member of a labor union gets the same in the form of "fringe benefits" over and above his hourly wage. The cost accountant figuring what a doctor should charge must include this cost as a justifiable factor in the fee.

(5). Skill brought to bear on the case. This is a concept which, although difficult to evaluate in dollars, is accepted legally as a justifiable factor in determining a fee. Insurance companies ignore it. An appendectomy is an appendectomy. A hospital visit is the same whether for a coronary occlusion or a poison ivy blister. Much as patients love to dramatize the gravity of the illness from which they recover or have been saved, they consider the doctor a highwayman if he charges for more than the time actually spent, or the "going rate." This factor is really made up of two components, *the actual skill of the doctor, and the dangers inherent in the condition treated.*

To try to rate or classify the skill of doctors would be impractical, impolitic, and repugnant. In general there is a self-evaluation which is accepted if it is not too unrealistic, and over a period of years the free choice of

℞ FOR PEACE OF MIND.

You are aware of the tremendous investment made in your education and training for your medical career.

You want that big investment safeguarded.

Our business is to properly insure it for you.

CONSULT

Stillson & Donahay Agency, Inc.

Income Insurance Underwriters

2400 Market Street — Room 202

Phone ST 2-5250

physician principle tends to correct errors in the self-evaluation. Division into specialists and general practitioners is a solution with many imperfections, even though the public, and certainly the specialist, have accepted it. The various American Boards exercise some control over crude categories of skill, but actually they certify little more than adequate training, and the portion of the doctor's fee which reflects amortizaion of his education costs takes up a little of the differential.

But the other side, the gravity of the case which calls for certain compensable skill to be brought to bear, is somewhat measurable. A total hysterectomy is worth more than a subtotal, because it is more difficult to do, requires more skill to perform, and carries more surgical risk to the patient. The accurate diagnosis and prompt treatment of typhoid fever warrants a higher fee than the treatment of spastic colitis, because people die of the former more often than of the latter. A skillful midforceps rotation may save an infant's life even though the doctor gets not one penny more for the delivery. Open-heart surgery commands a large fee because it is new and dramatic and requires an investment in training. Should not the basis of the fee rest at least partly on the mortality of the patient without the skill brought to bear to correct the condition? With all the morbidity and mortality statistics available for the many ills the flesh is heir to, could not a rational scale of the gravity of the disease or procedure be worked out? Certainly the doctor considers it when he sends a bill, but the patient doesn't understand it and the third parties (and the insurance people, including Blue Shield) refuse to recognize it. Numerous "point" systems have been worked out and many are actually being used, but these are based again on the "going rates." Granted that actual evaluation or morbidity and mortality and complexity of procedure may be difficult, it *can* be done, provided there is *agreement on the principle involved.*

(6). Time spent in teaching or doing charity medical work. A fair estimate of the instruction obtained by medical students, interns and residents from doctors *receiving not a penny for their time spent,* is upwards of ninety per cent. Do doctors who give this time, usually during a productive part of the eight-hour working day, have a right to include the value of this time in their fees for work done in the remaining hours of the day? The labor union insists that the mechanic on an hourly wage gets paid full rates, even if he is asked to spend part of his time teaching an apprentice. The junior executive on a monthly salary is paid even if he spends half of his time teaching new employees their jobs. The doctor is entitled to recompense for this time and energy other than the satisfaction of carrying on a fine tradition at a sacrifice, or in the case of the free clinics, giving of himself to the desperately needy. As an example, a man spending four hours a day in free teaching or charity work, must be able to earn enough per hour in the remaining four hours to bring home a decent day's pay. Otherwise he must give up doing the free work.

Does he benefit from this teaching and charity service professionally? Of course he does, even if the I. R. S. will not recognize the fact. He develops more and more experience, has the advantage of dealing with large groups of cases, of frequently seeing types of cases he sees rarely in private practice. In teaching he organizes his thinking, is forced to keep up with recent advances, and is stimulated by the students. With improved professional thinking he can give his private patients a little better care, and thus is justified in including in his fee a portion of this extra time.

We, THE WALDHORNS, A.I.D., are dedicated to making your home lovelier. We get just as enthusiastic over making one "dull" room more interesting, as we do in decorating and furnishing an entire house. It's our challenge to make EVERY part of your home lovelier!

