

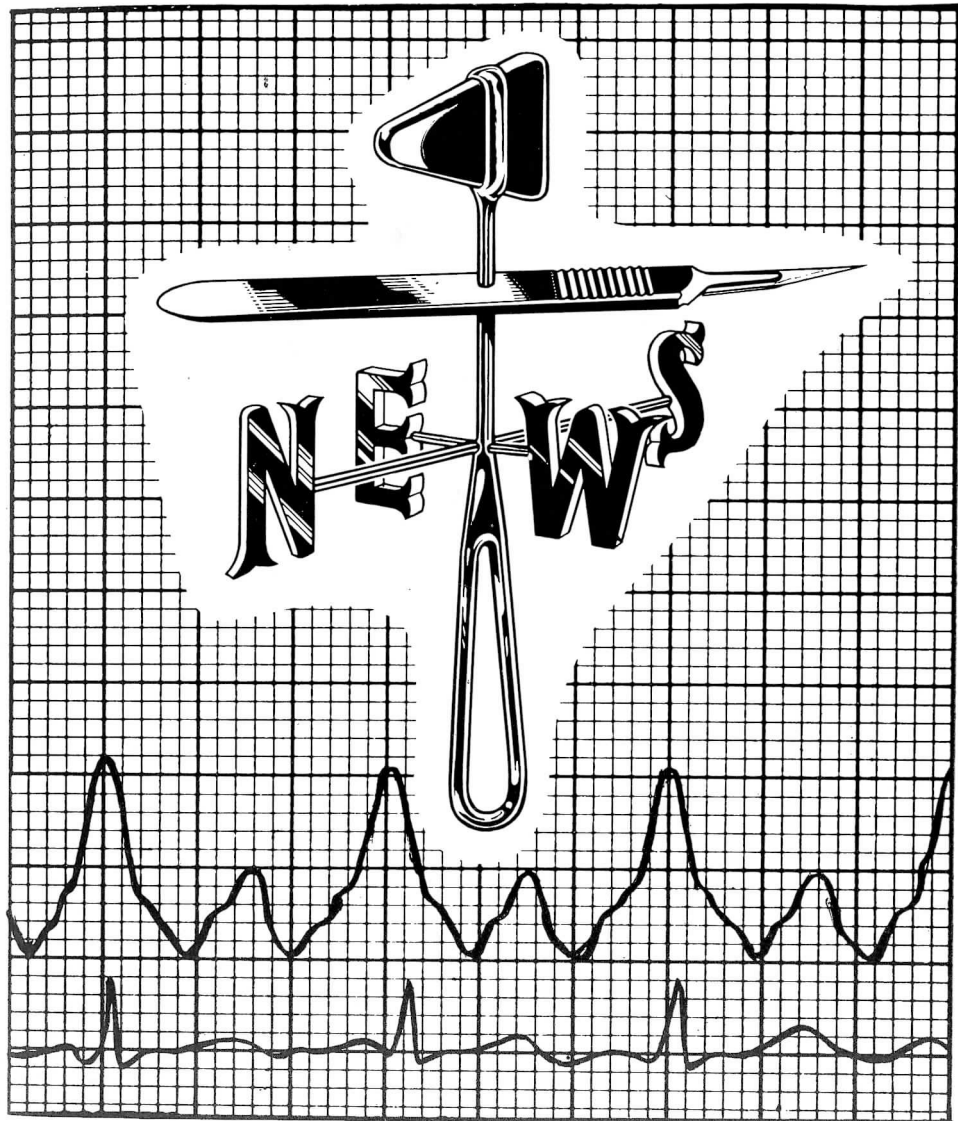
# BULLETIN

*of the*  
**MAHONING COUNTY  
MEDICAL SOCIETY**

*Volume XXXV*

*Number Five*

MAY, 1965





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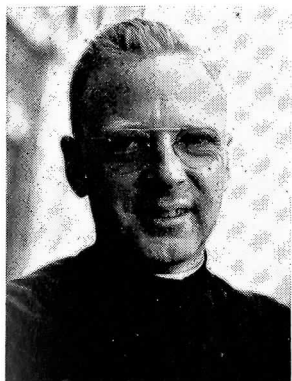
**2400 Market Street—Room 203**

**Youngstown, Ohio 44507**

# MAY MEETING

Tuesday, May 18, 1965

MURAL ROOM



SPEAKER

Rev. Thomas J. O'Donnell, S.J.

TOPIC

**The Use of Oral Progestational  
Drugs and Contraception**

Rev. O'Donnell, regent of the Georgetown University Schools of Medicine and Nursing, and of Georgetown University Hospital, will address the second annual dinner meeting for clergymen and physician, sponsored by the Mahoning County Medical Society Medicine and Religion Committee. All physicians are urged to attend and to bring their pastors, ministers and rabbis.

**6:30 p.m. Dinner (\$3.50)**

**7:30 p.m. Meeting**

Send your reservation and check to:

Mahoning County Medical Society  
1005 Belmont Avenue  
Youngstown, Ohio 44504

---

# JUNE

**Speaker: Dr. Irwin W. Bean M.D.**

**Canadian Medical Association—Saskatchewan Division**

**Tuesday, June 15, 1965**

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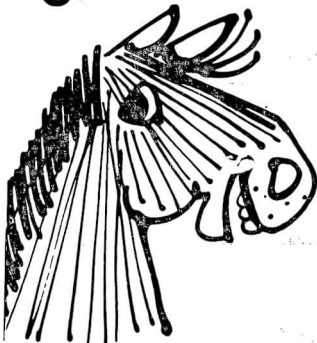
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Representative to the Associated Hospital Service: M. W. NEIDUS

Executive Secretary: H. C. REMPES, JR.

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## *From the Desk of the President*

### "AUNT MINNIE"

Recently in the United States House of Representatives, the Ways and Means Committee sent a Medicare Bill to the floor of this venerable chamber which was ultimately voted upon and passed by the majority of these congressmen. This legislation has now gone to the Senate Finance Committee where the first "open" hearings on the bill are being held. Then, according to all prognostications, it will be passed by the Senate, signed by President Johnson, and become law. Great! Just great!

Yet at no time have these legislators asked me or any other doctor for that matter, whether we can live with this new Medicare law—this venture into socialized medicine!

Since I must work under this law, I would like to be consulted about it. I should also like the opportunity to tell the members of Congress and Mr. Johnson that, as a member in good standing of the American Medical Association, I will not participate in any program which over the short term or long term, undermines the quality of medical care in the United States. Socialized medicine has done this in every country in the world where it has become law.

Further, I must, as a citizen and a doctor, in good conscience, oppose any bill that taxes the young, honest, but poor worker to pay the medical bills of the millionaire.

I must, in good conscience oppose the government being a provider of services with predicted expansion and ultimate control of the practice of medicine.

I must, in good conscience, oppose the loss of my voluntary right to be excluded from the Social Security System. I wish to be excluded because most doctors do not retire from the practice of medicine. They may reduce their work load, but they still derive sufficient income to be deprived of any Social Security benefits. Thus, Social Security becomes strictly taxation without hope of any financial return for most doctors.

I must, in good conscience, oppose a system designed to be exploited. Our hospitals are filled now to overflowing. Where can we put thousands of people age 65 and over who will demand a hospital bed even though admission to a hospital may not be advised and may even be unnecessary?

The pressure then will be squarely on the family doctor. If he does not agree with the provisional medical diagnosis made by the family to put "Aunt Minnie" in the hospital and then circuitously into a nursing home for custodial, not medical care, the politician will be called—in consultation. Then in a very loud, if not lucid, voice the medical man will be told that this is something Aunt Minnie is entitled to by law and must have. "Anyway, Doc, if you must know the truth," the politician continues, "the family just can't stand Aunt Minnie around the house any more. Something must be done about her but don't ask the family to do it, they are fed up."

But what about family loyalty and responsibility? What of the fourth Commandment—Honor thy father and thy mother—or the words of Jesus—"Whatever you do for the least of my people, you do for me." "Listen, Doc, that's for squares. You've got to get with it. Relax—let Uncle Sugar do it."

This drama, "Aunt Minnie," has been running continuously in England for seventeen years. Now we will soon start the same stupid production here. It is entitled "How to Definitely Lower the Quality of Medical Care in the United States by Really Trying."

—John J. McDonough, M.D.  
President

**BULLETIN** of the Mahoning County Medical Society

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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 XXXV

May, 1965

Number 5

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

**EDITOR**

KURT WEGNER, M.D.

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Sidney Franklin, M.D.

A. William Geordan, M.D.  
John G. Guju, M.D.  
Harold J. Reese, M.D.

**— EDITORIAL —**

The problem of medical care for the doctor and his family has many distressing facets, all of which seem to conspire to make this care less than ideal. Perhaps at the core of the difficulty is professional courtesy, the practice of providing care gratis for our medical colleagues. This courtesy generally imposes less problems on the giver than on the recipient. The latter does not want to bother his busy colleague; hence, he takes care of the "minor" situations himself, and calls for help only when absolutely necessary. Unfortunately, he could be a hematologist who has not diagnosed or treated an otitis in some years, and who might not be able to be too objective with his family anyway. Routine check-ups and immunizations are often postponed or neglected for the same reasons. We know that minor ills can become major diseases under such circumstances. Yet we continue to deny to the physician's family the advantages we offer the general public.

