

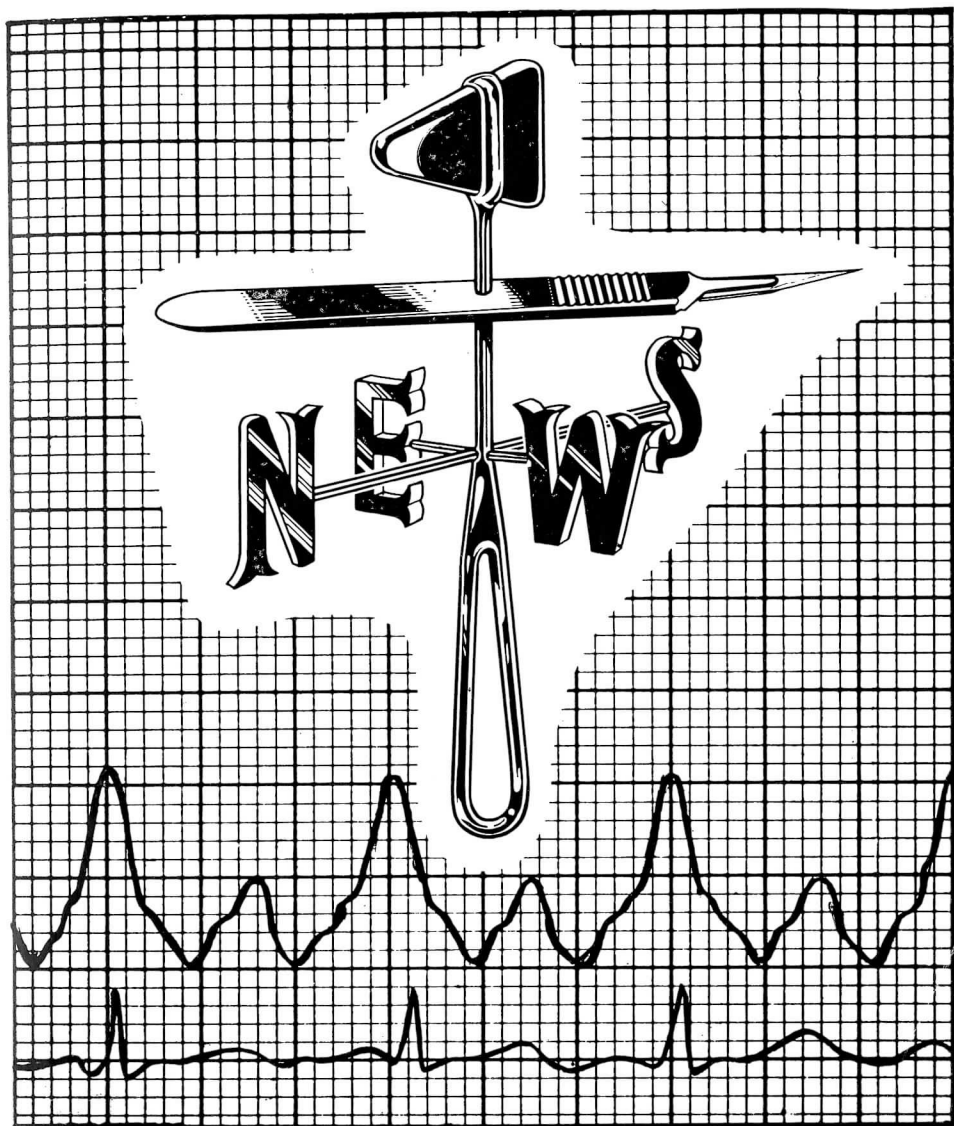
BULLETIN

of the
MAHONING COUNTY
MEDICAL SOCIETY

Volume XXXV

Number Six

JUNE, 1965



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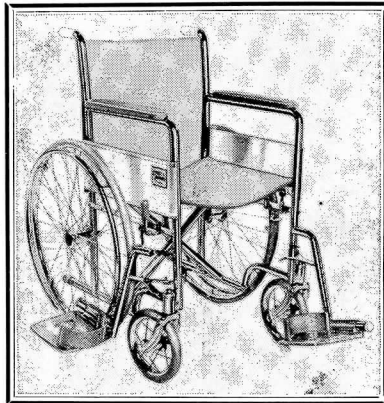
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JUNE MEETING

Tuesday, June 15, 1965

MURAL ROOM

SPEAKER

Irwin W. Bean, M.D.

TOPIC

**Governmental Control of Medical Practice in
Saskatchewan, Past, Present and Future**

6:00 p.m. Social Hour

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

HAPPY VACATION!