The Waldhorns

INTERIOR DECORATORS AND DESIGNERS

Members American Institute of Interior Designers

15 N. Chestnut St., Downtown

RI 3-2636

Courtesy Parking

PROSTHESIS
LEGS - - - ARMS

YOUNGSTOWN LIMB COMPANY

14 South Meridian Road
(at Mahoning Ave.—Route 18)
Youngstown, Ohio

Telephone SWeetbriar 2-2561

Rehabilitation for Amputees

Since 1918

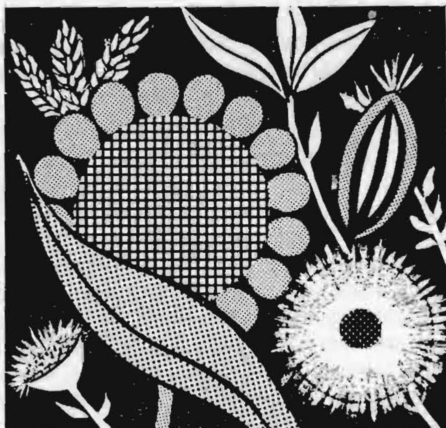
•

Specialists on Lower Extremity

•

FOUR CERTIFIED FITTERS

allergic



disorders

are the complaint of many of your patients at this season of the year. HISTREY—BOWMAN'S brand of chlorpheniramine maleate has exhibited a valued palliative action for the symptomatic relief of a variety of these disorders. Three forms of HISTREY are available:

- **4-mgm tablet—lemon flavored**
- **timed disintegrating capsule which releases medication over period of 8 to 12 hours.**
- **syrup—delightfully flavored**

The BOWMAN Pharmaceutical Catalog lists over 400 standard formulas in the BOWMAN line of quality pharmaceuticals. We would be pleased to send you one.

During August and September, see your BOWMAN Man or write for details of a special offer on HISTREY.

SINCE 1900
BOWMAN ®

BOWMAN
CANTON, OHIO
Service Centers in:
AKRON, COLUMBUS, CLEVELAND & LIMA, OHIO • SPRINGFIELD, ILLINOIS • PITTSBURGH, PA. • INDIANAPOLIS, INDIANA

If doctors stopped doing free hospital work and stopped teaching medical students, interns and residents without remuneration, the cities, counties and federal government would have to pay salaries to teachers and doctors to man the free wards. This is what makes socialized medicine prohibitive in its cost. This would raise taxes to astronomical heights. Therefore this factor must enter the fee of the private physicians, because in doing the teaching and the charity work he is saving the patient an increased tax burden and helping to provide that patient with a doctor for his children's children.

(7). Capacity of the patient to pay. There is some doubt whether this factor should be included in the fee. The arguments are realistic as well as philosophical. But when state medical societies ask doctors to accept a minimal fee for patients earning under an arbitrary amount per year, the state medical society is establishing the capacity of the patient to pay as a basic and valid principle. What is sauce for the goose is sauce for the gander. One might argue that the minimum fee should be double for those earning over an arbitrary amount per year. Or that the fee should be tied to the amount of life insurance the patient carries, or to his income tax. The I. R. S. expects a patient to pay three per cent of his income in medical bills before considering any relief in taxes. Might not the doctor use the same kind of a yardstick? If we accept the idea of minimal fees for patients in the low-income bracket, we are agreeing to the principle of a sliding scale of fees.

(8). Percentage of fees of other physicians. This, too, is a questionable factor. Some third party plans grant to a surgical assistant a specific percentage of the fee of the surgeon, whether he merely holds retractors in lieu of an intern or does a crucial part of the surgery. Some anesthetists charge a percentage of the surgical fee. Often internists who supervise the preparation of a patient for surgery or are present in case of a medical emergency, charge a percentage of the fee. This component of the doctor's bill is open to a great deal of argument even though it is acceptable under the "going rate" technique. In a similar way, predicating the medical or surgical fee on a percentage of the hospital bill is of dubious validity if we are to justify our professional charges.

In summary, with private medical practice under terrific pressure for changes in form and remuneration, the medical profession must present a unified and constructive program. One phase of this, if we believe in fee for service, is to provide a formula for setting fees, such that the public, the labor unions, the insurance companies, and the various "third parties" will see the justice of them. To do this we must analyze what goes into a fee in order to demonstrate the true monetary value of medical service. The factors which enter into the doctor's fee are:

1. What it costs the doctor to maintain his office, his equipment, his help, his automobile, his malpractice insurance, and all other items listed as "overhead." This must be broken down into a per hour and per procedure amount.
2. His investment in being a doctor, the cost of his education from the day he left college until he hangs out his shingle, and the loss of income had he spent that time and money in another field.
3. His hourly net wages, based on the time actually spent with pay-patients, either seeing them in the office or the hospital, operating on them, or traveling to and from their homes. "Time and a half for overtime" ought to be considered.
4. The value of the "fringe benefits" which the doctor has to pay for out of his own pocket.

5. The responsibility he takes for saving a life or safeguarding health through the special skill he has and the seriousness of the case on which he risks his reputation.
6. The time, energy, and devotion he expends in caring for the indigent without charge and in teaching the next generation of doctors without recompense. In so doing he is rendering a public service, which is unrecognized by the "third parties."

THORNTON'S

QUALITY LAUNDRY * DRY CLEANING

AND

FUR STORAGE

*

234 Belmont Avenue RIverside 4-0155

DeBALD & CO.