The problems and embarrassments have reached such magnitude at times that some physicians have advocated abandoning professional courtesy altogether. Generally, the physician would have no difficulty in paying for his medical care, and this might be a way out of the dilemma. It is not a solution, however, that appeals to most of us. It would be most difficult to charge a fee of our professional colleague with whom we share the fascinations and heart-aches of medicine, and whose trust we cherish. And while the physician-patient can well afford the fee, it is equally true that his doctor can well afford the pleasure of refusing it.

The answer to the riddle is certainly not simple. However, basic to its solution must be the obvious principle that physicians and their families are entitled to good medical care. Most of us feel privileged and flattered when asked to provide this care, for no greater demonstration of recognition and esteem can come to us. The request is reward enough. The physician should remember this when medical attention is needed, and reap a little of the harvest of modern medicine for himself.

—Kurt J. Wegner, M.D., Editor

## REV. O'DONNELL IS M-R SPEAKER

The Mahoning County Medical Society will be host to the area's clergymen at the second annual Medicine and Religion dinner-meeting on Tuesday, May 18 at the Mural Room.

Speaker will be the Reverend Thomas J. O'Donnell, S.J., regent of the Georgetown University Schools of Medicine and Nursing, and of Georgetown University Hospital.

Father O'Donnell entered the Society of Jesus in 1938, and studied at the seminaries in Wernersville, Pa., and Woodstock, Md. He holds the Bachelor of Arts degree from Georgetown, and the Master of Arts from Woodstock College.

He taught Latin, Greek and English for two years at Georgetown Preparatory School, and for one year at St. Joseph's High School, Philadelphia. Ordained in June, 1950, he then completed his studies at Woodstock and at St. Isaac Joques Tertianship, Auriesville, N.Y.

Father O'Donnell went to Georgetown in 1952 as assistant dean of the School of Medicine. He was named regent and dean of students in 1953, regent of the Hospital in 1955, and Nursing School regent in 1956.

He is the author of "Morals in Medicine," a book on medical-ethical principles and problems, published in 1956.

Physicians are urged to bring their clergymen to the meeting. Dinner will be at 6:30 p.m. Reservations for dinner may be made by sending a check for \$3.50 per person to the medical society office. Rev. O'Donnell will speak at 7:30 p.m.

Arrangements for the meeting are being made by the Medicine and Religion committee, Dr. W. J. Cleary, chairman, Dr. R. Kiskaddon, vice-chairman. Members of the committee are: Drs. B. M. Brandmiller, L. P. Caccamo, Frank Gelbman, A. Marinelli, J. E. Might, G. G. Nelson, F. L. Schellhase, F. E. Shaw, L. S. Shensa, D. Stillson, and F. C. Tiberio.

## SPEECH COURSE IN MAY

There is still time to register for the Mahoning County Medical Society Speakers Training Course to be held on Friday, May 28 and Saturday, May 29, at the Pick-Ohio Hotel. This is a special program arranged for members of the Medical Society at no cost to either members or the Society, and administered by Smith Kline & French Laboratories.

Format of the two-day program will include lectures on speech impressiveness, how to handle questions and answers, extempore speaking, and how to use audio-visual aids. The lectures will be interspersed with drill sessions. The program will be conducted by Dr. Harold L. Hayes, who holds a Doctorate in speech.

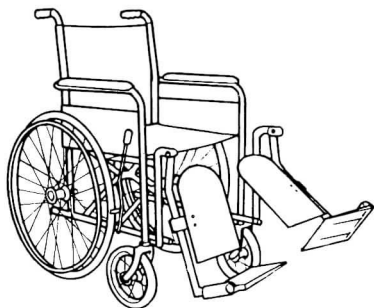
The program is limited to 30 participants. Anyone interested should phone the Medical Society office at once, so that the final list of names may be forwarded to Smith Kline & French.

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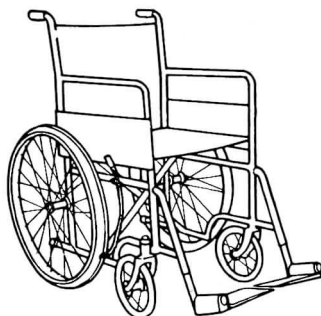
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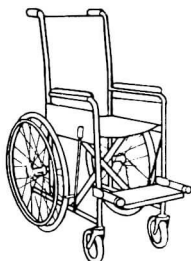
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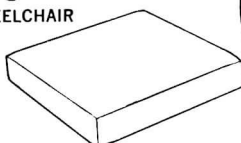
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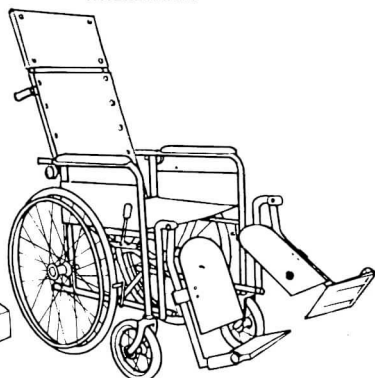
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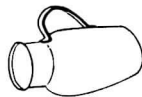
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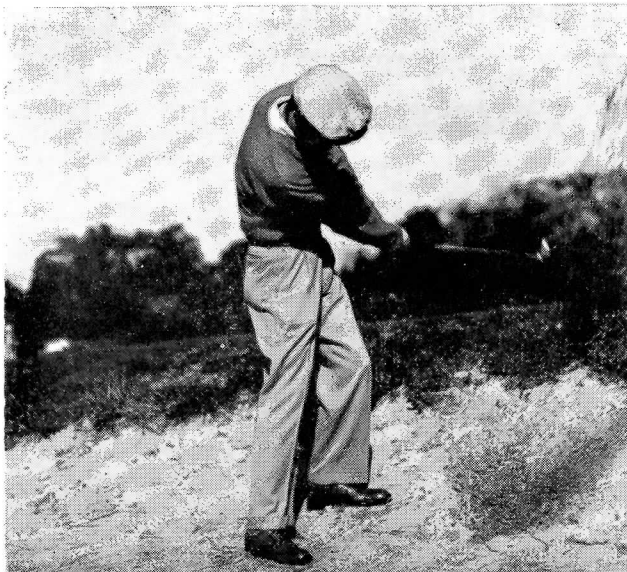
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(Warning: Codeine may be habit-forming.) **Indications:** 'Soma' Compound and 'Soma' Compound with Codeine are useful for relief of pain and stiffness in traumatic, rheumatic and other conditions affecting muscles and joints. **Contraindications:** Allergic or idiosyncratic reactions to carisoprodol, phenacetin, or codeine phosphate. **Precautions:** *Phenacetin*—With long-term use, give cautiously to patients with anemia and cardiac, pulmonary, renal or hepatic disease. May damage the kidneys when used in large amounts or for long periods. *Caffeine*—Not recommended for persons extremely sensitive to its CNS stimulating action. *Codeine phosphate*—Use with caution in addiction-prone individuals. *Carisoprodol*—Carisoprodol, like other central nervous system depressants, should be used with caution in patients with known propensity for taking excessive quantities of drugs and in patients with known sensitivity to compounds of similar chemical structure, e.g. meprobamate. **Side effects:** Drowsiness, lightheadedness, dizziness, and gastric complaints have been reported infrequently for either or both of these preparations. *Phenacetin*—Side effects are extremely rare with short-term use of recommended doses. Prolonged ingestion of overdoses may produce dyspnea, cyanosis, hemolytic anemia, skin rash, anorexia, subnormal temperature, insomnia, headache, mental disturbances, and tolerance. *Caffeine*—Side effects are almost always the result of overdosage. Average doses may rarely cause nausea, nervousness, insomnia, and diuresis. Excessive dosage may produce, in addition, restlessness, nervousness, tolerance, tinnitus, tremors, scintillating scotomata, tachycardia, and cardiac arrhythmias. *Codeine phosphate*—Possible side effects are nausea, vomiting, constipation, and miosis. *Carisoprodol*—The only side effect reported with any frequency is sleepiness, usually on higher than recommended doses. An occasional patient may not tolerate carisoprodol because of an individual reaction, such as a sensation of weakness. Other rarely observed reactions have included dizziness, ataxia, tremor, agitation, irritability, headache, increase in eosinophil count, flushing of face, and gastrointestinal symptoms. One instance each of pancytopenia and leukopenia, occurring when carisoprodol was administered with other drugs, has been reported, as has an instance of fixed drug eruption with carisoprodol and subsequent cross-reaction to meprobamate. Rare allergic reactions, usually mild, have included one case each of anaphylactoid reaction with mild shock and angioneurotic edema with respiratory difficulty, both reversed with appropriate therapy. In cases of allergic or hypersensitivity reaction, carisoprodol should be discontinued and appropriate therapy initiated. Suicidal attempts may produce coma and/or mild shock and respiratory depression. **Dosage:** Usual adult dosage of 'Soma' Compound or 'Soma' Compound with Codeine is one or two tablets three times daily and at bedtime. **Supplied:** 'Soma' Compound, orange tablets, each containing carisoprodol 200 mg., phenacetin 160 mg., and caffeine 32 mg. 'Soma' Compound with Codeine, white capsule-shaped tablets, each containing carisoprodol 200 mg., phenacetin 160 mg., caffeine 32 mg., and codeine phosphate 16 mg. Narcotic order form required. *Before prescribing, consult package circular.*

## *From the Bulletin*

### THIRTY YEARS AGO—MAY 1935

Dr. John H. Talbot of the Harvard Medical School Laboratory presented the results of his group's study of heat cramps conducted in Youngstown the previous summer. They found that heat cramps were caused by salt depletion due to excessive sweating and could be relieved by intravenous injections of saline but not by glucose. Ever since their report the mills have been providing salt for workmen to prevent heat cramps.