DATES TO REMEMBER

June 20-24 AMA Annual Convention, New York City

Sept. 2-6 Canfield Fair—Medical Health Tent

Sept. 21 Next meeting, Mahoning County Medical Society

Oct. 20 Postgraduate Day, Sixth District, Canton

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Canfield, Ohio

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St. Elizabeth Hospital

H. J. REESE, Treas.
3720 Market St.

Council**Delegates****Alt. Delegates**

B. C. BERG	R. L. JENKINS	G. E. DeCICCO (1965)	H. N. BENNETT
F. A. FRIEDRICH	BERTRAM KATZ	J. V. NEWSOME (1966)	L. N. CACCAMO
FRANK GELBMAN	C. E. PICHETTE	C. W. STERTZBACH (1967)	L. J. GASSER
A. W. GEORDAN	C. K. WALTER	S. F. GAYLORD (1968)	S. V. CHIASSON

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

WHEN THE CHIPS ARE DOWN

Almost daily I am in conversation with one or more of my colleagues regarding the present crisis in medicine. To a man they are discouraged and believe that our cause is lost and that free medicine is in very serious jeopardy. Scores of physicians in our Medical Society and thousands of other doctors throughout the country have spent their "precious few" free hours making informative talks telling the people why medicine in the United States is the finest in the world, and what must be done to keep it that way.

Win or lose, this great body of physicians deserves our deepest gratitude for trying to stop a socialistic trend that can do nothing more than reduce progressively, through the years, the excellent quality of medical care in the United States.

There are, of course, "the others," in and out of the actual practice of medicine who now wish to get on the "something for nothing" bandwagon and be quoted for the record, if and when, socialism comes. In this regard organized medicine recently received a king-size kick in the hypogastrium when the New England Journal of Medicine printed an editorial striking out in a strange and derogatory manner against the American Medical Association.

How does one fight this many-pronged attack? Some of us give up and quit. Others persevere, continue the good fight and resolve that they will ultimately win. One of the latter, a staunch advocate of free medicine, and one of the finest doctors in our community, is in there pitching hard and encouraging other doctors to hold their ground. Further, he is at an age when he could, if anyone could, step aside and let someone else wage the war. Not so—Jimmy Fisher. He saw this scandalous article in the New England Journal of Medicine and did something about it. He wrote a letter to the editor of this magazine and sent a copy to Dr. Robert E. Tschantz, Dr. F. J. L. Blasingame, and to me. How refreshing and encouraging! Even the stamp on the letter's envelope showing Winston Churchill's picture reminds me of the firm resolve that is Dr. Fisher's and should be an integral part of all of us. If strongly unified, we cannot be defeated. A firm stand for continued high quality medical care in the United States must be made by every doctor.

Here is Dr. Fisher's letter:

Joseph Garland, M.D., Editor
The New England Journal of Medicine
Dear Doctor:

Your vicious attack on "Organized Medicine" in the issue of May twentieth seemed strangely out of place in the official publication of the Massachusetts Medical Society.

Is the Massachusetts Medical Society no longer a component of the American Medical Association? Your editorial sounded so detached.

No fighter looks good when he is losing. The A.M.A. has fought the good fight since 1932 and so far we have won. F. D. R. had us groggy for a while. Harry had us on the ropes but we came back and beat them.

Now it looks again like we are losing. Why do you rush in to add a blow below the belt?

Out here in Ohio we are girding our loins for a tougher go against Socialism. That is the way you should do in Massachusetts. Try to help.

Yours truly,
(Signed) James L. Fisher, M.D.

Thank you, Jimmy. Thank you very much.

—John J. McDonough, 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 XXXV

June, 1965

Number 6

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

EDITOR

KURT WEGNER, M.D.

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John G. Guju, M.D.
Harold J. Reese, M.D.

— EDITORIAL —

This issue of the BULLETIN carries the sixth and concluding article about our voluntary health organizations. We felt it important to acquaint our profession with the ideals and purposes of these organizations, and to define our relationship, as individual citizens, as physicians, and as a society, to them. From a practical point of view, it is useful both for our patients and for us to be acquainted with the various health services available from these associations.

The voluntary health organizations fill a number of needs in the community. Their services fill gaps in the health field which might otherwise go begging. They provide an outlet for those individuals whose personal experiences give them a need for constructive action in particular health fields. Also, they provide a wealth of worthwhile projects and opportunities for community leadership for those individuals and groups desiring such activity. Perhaps their greatest asset is that they are private and voluntary and were founded out of real need.