OFFICE SUPPLIES and
BUSINESS FURNITURE

CODO Carbons and Ribbons
Southworth Papers

1109 Wick Ave. Phones: 746-0597 — 746-0598
YOUNGSTOWN, OHIO

INVITATION TO VISIT — —

FLYNN'S PHARMACY

- PRESCRIPTIONS
- PHYSICIANS' SUPPLIES
- DELIVERY SERVICE

3634 Market St. RX—STerling 2-4805

DON'T DELAY — REGISTER TODAY

Be sure that you are registered to vote. In order to show that physicians are good citizens and interested in good government, every doctor in Mahoning County should get out and vote next November 6th. But remember — you can't vote if you are not registered, so go to your Mahoning (or Trumbull) Board of Elections and register before the deadline of Sept. 26.

RALPH
P. WHITE

WHITE'S DRUG STORES

RALPH P.
WHITE, JR.
(Bob)

We will fill any prescription — including . . .
— AID FOR AGED — WELFARE — and VETERANS —
as you direct, Doctor — in any of our 5 stores

— WE DELIVER —

Filling Prescriptions
Is What We Do BEST!

First with the Newest in Prescription Drugs

MAHONING PHARMACY

MYRON (Mike) FISH—Owner

- Free Delivery
- Open Seven Days a Week
- Three Pharmacists to Serve You
- Injectables — Biologicals

1625 Mahoning Ave. SW 9-3017

CORALSONE

Enteric Coated

Each tablet contains:

Salicylamide ....0.3 Gm. Ascorbic Acid ....50 mg.
Prednisone ....0.75 mg. Aluminum Hydroxide ...35 mg.

ANTIARTHRITIC

Administration: Orally — Average adult dose, 2 or 3 tablets four times daily after meals and at bedtime.

Caution: Federal law prohibits dispensing without prescription.
For complete information, read package insert before using.

THE ZEMMER COMPANY Pittsburgh, Pa.

YOUNGSTOWN TO HOST SURGEONS

The state meeting of the Ohio Chapter of the American College of Surgeons will be held in Youngstown on Friday and Saturday, September 14 and 15. Dr. Stephen W. Ondash, past president of the Ohio Chapter, is Program Chairman.

Local physicians taking part in the program include: Dr. Gordon G. Nelson, who will preside at the Friday afternoon sessions; Dr. John J. McDonough, who will moderate the panel on Obstetrics-Gynecology; Dr. Oscar A. Turner, who will moderate the panel Neuro-surgery; Dr. William J. Flynn, who will participate on the panel on Current Trends in Management of Advanced Carcinoma; and Dr. J. K. Herald, who will participate in the Procto-Colonic panel.

Program participants from out of town include:

Artz, Curtis P., M.D., FACS, Assoc. Prof. Surg., University of Mississippi, Jackson

Ault, Garnet W., M.D., FACS, Prof. Surg., Georgetown University, Washington, D.C.

Clatworthy, H. William, M.D., FACS, Prof. Ped. Surg., Ohio State University

Davis, John H., M.D., FACS, Assoc. Prof. Surg. and Dir. Surgical Research, Western Reserve Univ., Cleveland

Eiseman, Ben, M.D., FACS, Prof. and Chairman, Dept. of Surg., Univ. of Kentucky, Lexington

Elliott, Daniel W., M.D., FACS, Assoc. Prof. and Dir. Surgical Laboratories, Ohio State University

Engel, William J., M.D., FACS, Staff, Cleveland Clinic Foundation, Cleveland

Evans, Arthur T., M.D., FACS, Asst. Prof. Surg., Cincinnati University

Giannestras, Nicholas J., M.D., FACS, Instr. and Clin., Cincinnati University

Green, Thomas H., Jr., M.D., FACS, Assoc. Clin. Prof. Ob-Gyn, Harvard University, Boston

Hamby, Wallace B., M.D., FACS, Assoc Prof. Frank E. Bunts, Educational Institute; Staff Cleveland Clinic

Hoerr, Stanley O., M.D., FACS, Div. Chairman and Staff Surgeon, Cleveland Clinic Foundation

Holden, William D., MD., FACS, Oliver H. Payne Prof. of Surg. and Chairman of Dept. Surg., Western Reserve University

Hollenbeck, Zeph J. R., M.D., FACS, Prof. Ob-Gyn, Ohio State University

Kelleher, John C., M.D., FACS, Dir. Plastic Surgery-Mercy Hospital, Toledo

Kieswetter, William B., M.D., FACS, Prof. Ped. Surg, Pittsburgh University

MacMillan, Bruce G., M.D., FACS, Assoc. Prof. Surg., Cincinnati University

Martin, Lester W., M.D., FACS, Asst. Clin. Prof. Surg., Cincinnati University

Mayfield, Frank H., M.D., FACS, Senior Attending Neurosurgeon: Good Samaritan, Christ and Bethesda Hospitals, Cincinnati

McDonald, Gerald O., M.D., FACS, Assoc. Prof. Surg., University of Illinois, Chicago

Pack, George T., M.D., FACS, Assoc. Clinical Prof. Surg., Cornell University, New York City

Phalen, George S., M.D., FACS, Asst. Prof. Frank E. Bunts Educational Institute, Cleveland

Poutasse, Eugene F., M.D., FACS, Staff, Cleveland Clinic and Instr. Frank E. Bunts Educational Institute