There was an excessive amount of scarlet fever and diphtheria that spring, more than twice as much as the previous year. Hathhorn's Public Health Committee was urging diphtheria toxoid for every child. Scarlet fever vaccine was being used some but it was causing severe reactions and soon fell into disuse.

Dr. M. W. Neidus had an excellent article on "Edema" in this issue. Dr. J. A. Sherbondy was seriously ill. The Nurses Association voted to discontinue all gratuitous nursing service in hospitals. The Medical-Dental Bureau was giving a free luncheon with guest speaker and musical ensemble every Thursday noon. The Century of Progress Exposition was on in Chicago, John L. Lewis was organizing the C.I.O., The F.E.R.A. was scrapped for the W.P.A. The Depression was lifting.

### TWENTY YEARS AGO—MAY 1945

The Cancer committee headed by John Heberding was conducting an educational campaign for the public. A special committee on Red Cross brought in its report. They recommended closer cooperation between physicians and Red Cross personnel in cases where service men were to be called home because of illness in the family.

Major B. M. Bowman wrote that he was working night and day taking care of convoys of wounded from the front. Major Walter Tims wrote from Belgium and said things were looking pretty good for the war to end soon. Capt. Paul Kaufman was working in a hospital in France and was down to 150 pounds. Capt. Barclay Brandmiller was living in the jungle and hadn't received a Bulletin for several months. Capt. David R. Brody was serving with a base hospital in England. Comdr. H. S. Zeve was back from Trinidad at the Sampson Naval Hospital.

It had been a bitter winter here and April was especially bad. There was no report of any major epidemic but the doctors were worn to a frazzle.

### TEN YEARS AGO—MAY 1955

The Infantile Paralysis Foundation announced a mass immunization program against Polio. Doctors joined up but they were displeased because all plans were held up for months so it would be launched on the anniversary of F.D.R.'s death, because we got no word except through newspaper and radio broadcasts, and because no vaccine was available except through the foundation. But we went along anyway and it turned out all right.

Results of a poll of the members on Social Security for Physicians:

In favor of compulsory social security .....	24
Not in favor .....	47
In favor of voluntary social security .....	121
Not in favor .....	14
Against all Social Security .....	23
Not against .....	28
Would like to know more before voting .....	60
Not wishing to know more .....	5

Obviously, someone did not know how to make up a questionnaire. There is not such thing as voluntary social security. Obviously 60 doctors were slow to make up their minds, if they needed to know more after living with it for 20 years. This writer remembers that most of the staff-room discussions centered around "What is in it for me?"

Sam Klatman died. Sam was everybody's favorite person. Warm, friendly, humorous, a bachelor with no interest except medicine and photography, he took care of anything that came along. He was on the surgical service of the Youngstown Hospital and when W.W. II started he was one of the first to volunteer. Not liking ships or water, he joined the Army. So of course they put him on an Army transport ship carrying troops to the Aleutian Islands. While he was up there taking care of sick and injured G.I.'s, battling the cold and the willawas the Army lost track of him and he was reported AWOL for 3 months. That took a bit of fixing with the red tape to get his pay, but Sam took it in stride and often laughed about it later. When he came home he joined Dr. Rummel to help in the medical administrative and educational program of the hospital. His death was a shock to all of us.

New active members that month were: Lester O. Gregg, Alex M. Rosenblum, Leonard Fagnano, Salvatore Squicquero and Louis Scharf. Interne members: Robert Kelleher, John Scully, James E. Might, Carol Craig, Ian Sewell, Robert Caulkins and Lazaro Gelstein.

Billy Rose said "For my dough, the most important people in the world are doctors!"

J. L. F.

## DR. GOLDBERG REAPPOINTED TO BOARD



Dr. Sam D. Goldberg has been reappointed to a five-year term on the Youngstown Board of Health. The appointment was made on April 1st by Mayor Anthony Flask.

The current Board of Health, listed in the order of their retirement consists of Robert Gelonese, Ralph (Bob) White, Atty. John M. Newman, Atty. Robert M. Murphy, and Dr. S. D. Goldberg.

Dr. Goldberg is the second person to serve a second term on the Board. Atty. Murphy, appointed last year, was a member of the original Board.

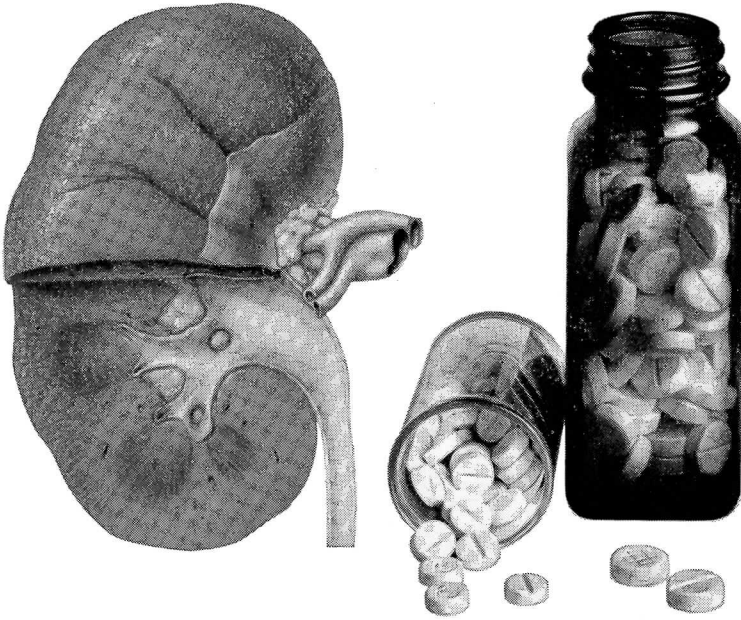
Mayor Flask was particularly anxious that a physician be appointed to the Board this year, and sought Medical Society advice. Following a poll of the membership, a list of those interested was submitted to the Mayor to help him in his choice.

Ten persons have served on the Board of Health since its inception in 1958. The original Board consisted of Innocenzo Vagnozzi, Mrs. Dora Schwebel, Frank W. Tear, Atty. Murphy, and Atty. Anthony T. Kryzan. The Board was established following an all-out campaign by the Medical Society to establish a Board with a physician as city health commissioner. The only other physician to serve on the Board was Dr. J. F. Stotler, 1959-1963.

## DR. KUPEC REAPPOINTED TRUSTEE

Dr. J. B. Kupec has been reappointed by the Mahoning County Commissioners to a three-year term on the Board of Trustees of the Mahoning County Tuberculosis Sanatorium. Dr. Kupec has served as a trustee since his appointment to fill a vacancy in July 1962.

at Merck Sharp & Dohme...



understanding...

precedes development

The development of chlorothiazide and probenecid were events of major importance, but perhaps even more important for the future was the Renal Research Program by which they were developed. When Merck Sharp & Dohme organized this program in 1943, it was expressing in action some of its basic beliefs about research:

- Many problems connected with renal structure and function were still undefined or unsolved. The Renal Research Program would begin its basic research in some of these problem areas.
- From knowledge thus acquired might come clues to the development of new therapeutic agents of significant value to the physician.

For example, the Renal Research Program put fifteen years into this search before chlorothiazide became available. But because these years had first led to a greater understanding of basic problems, the desired criteria for chlorothiazide existed before the drug was developed.

Along with other research teams at Merck Sharp & Dohme, the Renal Research Program continues to add new understanding of basic problems—understanding which will lead to important new therapeutic agents.

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## Bulletin Board

On April 5, Dr. M. W. Neidus, former president of the Mahoning County Medical Society, suddenly developed a broad smile. The cause for this was a brand new granddaughter, Tamara Kerr, daughter of the former Sandra Neidus.