Ravitch, Mark M., M.D., FACS, Assoc. Prof. Surg., John Hopkins University, Baltimore

Sayers, Martin P., M.D., FACS, Asst. Clin. Prof. Surg., Ohio State University

Scott, Roger B., M.D., Assoc. Prof. Ob-Gyn, Western Reserve University, Cleveland

Siler, Vinton E., M.D., FACS, Clin. Prof. Surg., Cincinnati University

Stephenson, George W., M.D., FACS, Asst. Director American College of Surgeons, Chicago

Turnbull, Rupert B., Jr., M.D., FACS, Cleveland Clinic Foundation

White, William L., M.D., FACS, Assoc. Clin. Prof. and Chief of the Section, Plastic Surg., Pittsburgh University

Winters, Chester, M.D., Prof. and Dir. Division of Urology, Ohio State University

Zimmerman, Karl, M.D., FACS, Asst. Clin. Prof. Surg., Pittsburgh University

The meeting will take place at the Pick Ohio Hotel, beginning with an 8:00 a.m. registration in the Mezzanine. Saturday dinner will be held at 8:00 p.m. in the Grand Ballroom. Entertainment will include a choral presentation by the Men's Chorus of the Youngstown Sheet and Tube.

Officers of the Ohio Chapter are: Frank L. Shively, Jr., M.D., President; Stanley O. Hoerr, M.D., President-elect; Walter A. Hoyt, M.D., Treasurer; Tom F. Lewis, M.D., Secretary.

HEART MEETING IN CLEVELAND

Many physicians, scientists, professional health workers and interested laymen from Mahoning County will attend the annual meeting and 35th scientific sessions of the American Heart Association in Cleveland October 26 through October 28.

More than 50 Ohio physicians will participate in the clinical sessions, running simultaneously with 23 scientific sessions designed to meet the interests of specialists and physicians concerned with cardiovascular diseases, as well as clinical and basic science investigators.

Hosted by the Ohio State Heart Association and the Cleveland Area Heart Society, the 4,000 attendees will represent major research centers throughout the United States and many foreign countries.

The Youngstown Area Heart Association serving Mahoning, Trumbull and Columbiana Counties, will furnish registration blanks to persons wishing to attend from this area or blanks may be secured by writing to the Ohio State Heart Association, 131 E. State St., Columbus 15, Ohio.

A Friday morning attraction, sponsored by the American Heart Association's Council on Circulation, will be a discussion of "Buerger's Disease" by a group of Baltimore physicians: Dr. Robert D. Bloodwell, Dr. William M. Shelley, Dr. Ole E. Ottesen, Dr. Richard M. Goodman, and Dr. Victor A. McKusick.

This will be followed by a presentation on "Total Calf and Muscle 'Nutritive' Blood Flow During Tobacco Smoking" by Jay D. Coffman, M.D., and Stanley L. Javett, M.D., Boston.

Among other program highlights will be a symposium Friday afternoon on "Medical Management of Hypertension" with Colin T. Dollery, M.D., of London, England, as moderator.

Of special interest Saturday morning is an "Appraisal of Open Heart Surgery" featuring ten presentations by physician teams from Cleveland, San Francisco, Baltimore, Philadelphia, Minneapolis, and Portland, Oregon.

J. Scott Buterworth, M.D., New York University School of Medicine, and president of the American Heart Association, will give the annual presidential

for the dieting patient who has everything—except weight loss

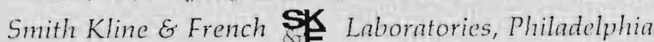
DEXAMYL® SPANSULE® brand of sustained release capsules

for **results** measured in pounds lost

Results from a typical study of 'Dexamyl', currently the most widely prescribed anorectic agent:

A group of 28 patients, who had been unable to achieve significant weight loss on diet alone, lost an average of 1.14 pounds per week on 'Dexamyl' throughout an eight-week study. No side effects due to 'Dexamyl' were reported by the investigators.

—Gelvin, E.P.; Kenigsberg, S., and Boyd, L.J.: J.A.M.A. *170*:1507 (July 25) 1959.



Smith Kline & French SK&F *Laboratories, Philadelphia*

FORMULA: Each 'Spansule' capsule No. 1 contains Dexedrine® (brand of dextro amphetamine sulfate), 10 mg.; amobarbital [Warning, may be habit forming], 1 gr. Each 'Spansule' capsule No. 2 contains 'Dexedrine' (brand of dextro amphetamine sulfate), 15 mg.; amobarbital [Warning, may be habit forming], 1½ gr. The active ingredients of the 'Spansule' capsule are distributed among hundreds of minute pellets with varying disintegration times. A therapeutic dose is released promptly and the remaining medication, released gradually and without interruption sustains the effect for 10 to 12 hours.

INDICATIONS: (1) for control of appetite in overweight; (2) for mood elevation in depressive states.

USUAL DOSAGE: One 'Dexamyl' *Spansule* capsule taken in the morning for 10- to 12-hour effect.