The past month has been characterized by an epidemic of hospitalizations amongst our doctors. In fact, it would seem that the recovering ones were meeting the sick ones as they were going from and to the hospital. The list included Enrico DiOrio, who had an appendectomy; E. H. Nagel, who had a fractured hip; J. K. Herald, with a disassembled knee; and Paul Mahar, who had an odontectomy. In addition, Mike Galose, who has been ill for several months, has recovered and now is back to partial practice.

We still have the travelers amongst us. A. K. Phillips has just returned from Florida, and D. H. Levy is still there. Pat Cestone is in Las Vegas.

Lenny Caccamo and Frank Tiberio attended the N.Y.U. Post-Graduate Seminar on cardiac auscultation. In an examination given at the end of the course, Len and Frank received the highest scores in the group of about 50 participants.

We regretfully extend our sympathies to John and Mary McCann. John's father, James McCann, whom everybody knew in the Mahoning County Courthouse where he was custodial head for so many years, passed away.

—Harold J. Reese, M.D.

**May 18**

S. F. Gaylord

**May 22**

V. C. Hart

**May 23**

M. W. Neidus

J. W. Tandatnick

W. J. Cleary

**May 24**

A. Calder

J. J. Wasilko

**May 25**

B. B. Burrowes

**May 26**

J. M. Benko

**May 27**

G. B. Pugh

**May 28**

H. Segall

**May 29**

R. E. Hamlich

**May 30**

H. L. Allen

C. A. Gustafson

**May 31**

J. B. Kupec

H. J. Reese



**Get Your Annual Check-up**

**June 3**

B. C. Berg

**June 4**

H. B. Hutt

H. H. Ipp

R. B. Poling

J. Schreiber

R. A. Wiltsie

**June 5**

A. M. Rosenblum

**June 6**

E. R. Brody

E. Shapira

R. Cossette

**June 8**

A. DiDomenico

G. G. Nelson

**June 9**

W. H. Gross

K. C. Kunin

J. Noll

**June 10**

R. W. Parry

**June 13**

J. G. Guju

R. L. Jenkins, Jr.

F. A. Resch

**June 14**

R. R. Fisher

L. A. Blum

**June 15**

U. H. Boening

A. R. Cukerbaum

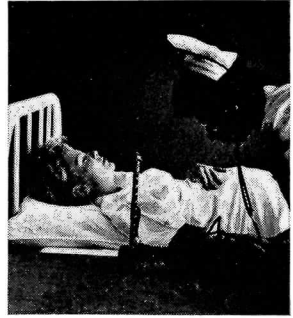
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Edema



Essential hypertension



Toxemia of pregnancy

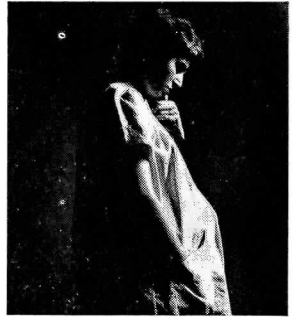
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Liver cirrhosis



Excessive weight gain of pregnancy

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**Contraindications, Precautions, and Side-Effects:** Like other thiazides, Anhydron may elevate serum uric acid levels in some patients and produce a decrease in glucose tolerance. It should not be used in severe renal impairment. Injudicious use of Anhydron may result in sodium and potassium depletion. In hypertensive patients, lightheadedness and weakness upon standing, excessive orthostatic hypotension (usually associated with tachycardia), and a rising blood urea nitrogen or nonprotein nitrogen may indicate overdosage. If side-effects occur, dosage should be reduced or discon-

tinued. Side-effects and contraindications of Anhydron apply to Anhydron K and Anhydron KR. There have been reports of small-bowel lesions associated with administration of enteric-coated potassium in combination with thiazide diuretics. The incidence of these lesions is low, and a causal relationship has not been definitely established. Nevertheless, such products should be administered only when indicated and should be discontinued immediately if abdominal pain, distention, nausea, vomiting, or gastrointestinal bleeding occurs. Side-effects of reserpine include mental depression, nasal stuffiness, lassitude, laxative effect, sense of fullness in the abdomen, nightmares, and reduction in libido and potency. Reserpine should be used cautiously in patients with a history of mental depression, peptic ulcer, or ulcerative colitis.

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## DR. CACCAMO ACCEPTS CARDIOLOGY POST



Dr. L. P. Caccamo has been appointed Governor for the State of Ohio for the American College of Cardiology. The appointment was made at the annual meeting of the College in Boston on Feb. 17th. Dr. Caccamo replaces retiring Governor, Dr. Henry A. Zimmerman, St. Vincents Charity Hospital, Cleveland.

In his new office, Dr. Caccamo will be interested in finding qualified candidates for the American College of Cardiology, and will provide liaison between the national organization and Ohio.

## MEASLES PREVENTION

A directive from the Ohio Department of Health to the Local Health Departments, reads as follows:

"For measles prevention, gamma globulin will be supplied in the dosage of 0.1 cc. per pound of body weight—if given within 3 days after exposure—and between 4 and 6 days after exposure for modification in the dosage of 0.02 cc. per pound of body weight. Prevention is recommended for children age three or younger, and in children with pulmonary disease and other debilitating conditions.

For German measles gamma globulin is not recommended and not supplied by the Ohio Department of Health."

—Mahoning County General Health District

## MEDICAL ASSISTANTS' SOCIETY

The Annual Meeting of the Medical Assistants' Society of Mahoning County was held on Tuesday, April 6, 1965 at 8:00 p.m., at St. Elizabeth Hospital School of Nursing "Ivy Hall" with thirty-seven members in attendance. President Dorothy Klein presided at the meeting. Annual reports were submitted by committee chairmen.

A report was given on our forthcoming Educational Workshop by the chairman of the Educational Committee, Candy Shufflebarger. This will be our third annual workshop and will be held on Sunday, April 25th, in Hitchcock Auditorium at South Side Hospital. A diversified program has been planned, one which will be of great interest to all members. Several local physicians have been booked as guest speakers.

Election of officers resulted in the following slate:

President, Jo Sammartino; President Elect, Candy Shufflebarger; Recording Secretary, Nena LaBarbera; Corresponding Secretary, Alice Larson; Treasurer, Julia Gura; Councilors for three year term, Aurelia Sheridan and Laura Marinelli, and Councilor for one year term, Dorothy Pyatch. The installation of officers and dinner will be held on June 10th in the Jade Room of the Mural Building.

President Dorothy Klein announced that our next meeting will be changed from the 4th to the 25th of May inasmuch as the Ohio State Society of Medical Assistants Eighth Annual Convention will be held in Canton on May 20, 21, 22 and 23. This will allow our delegates to give the members a report of the convention. It will be our last business meeting before the new officers are installed. Members were urged to attend the convention since the programs in the past have all been excellent.

Laura Marinelli, Reporter





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(diphenhydramine hydrochloride)

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mine has an atropine-like action which should be considered when prescribing BENADRYL. **Side Effects:** Side reactions, commonly associated with antihistaminic therapy and generally mild, may affect the nervous, gastrointestinal, and cardiovascular systems. Most frequent reactions are drowsiness, dizziness, dryness of the mouth, nausea, and nervousness. BENADRYL is available in several forms including Kapseals containing 50 mg. The pink capsule with the white band is a trademark of Parke, Davis & Company.

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## *Wife Line*

This will be my last "Wife Line" for we now end one Auxiliary year and proceed directly to the beginning of another Auxiliary year. (It is hard to believe that I wrote my first "Wife Line" article three years ago!)

Our lives seemed to be filled with many beginnings and with many endings—for each is related to, and contingent upon the other. With each ending we have grown in experience and knowledge; and if the endings have culminated in a year of great accomplishments, much has been gained—including a feeling of personal pride, great satisfaction, and close friends with whom we have worked and grown to respect and to love for their ever willingness to help, for their ability and their enthusiasm.

Each Auxiliary year is different, for each administrative group is different—but the goals are similar. We are acutely aware of our objectives and of our desire to be of help to our community in the field of Health, to which our own doctor has dedicated his life, and during that dedication, I think he has included his wife.

We should be proud, indeed, to be Auxiliary members. We are fulfilling many needs in our varied programs—Health Careers, International Health, Legislation, Mental Health, Safety, AMA-ERF—which are helping so many people. That is our responsibility—we are carrying out our pledge to help all people at all times, in all ways in the field of Health.

Someone once said that there are three types of people—the few who make things happen; the many who watch things happen; and the big majority who have no idea what has happened! I know you all fit into the first category, but for the benefit of one or two, may I share some thoughts and remembrances.

The motto of the Auxiliary for this year was: "Dare to be Different," and we were—both daring and different! "We were daring" because we did new things—new committees were formed, the Board acted as the Program Committee, and made recommendations as to programs, projects and meetings for the year; new projects were started and old ones carried on in a new way. We reduced the number of meetings and had five meetings with record attendance, rather than the usual 8 meetings. Our committee meetings were more frequent and my three board meetings were changed to luncheon meetings with the Board members as my guests. We had more members participating in more activities.

"We were different" because now we were the County of the National President our own past president, Dena Evans, a most dedicated and sincere Auxiliary worker, was elected to the highest position in the National Auxiliary. This was an even greater distinction because she is the first from the state of Ohio to serve as National AMA Auxiliary president. And so the Auxiliary year 1964-1965 began—different than ever before! We were daring, different, our spirits high—our finances low! (It is rather expensive to be the county Auxiliary of the National president—what with our happy and proud presentations of flowers, telegrams and silver chafing dishes!)

A great deal has been accomplished this year. There has been close cooperation, mingled with the prerequisite three D's—Devotion, Dedication, and Darn Hard Work!! The results have indeed been remarkable. Membership chairman, Dorothy Shorr, a very willing and very conscientious worker, brought in a record number of 22 new members. AMA-ERF chairman, efficient Carolyn Dietz did a fantastic job and actually *tripled* our annual contribution which was raised to almost \$900.00. Mental Health chairman, Kathy Petraglia,

as usual, capable and enthusiastic, compiled information, with the help of her committee, and the printed booklets on diagnostic and therapeutic facilities soon will be distributed to physicians' offices. The facilities listed have detailed information concerning convalescent homes, facilities for retarded children, foster homes for retarded or mental patients, homes for unwed mothers, juvenile detention homes, clinics for emotionally disturbed children and adults, facilities for the aged, etc. This is a needed means of reference by physicians and other groups as well.

Our Health Careers Project, starting with the Canfield Fair Auxiliary Booth, continues working all year. We will always be grateful to Becky Friedrich and Dr. Fred for providing us with a permanent booth from which to inform the hundreds of high school students and parents, about the many, varied careers in the Health Field. (The new permanent booth is collapsible, four sided, complete with circus-type roof. As soon as the need for recruiting personnel for Careers in the Health Field has been completed, we can always sell hot dogs for AMA-ERF in our beautiful Fair Booth.) The Health Careers Day for High School Students was very successfully handled by chairman, Velma Holden, Vi Stechschulte and Edith Sisek.

Close to 200 students toured the various departments of the South Side Hospital. (Each year the tour is conducted alternately at the St. Elizabeth Hospital and the Youngstown Hospital Association North or South Side Hospitals.) A new career, that of Medical Social Worker was presented by Libby Werbner, our State Auxiliary Mental Health Chairman, who is a trained psychiatric social worker. Also, for the first time, a career as a Male Nurse was presented in addition to all the other hospital careers which were demonstrated and discussed completely.

The Health Career School Program Chairmen, Peggy Guju, Blanche Weiss, Bea Cukerbaum, and Eleanor Katz, were actively involved with contacting the guidance directors of the many junior and senior high schools and they supplied posters in many schools to bring attention to the various hospital careers. The very competent and experienced co-ordinators of the entire Health Careers Project, Jo Gambrel, Kathryn Herald, and Tula Phillips have planned a very fine program for the individual chairman to follow.

Once again, we are very proud that we have been able to help two student nurses—one at the St. Elizabeth School of Nursing; the other at the Youngstown Hospital Assn. School of Nursing. Our annual scholarships, which totaled \$900.00 have helped many nurses for many year to start their nursing careers.

We had a new project—we collected drug samples from physicians' offices for our International Health Program, which was so remarkably successful that, we packed 24 large cartons and sent them to World Relief in Detroit for shipment overseas to doctors who need these samples so desperately. Elie Dentscheff was chairman of this very successful International Health Program. Approximately \$6000.00 in drug samples were sent for distribution overseas.

We arranged three meetings and social gatherings for our Medical Society, where the Eldercare and Eldercare Bills were completely discussed by Dr. Jack Schreiber. Social chairman for these meetings, Kathy Petraglia and Carolyn Dietz, worked hard to make the necessary arrangements. Parodies on "Ain't She Sweet" and "The Rain in Spain" with lyrics about Eldercare, written by Dr. John McDonough, president of the Mahoning County Medical Society, received great acclaim and were sung at a State meeting in Columbus, by a trio of lovely high school students, among whom was the daughter of Jean and Dr. Joe Sofranec.

We were happy to distribute to each doctor's office, the free Diabetes Kits

which were used by them during National Diabetes Week for the free testing of patients for diabetes.

Added to our many and daring activities, we were hostesses to the Sixth District Meeting. Chairmen Ginny Shorten and Janet Brody and a fine committee arranged for a completely Oriental Day. Ginny Detesco had delightful invitations made, and Sabina Ondash made beautiful table centerpieces. Belva Hardin and her committee of hostesses were dressed in Japanese kimonos. (Kathleen Stotler, always ready to join in the fun, wore a magnificent Oriental style wig and could have played the female lead in "Teahouse, August Moon"!)) Our own member, Charlotte Brown, presented a most well-received demonstration on Ikebana—the art of Japanese flower arrangement. The completely Oriental luncheon, was eaten with chop-sticks! A presentation by Mrs. L. Brown, of Warren, of "My Fair Lady," and a tour of Dr. Murray's beautiful Medart Bldg. were enjoyed by a record attendance. At this Sixth District Meeting, Dena Evans was presented with an Honorary Life Membership in our Auxiliary—which she so well deserves.

Our Auxiliary and House Staff Wives combined efforts and opened many envelopes and counted thousands of dollars for the TB Xmas drive.

Mary Ann Kachmer, was responsible for bringing to the attention of our radio stations the radio series: "Mirror to the Mind" which was greatly enjoyed by the radio audiences. Pearl Gelbman, worked very hard to compile information for the year book, and did a remarkably fine job of correctly listing telephone numbers which had been completely changed in various areas by the telephone company. This was an involved and long task and required careful work during the summer. Flyers for the meetings were composed and sent out by Velma Holden and Pris Taylor, who were chairmen of this time-consuming activity.

This year, we joined with the Medical Assistants Society and our members had a delightful time, sharing the modeling with the members of the Medical Assistants group at their most enjoyable fashion show and card party, held at Idora Park. The capable Social and Program Chairmen, Carol Wiltsie and Camilla Geordan did a great deal of work and fine planning for our enjoyment.

A new committee created this year, was one of the most important and hard working—Ann Might and Dorothy Vuksta were the excellent chairmen of the "Cheer" committee. They visited and brought small gifts from the Auxiliary to all hospitalized or very ill at home members of our Auxiliary and members of the Medical Society and House Staff physicians and their wives. Much work was also done by their husbands, Dr. Jim and Dr. Mike, who were very alert and very faithful in checking the hospital admissions.

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The response to the "thinking about you" project, by our physicians and their wives, was overwhelming.

We were greatly saddened at the sudden and untimely death of our member, Edith LaManna. We extend sincere condolences to Dr. LaManna and to the family.

I believe that the meeting which I had looked forward to the most, was our last one, our Medicine and Religion Symposium held on April 28th. This was the highlight of my year, and I think the meeting of which I am most proud, for it was a kind of meeting and caliber of program that we, as a Medical Auxiliary, should be presenting. Beulah Mae Inui, almost an excellent chairman, was as enthusiastic as I, about this unusual program. Dr. Fred Schellhase, the finest moderator I have ever heard, and the names of panelists alone should give you an idea of what a tremendous and wonderful program we were privileged to present. The panelists—Dr. Berkowitz, Rev. Sharp, Father Adanko and Dr. Bunn, Dr. Cleary, Dr. Bernstein presented fascinating thoughts based on their respective religious and scientific knowledge. They discussed the case histories of the patient who feared she had a breast cancer, and the patient who had a mongoloid infant, both of whom wanted to know, "Why?" and "Why Did This Happen to Me?" The fact that three clergymen of different faiths could be together to discuss these problems with the physicians was of great significance—and taught us so much in so short a time. We wish this meeting could have continued for many more hours. The religious concepts of each of the represented faiths were brought out clearly.

The outstanding and distinguished panel of clergy and physicians who were generous enough to share their knowledge and their time with us, will long be remembered by the remarkable number of people in attendance. It was necessary for us to occupy the ballroom, since we had over 250

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people, each of which was completely involved with her own thoughts as everyone listened so quietly and was so completely enthralled. This was the largest number to have ever attended an Auxiliary meeting.

We were very proud indeed to have had the honor of Sister Consolata, Adm. of the St. Elizabeth Hospital, leading us in the Invocation. And, having the president of the Medical Society, Dr. John McDonough, as our guest speaker was a double honor.

We were happy to have with us presidents of the other Professional Auxiliaries in our area, and representatives of several religious and social groups, as well as our hospital groups: President, Mrs. Gilligan, and members of the Womans Auxiliary to the St. Elizabeth Hospital; Mrs. Thomas, president, and members of the Youngstown Hospital Women's Board, as well as members of the Youngstown Hospital Guild, enjoyed sharing this remarkable program with us. The Wives Club of the Youngstown Hospital Association's House Staff, was represented by Mrs. Rousseau, president, and her members. Members of the Wives Club of the St. Elizabeth Hospital's House Staff were also present. I know many of us will continue to think of this fine program for a long time. Carol Wiltsie and Camilla Geordan, Social Chairmen, were responsible for the lovely table decorations and for the luncheon. They took reservations, also, with the help of dependable Kathleen Stotler.