SIDE EFFECTS: Insomnia, excitability and increased motor activity are infrequent and ordinarily mild.

CAUTIONS: Use with caution in patients hypersensitive to sympathomimetic compounds or barbiturates and in coronary or cardiovascular disease or severe hypertension.

SUPPLIED: Bottles of 30 capsules.

Prescribing information adopted January, 1961.

address Saturday afternoon, followed by the presentation of the Research Achievement Award. At the same session, George E. Miller, M.D., Chicago, will give the Lewis A. Connor Memorial Lecture on "Pride and Prejudice in Professional Education." As in the past, Cardiovascular Conferences will be held Saturday evening.

James V. Warren, M.D., Columbus, president-elect of the American Heart Association, will chair the sixth and final session on clinical cardiology Sunday afternoon.

Registration will take place at the Sheraton-Cleveland Hotel Thursday, October 25, 3 p.m. to 10 p.m., and at the Cleveland Public Auditorium on Friday, Saturday, and Sunday, 8 a.m. to 5 p.m.

Sessions will take place at the Cleveland Public Auditorium.

Special events for an estimated 600 lady guest attendees will include a tour of University Circle and Cleveland Museum of Art, a reception, luncheon and fashion show, and a tour of the Cleveland lake front and Cultural Gardens, followed by brunch and a tour of homes in Shaker Heights, Shaker Square, and Cleveland Heights.

HEARING GLASSES BY MAICO

ELECTRONICALLY PERFECT

BEAUTIFULLY STYLED

SCIENTIFICALLY FITTED

Refer your patients with confidence

HEARING AIDS • AUDIOMETERS
ELECTRONIC STETHESCOPES

Maico

OF YOUNGSTOWN

1014-15 Mahoning Bank Bldg. RIverside 3-7212
C. P. KLEIN, Manager

OFFICE SPACE AVAILABLE

Newly constructed 3 suite building. Each suite finished. 930 sq. ft. Located on west side in Wickliffe, next to Union National Bank. If interested, phone SW 9-1922.

DR. W. E. HOULIHAN

Bulletin Board

MOVING VAN: Dr. Craig C. Wales has moved to 510 Gypsy Lane. Dr. Carl B. Klodell has opened his office in the Home Savings and Loan Building where he will be associated with Dr. Louis Bloomberg with practice limited to ophthamology. Dr. E. A. Shorten is planning to build a new professional building on Oak Hill Avenue. When completed this reporter along with Dr. Shorten hopes to be able to list many movers.

VACATIONS: Dr. and Mrs. Robert Fisher and children were at Camp Fitch on Lake Erie for Family Week. Dr. Genevieve Delfs has returned from Europe where she and her family vacationed. Dr. and Mrs. G. E. DeCicco and family vacationed in New England and at home. Dr. and Mrs. Walter Tims spent ten days at Lake Chautauqua, New York. Two more colleagues had vacations with pay (?). Dr. Berke spent two weeks at Camp A. P. Hill and Dr. Salistean two weeks at Camp Pickett.

SYMPATHY: Our sympathy is extended to Dr. McKelvey in the death of his mother, Mrs. Lucius McKelvey on August 15 and to Dr. Kravec whose mother, Mrs. John Kravec, expired on August 3.

BIRTH ANNOUNCEMENTS: Dr. and Mrs. John Thanos, a daughter on August 1, and Dr. and Mrs. Nicholas Salistean, a son on August 11. Congratulations, parents!

CHILDREN'S ACTIVITIES: Jerold Rosenblum, son of Dr. and Mrs. Morris Rosenblum, has received his law degree from the Washington School of Law, American University, Washington, D. C. Dr. and Mrs. Rosenblum's other son, Richard, has been quite ill. Surgery was performed at Cleveland Clinic. At the time of this writing he was improving rapidly.

NEW INTERNS: Several parties and picnics have been held for the new interns of the local hospitals. The General Practice Section of Youngstown Hospital held a picnic at Dr. Friedrich's farm for the new interns on August 11. A picnic for all interns and residents with the staff of Youngstown Hospital was held on August 22 at Tippecanoe Country Club. Dr. and Mrs. W. Stanley Curtis had a group of interns at their home on August 6. A picnic was held on the School of Nursing grounds on July 25 for the new interns and residents of St. Elizabeth's Hospital.

FIRST AID: The Red Cross First Aid Station at the Canfield Fair was manned by Drs. H. Paul Bauer, Robert Ciekurs, George H. Dietz, V. Holonko, Joseph Mersol, and S. M. Zervos.

MISCELLANY: Dr. James Patrick has been ambulating with the aid of a walking cast. Dr. A. E. Rappoport was program chairman for the joint meeting of the College of American Pathologists and the American Society of Clinical Pathologists from Sept. 2 through Sept. 8.

REHASH!!! Several times this reporter has been taken to task for not giving more news. Please send in items so they can be published. Send them to me or to Mr. Rempes.

—G. E. DeCicco

A Single, Higher Standard of Cleaning
Exclusive **BLAIR-CARE**
Your Entire Wardrobe **LIKE NEW**
Try Our New Shirt Laundry
Cleaners **BLAIR'S** *Furriers*
STerling 2-8181 Nine Stores

Doctor! When your West Side patients
require prescriptions—phone SWeetbriar 9-9630
CHANEY PHARMACY
Centrally located on the West Side
2603 Mahoning Ave.
Corner Mahoning & Hazelwood
ANTHONY BERARDI **ALFRED DUDEK**

It's Later Than You Think

EVERYTHING is farther away than it used to be. It's twice as far to the corner, for instance, and they've added a hill, I've noticed. I've given up running for my bus; it leaves faster than it used to.

Seems to me they are making staircases steeper than they used to make them in the old days. And have you noticed the small print they are using? Newspapers are getting farther and farther away when I hold them, and I have to squint to make out the news. No sense in asking to have them read aloud; everyone speaks in such a low voice that I can hardly hear them.

The barber doesn't hold a mirror behind me any more so that I can see the back of my head. The material in my suits is always too skimpy around the waist and seat. Even my shoe laces are so short they are all but impossible to reach.

Even people are changing; they are so much younger than they used to be when I was their age. On the other hand, people my own age are so much older than I am. I ran into an old classmate the other night and he had aged so he didn't recognize me. I got to thinking about the poor fellow while I was shaving this morning, and while doing so I glanced at my reflection in the mirror. CONFOUND IT! They don't even use the same kind of glass in the mirrors any more!

—Anonymous

. . . even though surrounded by allergens. Co-Pyronil® provides smooth, continuous control of allergic symptoms—relief in minutes for hours, with virtually no side-effects. And there is a dosage form for every allergic patient.

Pulvules® · Suspension · Pediatric Pulvules **Co-Pyronil®**
(pyrrobutamine compound, Lilly)

Each Pulvule contains Pyronil® (pyrrobutamine, Lilly), 15 mg.; Histadyl® (methapyrilene hydrochloride, Lilly), 25 mg.; and Clopane® Hydrochloride (cyclopentamine hydrochloride, Lilly), 12.5 mg. Each pediatric Pulvule or 5-cc. teaspoonful of the suspension contains half of the above quantities. This is a reminder advertisement. For adequate information for use, please consult manufacturer's literature. Eli Lilly and Company, Indianapolis 6, Indiana.

230017

Lilly

E

ACHROMYCIN®

E

Tetracycline Lederle

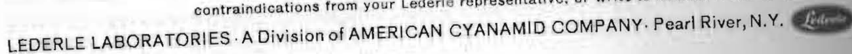
ACHROMYCIN Ophthalmic Oil Suspension 1% instills tetracycline at full potency in liquid form at the site of superficial ocular infections. Highly concentrated broad-spectrum activity is localized at the site of infection, with a minimal occurrence of patient intolerance or tissue toxicity. Susceptible organisms are controlled earlier and more effectively.

Also available: ACHROMYCIN Eye and Ear Ointment 1% • ACHROMYCIN Ophthalmic Ointment 1% with Hydrocortisone 1.5% • ACHROMYCIN Ophthalmic Powder (Sterilized 25 mg., with sodium chloride 62.5 mg., and sodium borate 25 mg.).

When oral therapy is indicated

ACHROMYCIN® V

Tetracycline HCl with Citric Acid Lederle
Capsules—250 mg., 100 mg.



LEDERLE LABORATORIES · A Division of AMERICAN CYANAMID COMPANY · Pearl River, N.Y.

FROM THE BULLETIN

THIRTY YEARS AGO — SEPTEMBER, 1932

The Meander Reservoir and filtration plant was put in operation after seven years preparation. Before that time we were drinking water from the Mahoning River, heavily flavored with chlorine. The new soft water dissolved a lot of old deposits present in the pipes and for a while it contained brown flakes which caused much protest frcm the consumers. The deposits soon were cleared out and we have been enjoying good pure water ever since.

In the early days of the Society the chief source of revenue was the collection of two dollar fines from any member who failed to prepare a paper when his turn came to appear on the program. The treasury usually had a cash balance of ten to fifteen dollars. Dr. Cunningham presented a paper in 1874 on scarlet fever in which he stated that the malady was not contagious but most of the members disagreed with him. They did agree on the use of ice water baths and large doses of wine for the "feaver" and the application of leeches to the neck to reduce swelling.

Morris Rosenblum, Walter Tims and the late Sam Schwebel started the practice of medicine thirty years ago.

TWENTY YEARS AGO — SEPTEMBER, 1942

The war effort was in a state of feverish confusion. Rules and directives changed from day to day. The Bulletin mentioned induction examinations, civilian defense, scarcity of doctors, rationing of food and strikes of defense workers. Here are some of the regulations on rationing of tires:

1. Doctors are not eligible for new tires while the ones they are driving are recapable.

2. Application must be made while casings are recapable.

3. In instances where the casings are injured through no negligence of the doctor and cannot be recapped, the Board may permit purchase of new casings but is must be shown that proper care has been exercised.