My last official act as president, was indeed a pleasurable one for me. At this large meeting we were delighted to surprise Mr. Howard Rempes, Ex. Sec. of the Medical Society with a citation granting honorary membership in our Auxiliary, in recognition of his many years of devoted assistance and ever-willing cooperation. An additional surprise, we also presented a certificate conferring special membership to his lovely wife, Eleanor, and electing her to the newly created position of "Honorary Executive Secretary" in our Auxiliary. We are proud indeed, to have Howard and Eleanor Rempes as our members.

At the wonderful meeting on April 28th, we also had election of officers. The new officers for 1965-66 who were unanimously elected are: Carolyn Turner, president; Maryella Ruth, President-elect; Dorothy Vuksta, recording secretary; Ruth Bruchs, corresponding secretary; Velma Holden, treasurer. May I extend my personal best wishes and congratulations and those of the Auxiliary to all the newly elected officers.

The next meeting of the Auxiliary will be held on May 26 in the Mural Room and will be the installation of the new officers. Please attend and let Carolyn know that she will have the same marvelous cooperation and complete support that you gave to me all of this year. I am so grateful. My sincere thanks to so many for their willing help at all times.

And so the Auxiliary year 1964-1965 has ended with great fulfillment. Now the 1965-1966 Auxiliary ship — always seaworthy, secure and safe — will have new officers aboard — officers who have proven their abilities, their talents, their willingness, and their enthusiasm, and who also have the necessary prerequisite 3-D's!!!

May God direct your course in the latitude of devoted and unselfish service, and in the longitude of cooperation and loyalty—helped by your capable, willing and trusting crew members. May you lovingly steer, direct and pursue a steady and sure course, despite a few turbulent seas—now and then; and a bit of apathetic calm—at times; but, always guided by the North Star of Sincerity of Purpose, leading to a clear and beautiful horizon.

Sayonara

Charlotte M. Tandatnick  
weary but happy President,  
Medical Auxiliary

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**Side Effects, Precautions, Contraindications:** As used for anxiety and tension, side effects are unlikely. Reversible extrapyramidal reactions may develop occasionally. In higher doses for psychotic disorders, patients may experience excessive drowsiness, visual blurring, dizziness, insomnia (rare), allergic skin reactions, nausea, anorexia, salivation, edema, perspiration, dry mouth, polyuria, hypotension. Jaundice has been exceedingly rare. Photosensitivity has not been reported. Blood dyscrasias occur with phenothiazines; routine blood counts are recommended. If symptoms of upper respiratory infection occur, discontinue the drug and institute appropriate treatment. Do not use epinephrine for hypotension which may appear in patients on large doses undergoing surgery. Effects of atropine may be potentiated. Do not use with high doses of hypnotics or in patients with subcortical brain damage. Use cautiously in convulsive disorders. **Available:** 1 mg. tablets. Bottles of 50 and 500. For full information, see your Squibb Product Reference or Product Brief.

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## DISEASE REPORTING AND CONTROL (Regulations Relative to)

(Continued)

### Regulation 12. (Diseases requiring isolation until lesions have healed.)

Infected persons with the following diseases shall be isolated until the acute lesions have healed:

Anthrax  
Chancroid  
Granuloma inguinale  
Lymphogranuloma venereum  
Staphylococcal infections (impetigo,  
boils, furuncles, abscesses)  
Trachoma

### Regulation 13. (Isolation.)

Infected persons with arthropod-borne encephalitis, malaria, Rocky Mountain spotted fever, and yellow fever shall be isolated from arthropod vectors for five days or during the acute stage of the disease, whichever is longer.

### Regulation 14. (Isolation requirement for other diseases.)

Infected persons with the following diseases shall be isolated as follows:

(A) Amebiasis: Until clinical symptoms have disappeared. A person whose occupation involves foods sold or served to the public shall not return to such an occupation until he is given written permission to do so by the health commissioner.

(B) Aseptic meningitis: (including lymphocytic choriomeningitis, non-arthropod-borne viral encephalitis, and viral meningoencephalitis). For seven days from the date of onset or for the duration of fever, if longer.

(C) Chickenpox: Until seven days from appearance of first crop of vesicles.

(D) Cholera: Until three consecutive stool cultures, taken no earlier than three days following cessation of drug therapy and no less than twenty-four hours apart, have been reported as negative for cholera vibrio.

(E) Epidemic diarrhea of the newborn: Until clinical symptoms have disappeared.

(F) Diphtheria: Until two cultures from the throat, taken after clinical recovery and not less than twenty-four hours apart, fail to show the presence of diphtherial bacilli. Where termination by culture is impractical, isolation shall be maintained for a period of fourteen days after the onset.

(G) Dysentery, Bacillary (shigellosis): Until four days after the cessation of acute symptoms. A person whose occupation involves foods sold or served to the public or close association with infants or children shall not return to such an occupation until he is given written permission to do so by the health commissioner.

(H) Gonococcal infections (specify type): Until clinical recovery.

(I) Influenza: For three days after onset of illness.

(J) Leprosy: Until apparent arrest has been present for at least six months, as determined by clinical observations and absence of acid-fast bacilli on repeated examinations.

(K) Measles: For five days after appearance of rash.

(L) Meningococcal meningitis or meningococemia: Until patient has received specific sulfonamide or antibiotic therapy for forty-eight hours or until release from restriction by the health commissioner on advice of attending physician.



(M) Mumps: Until swelling of the salivary glands has entirely disappeared and patient has clinically recovered.

(N) Pediculosis: Until application of an effective insecticide.

(O) Pertussis (Whooping Cough): Until two days have elapsed following the occurrence of the last characteristic cough, or until three consecutive cough plate cultures taken not less than twenty-four hours apart have been reported negative for hemophilus pertussis. When cough persists and termination by culture is not practical, isolation shall be maintained for a period of three weeks after onset.

(P) Poliomyelitis: For seven days from date of onset or for the duration of fever if longer.

(Q) Plague: Until two days following complete clinical recovery.

(R) Salmonellosis: (including paratyphoid fever). Same as provided for in division (G) of this regulation.

(S) Scabies: Until brought under medical treatment.

(T) Streptococcal infections: (including scarlet fever, streptococcal sore throat and erysipelas). For the duration of the acute illness or until the patient has been on antibiotic therapy for forty-eight hours, whichever is longer.

(U) Smallpox (variola): Until all scabs and crusts have disappeared.

(V) Syphilis: Until the patient is non-infectious.

(W) Typhoid fever: Until three consecutive cultures from fecal specimens, collected not less than twenty-four hours apart following clinical recovery and no earlier than three days after cessation of therapy, have been reported negative.

(X) Tuberculosis: As long as tubercle bacilli are discharged by the patient.

(Y) Typhus: Until the patient and his environment are louse free.

#### **Regulation 17. (Quarantine procedure.)**

The contacts of persons with the following diseases shall be quarantined as follows:

(A) Cholera: Medical surveillance of contacts for five days following last exposure to known case.

(B) Diarrhea of newborn: The contaminated areas as designated by the health commissioner shall be closed to new admissions, and the hospital shall accept no new admissions to the maternity service until the last baby in the contaminated nursery has been discharged and terminal disinfection carried out, unless adequate personnel and satisfactory facilities, including uninfected nurseries, are available to care for new admissions. All infected and suspected babies shall be cared for by medical and nursing personnel not providing care for non-infected patients. Further restrictions shall be determined by the health commissioner.

(C) Diphtheria: Contacts whose occupation involves the handling of foods or close association with children shall not return to such an occupation until shown by bacteriologic examination of the throat not to be carriers, or released from restriction by the health commissioner on advice of the attending physician.

(D) Staphylococcal infections: (institutional). Same as provided for in division (B) of this regulation.

(E) Meningococcal disease: Until given prophylactic sulfonamide or until released by the health commissioner on advice of the attending physician.

(F) Smallpox: All persons living or working on the same premises as the person who develops smallpox, or otherwise having intimate exposure

shall be considered contacts and promptly vaccinated or revaccinated or quarantined for sixteen days from the last exposure. If such contacts are considered as immune persons by reasons of prior disease or successful vaccination within the previous three years, they shall be kept under observation until the height of the recent vaccination has passed. If the contact is not considered immune, he shall be kept under observation for sixteen days from the last contact. Any rise in temperature during this period shall require that he be isolated until smallpox is excluded.

(G) Salmonellosis: (institutional). Until released from restriction by the health commissioner.

(H) Shigellosis: (institutional). Until released from restriction by the health commissioner.