The Committee on Civilian Defense had to change its plans from day to day because of loss of personnel to the armed forces. Doctors who left that month were Fred Coombs, Lou Deitchman, Raymond Hall, J. B. Kupec, R. H. Middleton, W. W. Neidus, G. G. Nelson, John Noll, Harold Reese, M. S. Rosenblum, J. M. Russell, J. L. Scarnecchia, M. M. Szucs and Sam Tamarkin.

TEN YEARS AGO — SEPTEMBER, 1952

The American Cancer Society brought a group of seven speakers here from the Memorial Hospital in New York for a full day of Cancer Symposium at the Stambaugh Auditorium. Wm. Flynn made the arrangements and the program was outstanding, attracting many out-of-town guests.

Dr. W. H. Bunn announced an enlarged program of Rheumatic Fe prevention by the Heart Association. Children in school with sore thro were to have cultures made and to be sent at once to their family doc for prophylactic penicillin if streptococci were found.

There were five cases of polio reported, one scarlet fever, thirty- gonorrhea and twenty of syphilis. No small-pox and no typhoid.

Dr. Sidney Davidow became a diplomate of the American Board Pediatrics.

There was quite a furor over fatal reactions to chloromycetin.

John Rogers won the Lyons trophy at the annual golf meet of Medical Society and Coryden Palmer Dental Society with a low gross of

—*J. L. F.*

Sept. 16
P. H. Fuscoe
R. G. Mossman
N. J. Garritano

Sept. 17
J. Dentscheff

Sept. 18
J. A. Renner
E. R. Thomas

Sept. 21
R. G. Warnock

Sept. 23
W. J. Flynn
M. Halmos
E. H. Nagel

Sept. 25
V. G. Herman

Sept. 26
E. A. Massullo

Sept. 27
R. J. Scheetz

Sept. 28
J. Nemeth

Sept. 29
D. H. Levy

Get Your Annual Check-up

Sept. 30
D. Stillson
H. P. Bauer

Oct. 2
J. F. Dulick

Oct. 3
G. M. McKelvey

Oct. 4
G. Delfs

Oct. 5
B. Katz

Oct. 6
J. L. Calvin

Oct. 8
J. N. McCann

Oct. 9
J. F. Stotler
W. P. Young

Oct. 11
H. S. Ellison
E. Hecker

Oct. 12
B. I. Firestone
J. R. Gillis

Oct. 13
A. Goudsmit

Oct. 14
E. T. McCune
J. H. Smith

Oct. 15
R. V. Clifford
J. S. Bates

Why is it that some folks, even after they're admitted to a friend's ho keep right on knocking?

* * * * *

The gentleman sat down at the bar and ordered a martini. "Very he insisted, "Twenty parts gin to one part vermouth."

"All right, sir," said the bartender, "Shall I twist a bit of lemon over it?"

"My good man, when I want lemonade, I'll ask for it."

LESTER'S

- PHYSICIAN SUPPLIES
- HOSPITAL SUPPLIES
- PRESCRIPTIONS

We offer

- Prompt courteous service—Free Delivery
- Complete Stocks
- Fair Price
- Literature—New Product Information

If we can be of service—

PLEASE CALL

318 Fifth Ave.	264 W. Federal St.	1003 Belmont Ave.
RI 7-7141	RI 4-4111	RI 6-2657

• **PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN** •

WHAT'S THE HORSE-SENSE WAY TO CHOOSE STOCKS?

NEVER TAKE A "TIP" — NEVER TRUST A RUMOR

Instead — get the facts from a man who knows the business. That's the horse-sense way to choose stocks and bonds.

We'll be glad to help and advise you. That's our business. And our only charge is the small commission you pay when you buy or sell. Why not stop in for a chat?

★ ★ ★

OWN YOUR SHARE OF AMERICAN BUSINESS

★ ★ ★

Butler, Wick & Co.

MEMBER:
NEW YORK STOCK EXCHANGE
AMERICAN STOCK EXCHANGE (Associate)
MIDWEST STOCK EXCHANGE

Youngstown, O. Phone RI 4-4351
Sixth Floor, Union Bank Bldg.

It's there when you need it. These six words sum up the rationale for including an anti*mycotic* in your antibiotic prescription. Particularly when that antimycotic is Fungizone (amphotericin B)....Here you have a highly potent agent which acts in the gastrointestinal tract when given by mouth. A highly potent agent, yet virtually nontoxic in the amounts provided by Mysteclin-F.[1,2] You can thus avail yourself of an important clinical safeguard which extends the usefulness of tetracycline: Mysteclin-F prevents monilial overgrowth while utilizing the full force of tetracycline against a wide range of pathogens. Once you've decided to control an infection with broad-spectrum therapy, therefore, **Mysteclin-F is good practice.**

1. Lehan, P. H., Yates, J. L., Brasher, C. A., Larsh, H. W., and Furcolow, M. L.: Diseases of Chest *32*:597, 1957.
2. Newcomer, V. D., Sternberg, T. H., Wright, E. T., and Reisner, R. M.: J. Chronic Diseases 9:353, 1959.