—Sidney Franklin, M.D., M.S.P.H.,  
Health Commissioner of Youngstown

### OUT-PATIENT INSURANCE

On the 27th of April, your office received a mimeographed set of information from the Medical Society, regarding some health insurance plans that pay for diagnostic studies on an out-patient basis in your office or at a hospital out-patient clinic.

This is important and useful information. If you need an additional copy, call the Medical Society office.

## HEALTH DEPARTMENT BULLETIN

MARCH, 1965

	Resident		Non-Resident		Total
	M.	F.	M.	F.	
Births .....	93	109	125	134	461
Deaths .....	101	71	77	44	293
Infant Deaths .....	3	0	2	2	7

MARCH, 1964

Births .....	105	85	137	133	460
Deaths .....	60	66	49	43	218
Infant Deaths .....	4	2	3	2	11

### COMMUNICABLE DISEASES

	1965		1964	
	Cases	Deaths	Cases	Deaths
Measles .....	0	0	4	0
Scarlet Fever .....	6	0	2	0
Tuberculosis .....	3	1	6	1
Gonorrhoea .....	22	0	12	0
Syphilis .....	5	0	5	0
Infectious Hepatitis .....	1	0	0	0
Rheumatic Fever .....	1	0	2	0

### VENEREAL DISEASES

New Cases	Male	Female	
Syphilis .....	2	2	
Gonorrhoea .....	9	11	
Total patients .....			24
Total visits (patients) .....			140

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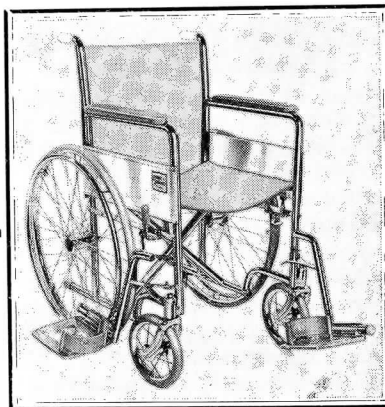
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## VOLUNTARY HEALTH ORGANIZATIONS

(Fifth in a Series)

### Organization: AMERICAN CANCER SOCIETY, INC.,

#### Mahoning County Unit

Address: 401 Terminal Building, Youngstown

Telephone: 746-2970

Executive Director: Carl M. Holzbach

General Description: This organization is concerned with all aspects of neoplastic disease, including research, education and patient care. It sponsors a broad program of services both on a national and local level.

Services: 1. Direct services to patients include:

- a) free dressings to home cancer patients.
- b) loan of sickroom supplies, including beds, bedpans, wheelchairs, food blenders, etc.
- c) Provision of pain-killing drugs.
- d) visiting nurse services.
- e) transportation to and from hospital for X-ray therapy.

2. Educational services include:

- a) the journal CA and other professional cancer literature.
- b) films on a professional level about cancer.
- c) films and other material for lay groups and audiences.

How to Obtain Services: Referrals are accepted from physicians, hospital staffs, nurses, relatives, friends, other agencies. In all cases, the physician must certify that the patient has cancer.

Finances: All funds are derived from an annual crusade which takes place in April. This is a public solicitation. No fees are charged for services.

Staff: Executive director, one secretary. All other help is by volunteers.

\* \* \* \* \*

### Organization: TRU-MAH-COL Chapter, National Multiple Sclerosis Soc.

Address: 5154 Southern Boulevard, Youngstown

Telephone: 788-2097

Executive Secretary: Elma M. Kurfess

General Description: This organization is interested in all aspects of multiple sclerosis, including research, education and direct patient services.

Services: Direct patient services include:

1. Social service survey on each referred patient.
2. Physical therapy and rehabilitation on physician's recommendation.
3. Loan of equipment to patients, including wheelchairs, crutches, walkers, canes, braces, hospital beds, commode chairs, etc.
4. Payment for one annual physical examination per patient per year.
5. Monthly patient meetings.
6. Occupational therapy at home and at meetings.

How to Obtain Services: Referral may be made by physicians, relatives, friends, etc.

Finances: The activities of this organization are supported entirely by public donations, including an annual door-to-door drive. No charges are made for services.

Staff: Executive Secretary; part-time social worker.

\* \* \* \* \*

### Organization: YOUNGSTOWN HEARING AND SPEECH CENTER

Address: 69 Illinois Avenue, Youngstown

Telephone: 747-3591

Executive Director: May Vetterle

**General Description:** This community agency provides services to those who have difficulty in hearing or speaking, whose ability to communicate with others is impaired.

**Services:** A large variety of services are provided; these include:

1. Diagnostic Hearing Services.
2. Therapeutic Hearing Services, including auditory training, lipreading, speech, voice, and language training, and pre-school nursery program.
3. Diagnostic Speech Services.
4. Therapeutic Speech Services.
5. Additional Services including casework counseling, parent education and counseling, rehabilitation.

**How to Obtain Services:** Referral may be made by physicians, parents, schools, other agencies, patients. Twice annually, in May and at the Mahoning County Fair in September, the Center offers a week of free hearing tests open to the public.

**Finances:** The Center derives part of its support from the United Appeal. Patients are charged fees for services provided. Initial evaluation fee is \$15; therapy fees are \$4 per half-hour session. Fees are adjusted according to the patient's ability to pay.

**Staff:** Executive director, who acts as supervisor and social worker; four full-time and one part-time qualified hearing and speech clinicians.

(to be continued)

## DR. SCHREIBER TESTIFIES BEFORE SENATE

Dr. Jack Schreiber, a member of the national speakers bureau of the American Medical Association, recently received an invitation to testify at Senate hearings on medicare legislation. The invitation came in the form of a telegram from Sen. Harry Byrd, chairman of the Senate Finance Committee, which is conducting public hearings on the voluminous bill.

During the past two years, Dr. Schreiber, speaking for the AMA, has been in more than twenty states engaging in debates with medicare proponents, or giving talks before civic groups.

Dr. Schreiber believes that the Senate invitation came as a result of a letter that he wrote to Sen. Byrd, giving his views on medicare legislation.

## A DECLARATION OF INDEPENDENCE

When in the course of human events the political party in power endeavors to perpetuate its rule by socialization of all personal services and to that end confiscates the property of the industrious and frugal citizens to reward the weak and lazy voters;

And when the party in power passes laws to restrict the free and legal practice of medicine, whose members have a tradition of providing the highest quality in the world;

Then it is time for the members of the medical profession to assert their independence from government control under the Constitution of the United States which provides that no citizen shall be forced into involuntary servitude.

It is fitting and proper that notice should be given in advance that doctors will refuse to serve under any plan of social security or other socialization of medical care. Without doctors no plan of medical care will work.

We shall continue to treat the sick under the American plan of free choice and personal relationship. We shall do our best to give our patients good medical care.

But we will not submit to supervision by a government which tells us how to treat our patients.

Signed

James L. Fisher, M.D.

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## PROCEEDINGS OF COUNCIL

April 13, 1965

The regular meeting of the council of the Mahoning County Medical Society was held on Tuesday, April 13, 1965, at the Mural Room, Youngstown, Ohio.

The following physicians were present: John J. McDonough, president, presiding, H. N. Bennett, B. C. Berg, G. E. DeCicco, F. A. Friedrich, S. F. Gaylord, Frank Gelbman, R. L. Jenkins, Bertram Katz, J. V. Newsome, C. E. Pichette, H. J. Reese, F. A. Resch, Jack Schreiber, C. K. Walter, and Kurt Wegner. Also present were: Drs. R. A. Hall, J. W. Tandatnick, A. J. Bayuk, B. M. Brandmiller, and Mr. Sidney Moyer and William James. Absent were: Drs. L. P. Caccamo, L. J. Gasser, A. W. Geordan, R. J. Scheetz, C. W. Stertzbach, S. W. Chiasson, and J. F. Stotler.

The meeting was called to order at 7:30 p.m. The minutes of the previous meeting were read and approved.

Dr. Ray Hall, president of the Medical-Dental Bureau, discussed the Bureau, giving its history and background. He answered a number of questions and announced that there is to be a Medical-Dental Bureau meeting on Monday, April 26, and suggested that council members attend. Dr. McDonough encouraged all members of council to attend the meeting.

Dr. Tandatnick, Housing Chairman, who had been requested to look into the possibility of office or meeting space for the Medical Society at Youngstown University, reported that Dr. McCann, a member of the University Board, would be agreeable to present the request to the University Council, but would want it put to a vote of the entire Medical Society first. The report was accepted and filed.

Dr. McDonough reported on the result of a poll of members interested in being on the Youngstown Board of Health. The following members expressed interest: Drs. Banez, D. Belinky, Breesmen, Bernat, Goldberg, Goudsmit, Harvey, Klodell, Kravec, Nemeth, Porter, E. Shapira, Sovik, W. P. Young, S. M. Zervos. Dr. McDonough read a copy of the letter sent to Mayor Flask confirming his choice of Dr. Goldberg for appointment to the Board.

Dr. Wegner quoted costs for sending the Bulletin to interns and residents. Following discussion, the motion was made, seconded and duly passed that the Medical Society continue to send the Bulletin to the three hospital libraries.

Dr. McDonough announced that the total contributions by doctors to the Alcoholic Clinic building fund was \$2,550, and that this amount came from 56 doctors.

Sidney Moyer and Bill James then came into the meeting to discuss the current Mental Health Center fund raising drive. They gave statistics concerning the project and answered questions. Mr. Moyer asked Medical Society approval of the drive and for suggestions on how to conduct the campaign among physicians. After they left the meeting, the motion was made, seconded and duly passed that the campaign be endorsed. Council approved sending out letters to members for solicitation, but felt that Mr. Moyer could do better by making personal contacts. Dr. McDonough stated he would discuss it with Mr. Moyer.

A letter was read from the Health and Welfare Council of the Community Corporation, signed by Rev. Samuel G. Warr, Chairman, stating that the Council had voted not to recommend the admittance of the Foot Clinic to the Community Chest. The letter questioned the number of people going to the Foot Clinic rather than to the local hospital clinics. Following discussion, the motion was made, seconded and duly passed that a letter be sent to Rev. Warr, with a copy to the chiefs of both orthopedic clinics pointing out the

services available. It was suggested a note be placed in the Bulletin reminding physicians that indigent orthopedic patients may be referred to the hospital clinics.

Dr. Brandmiller, chairman of the Pre-School Health Committee, reported on a meeting of his committee with Mr. Pollock and Dr. Conway of the Public School system, concerning Project Head Start. He reported a motion from his committee requesting Medical Society approval of Project Head Start. Following discussion, the motion was made, seconded and duly passed that we send a letter to Mr. Pollock stating that (1) we will take care of the indigent, but (2) we urge those who have family doctors to go to their doctors, and (3) also try to make use of the outpatient pediatric clinics at the hospitals.

Dr. Bayuk reported on a situation involving the Trumbull County Welfare Dept., wherein Trumbull patients are sent to Youngstown Hospitals and led to believe that local doctors are paid by the Trumbull County Welfare Dept. Following discussion, the motion was made, seconded and duly passed that the matter be referred to Dr. Westbrook, Councilor for the Sixth District, OSMA, for study and reference to the Sixth District.

A letter from Mayor Flask was read, in which he gave the names of the City Physicians as being Dr. Ellison and Dr. Holonko, and their duties being primarily police duties. Dr. McDonough stated that since this does not solve the emergency call problem, he will bring it up again at next council meeting.

A letter and enclosure from Dr. McConnell were read. He asked council approval for a letter to patients advising them as to good health insurance. Following discussion, the motion was made, seconded that a letter be sent to Dr. McConnell suggesting that the health insurance brochure would be ethical and proper to send out to patients and would be general enough not to get anyone in trouble. The motion was then made and seconded that the original motion be amended to state that first a note should be sent to the AMA concerning whether it would be ethical. Motion to amend was passed. Original motion was passed.

Dr. DeCicco reported for the delegates on the resolutions to come before the Ohio State Medical Association. He reviewed each resolution and gave the delegates opinion.

Dr. McDonough announced that there would be no council meeting in May due to the absence of so many members attending the Ohio State Medical Association House of Delegates meeting.

Bills were read. The motion was made, seconded and duly passed that each bill be paid.

A letter was read from Dr. R. W. Fenton concerning the medical and health problems at the Juvenile Research Center. The secretary was requested to send a copy of the letter to Mrs. Kenneth Camp.

Meeting was adjourned.

—Howard Rempes  
Executive Secretary

## DELEGATES MEET WITH DISTRICT

Delegates of the Mahoning County Medical Society met with other district delegates at a Sixth Councilor District meeting held at Congress Lake, April 21, prior to the House of Delegates meeting of the Ohio State Medical Association.

Dr. G. E. DeCicco, Dr. S. F. Gaylord, and Dr. J. V. Newsome attended as delegates. Dr. F. A. Resch, president-elect, and Howard Rempes, executive secretary also were present.

Proposed state resolutions were discussed. Dr. Resch introduced the non-participation resolution, which was then passed by the Sixth District delegates.



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## BABSON ADDRESSES APRIL MEETING

David L. Babson, nationally famous investment counselor, proved to be an outstanding speaker, as he spelled out the ABCs of intelligent investment, at the April 20th meeting of the Medical Society. Mr. Babson was introduced by Dr. J. W. Tandatnick, program chairman.

In a brief business meeting preceding Mr. Babson's talk, Dr. Jack Schreiber explained the current status of medicare legislation and read a proposed resolution concerning non-participation. A motion was unanimously passed that the intent of the resolution be presented to the House of Delegates at the Ohio State Medical Association meeting in May.

More than 100 members and guests attended the meeting.

## S. Q. LAYPIUS OBSERVES:

Who remembers Sen-Sen? Who remembers when all the bars had small dishes of cloves for customers to chew on the way home to fool the little woman?

Who remembers free lunch? That buffet in the "Hole-in-the-Wall" on Twelfth St., in Philadelphia, in the days before Prohibition was so inviting. Liverwurst, Blood pudding, Braunschweiger, smoked herring, pretzels, pumpernickel; for a five-cent glass of beer a poor medical student could help himself to the free lunch, go back to school well fortified and save himself thirty-five cents. Those days, all the saloons had free lunch.

In the Old Ale House on Drury Lane in the early nineteen hundreds they would go to the cellar to draw our ale and bring it up cool and foaming but not refrigerated. Ice was for special drinks like cocktails which queer people ordered. Men drank their whiskey neat and washed it down with water or better, beer.

Medical students drank beer and listened to the tales told by the newspaper men, the merchants and actors who frequented the place. Early in World War I there were both English and German sympathizers and arguments would wax warm.

Old Mother McGillan usually sat by the fireplace, knitting. When the conversation would get too loud she would put down her knitting, come over to the bar and say "Now, now quiet down." That was all that was necessary. Everybody quieted down, for at least ten minutes.

Old Morley would come in about ten o'clock. He was a smallish man with a derby hat, ruddy cheeks and eyes of Irish blue. A linen merchant, it was said, and well fixed with the world's goods. He would lean on the bar and everyone would shout "Here's Morley! how are you feeling Morley?"

His standard reply was "I haven't had my shoes off for three days." Then he would cock one eye to see if Mother McGillan was listening, and add "I feel like a chicken with its first egg—more uneasy than sick." He would tell one funny story after another. I never saw him buy a drink.

Sometimes before examinations we would go down to the "Hole-in-the-Wall" with our notes and quiz each other. We would start out real serious about the origins and insertions of muscles, the cranial nerves and the pathways of patellar reflexes, but after three beers arguments would develop which sometimes led to contests of strength. These were frowned on by old Conrad the one-eyed bartender. We always went home singing about old Alma Mater and somehow we got through the examinations.

I wonder if medical students are like that today? Life seems so serious now.

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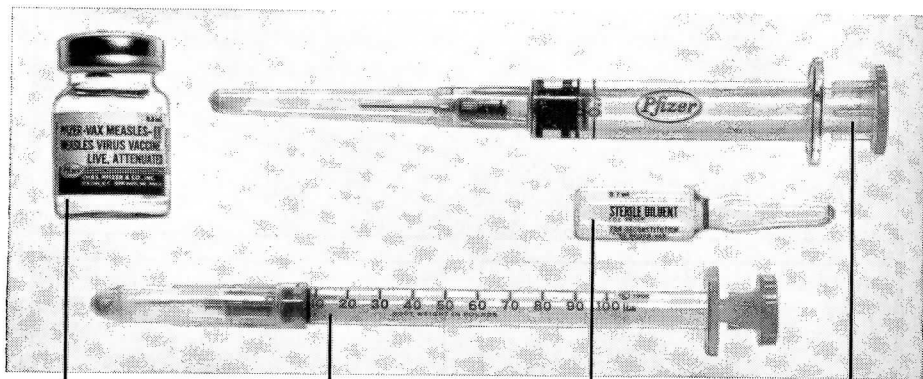
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one 0.7 ml. ampule of sterile diluent for reconstitution. This diluent need not be refrigerated, and must not be frozen.

one sterile disposable syringe with needle calibrated for reconstitution and administration of the vaccine itself.

**Contraindicated:** In acute illness, cerebral damage, and in children with a history of febrile convulsions; in malignant disease, tuberculosis, and during any therapy that depresses resistance; in pregnant women; and where marked egg sensitivity exists.

**Warning:** There should be at least a one-month interval between administration of live measles vaccine and any other previously administered live vaccine. Inoculation should be deferred if gamma-globulin or a blood transfusion has been

administered within the preceding six weeks.

**Precautions:** The possibility of hypersensitivity to neomycin (up to 50 mcg. per dose) should be considered. During an outbreak of poliomyelitis, inoculations should be deferred. Not indicated for German measles (rubella).

**Adverse Reactions:** Fever and rash, and rare local reaction in the injected arm may occur.

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