Mysteclin-F contains Squibb Phosphate-Potentiated Tetracycline (Sumycin), plus Amphotericin B (Fungizone). Available as: Mysteclin-F Capsules (250 mg./50 mg.); Mysteclin-F Half Strength Capsules (125 mg./25 mg.); NEW Mysteclin-F Syrup (125 mg./25 mg. per 5 cc.); Mysteclin-F for Syrup (125 mg./25 mg. per 5 cc.), Mysteclin-F for Aqueous Drops (100 mg./20 mg. per cc.). For full information, see your Squibb Product Reference or Product Brief.

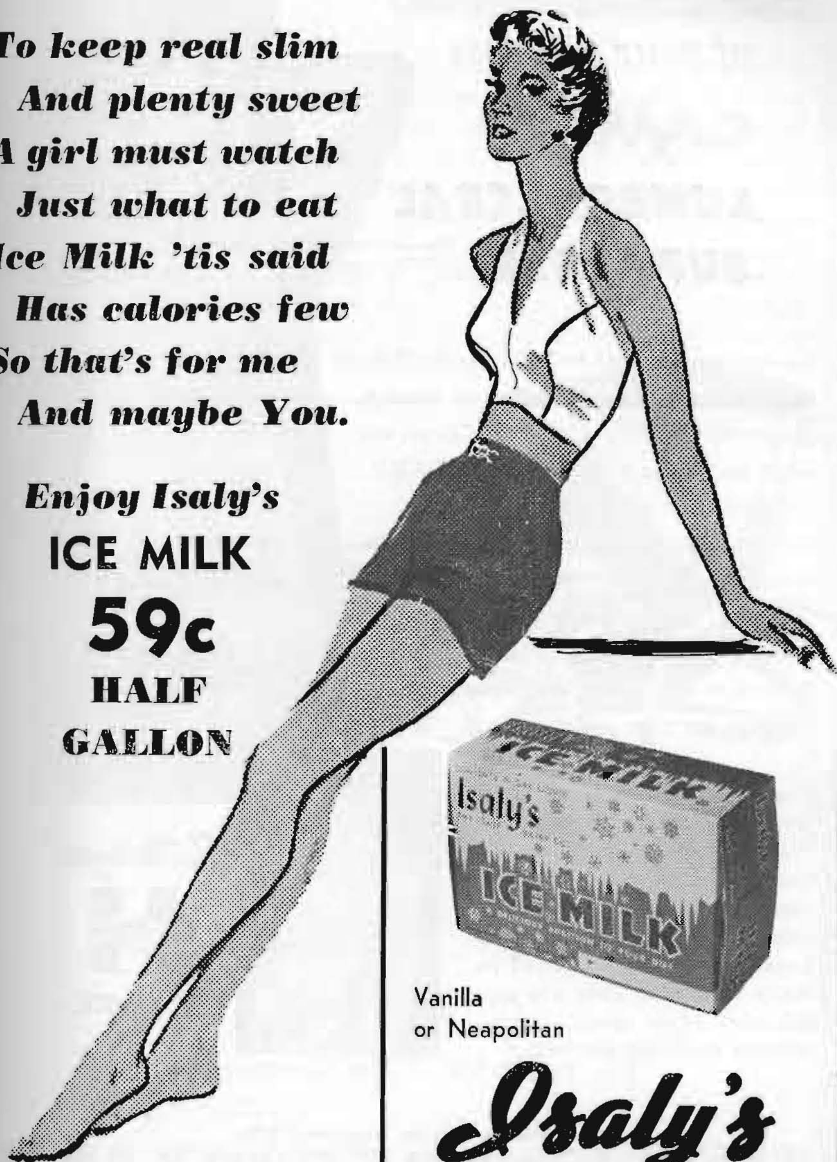
Squibb Quality—the Priceless Ingredient

SQUIBB

SQUIBB DIVISION Olin

'Mysteclin'®, 'Sumycin'® and 'Fungizone'® are Squibb trademarks

ENJOY THE LOW CALORIE FROZEN DESSERT



as varied as the needs of your patients

CAMP LUMBOSACRAL SUPPORTS

No matter the type of build, proportionate irregularities or complications of obesity, pendulous abdomen or other conditions, our large and comprehensive stock of CAMP LUMBOSACRAL SUPPORTS—for men and women—insures prompt service and precise execution of your instructions. Our professionally trained fitters may be relied upon for the kind of individual and understanding service you seek for your patients.

From the Camp Reference Book for Physicians and Surgeons— "Camp lumbosacral supports, used in conjunction with other conservative measures in conditions of low back pain, have been found to give relief in many instances. They are useful, also, after operative procedures upon the low back."

Mrs. Catherine Schafer, Registered Fitter

LYONS PHYSICIAN SUPPLY CO.

Mahoning Valley Sick Room Supply Center

32 Fifth Avenue Phone RI 6-8861 Youngstown, Ohio