The community looks to physicians for endorsement of these health agencies. However, such endorsement must be based on our informed opinion of the organizations, their goals and activities. Once we have decided that our endorsement is merited, then we should lend our support wholeheartedly.

During the last several months, we have been faced with even more than the usual number of financial requests for various community projects and organizations. Physicians traditionally have demonstrated their generosity in the support of such projects. This has been part of our function as an enlightened professional group. Further requests for funds, notably in relation to the hospital expansion programs, are imminent. It behooves us to continue our generosity. But with financial requests arriving from all directions, let us be sufficiently well informed to give where our contributions can be of maximum usefulness.

—Kurt Wegner, M.D.
Editor

DELEGATE ACTIVITY IN COLUMBUS

The Mahoning County Medical Society was well represented at the House of Delegates of the Ohio State Medical Association during the annual meeting, May 9-11. Delegates in attendance were Drs. G. E. DeCicco, S. F. Gaylord, J. V. Newsome, and L. P. Caccamo.

High spot of the opening meeting of the House of Delegates on Sunday was the presentation of the Mahoning County resolution on non-participation. The resolution was presented by Dr. DeCicco, head delegate, who then requested permission for Dr. Schreiber to speak. Although not a delegate, Dr. Schreiber was granted the privilege of speaking for the resolution. Following his presentation, he was accorded a spontaneous round of applause—a rare occurrence in that staid House. The resolution was unanimously accepted for consideration.

Three resolutions committees met on Monday to consider the twenty-five resolutions before the House. Dr. DeCicco is a perpetual member of one of the committees. The other Mahoning delegates attended the meetings and took part in the debates. Dr. Schreiber again appeared before the proper committee to discuss the Mahoning resolution. Here again his defense of the resolution was greeted with applause.

Following open discussion on all resolutions, the three committees went into executive session to formulate opinions on each resolution. In most cases, resolutions were rewritten for purpose of clarification. In some cases, the committee recommended disapproval of the resolution. At the Tuesday, and final, meeting of the House of Delegates, the chairmen of the three committees made their reports to the House.

The Mahoning resolution had been rewritten, not to change its intent of calling attention to physicians that they might or might not participate in Medicare, but to clarify it. The reading of the revised resolution set off a two-hour debate, with the Cleveland delegation using every parliamentary maneuver in the book in an attempt to defeat it. When it could be put to a vote, it passed 79 to 71. Cleveland's opposition had been predicted due to the fact that a Cleveland man, Dr. J. Robert Hudson, is a nominee for president of the American Medical Association.

In other business, Dr. Schreiber was nominated for alternate delegate from Ohio to the AMA. He lost in the vote to Dr. Robert N. Smith of Toledo, long-time OSMA delegate, and popular Councilor of the Fourth District. Dr. L. C. Meredith, of Elyria, was elected to the office of president-elect of the Ohio State Medical Association. Dr. Henry A. Crawford, of Cleveland, took over the President's office from Dr. Robert E. Tschantz.

The delegates approved a resolution to increase Ohio State Medical Association dues to \$50, effective Jan. 1, 1966. This is a \$15 increase. Approved, also, was a resolution encouraging the AMA to approve some intern and residency training for osteopaths in AMA approved hospital programs.

The resolution calling for exemption from OSMA dues for members over 70 was turned down. It was pointed out that the philosophy of the OSMA has been that need, rather than age, be the criterion for such a benefit.

A complete summary of action on all resolution will be printed in a forthcoming issue of the Journal of the Ohio State Medical Association.

— REMINDER —

All physicians, who have not already done so, are reminded to return their pledge cards to the Mental Health Center.

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THE RESOLUTION

Following is a copy of the resolution, passed by the Ohio State Medical Association House of Delegates at the May 11th meeting:

WHEREAS, The medical profession rejects the principle of government subsidization of the medical profession, and

WHEREAS, We believe that subsidization of the sick of any age should be limited to the indigent, and

WHEREAS, The medical profession rejects the use of any action that might be construed as a strike against the sick, and

WHEREAS, It is our intention to continue in the future, as we have in the past, to render all necessary medical care to all people regardless of inability to pay, and

WHEREAS, The United States has achieved the highest quality of medical care obtainable anywhere, and

WHEREAS, The so-called Medicare Bill (H. R. 6675) violates the aforementioned principles and would tend to result in a system of inferior medical care, and

WHEREAS, Sec. 6 of the Code of Ethics of the American Medical Association states that "a physician should not dispose of his services under terms or conditions which tend to interfere with or impare the free and complete exercise of his medical judgement and skill or tend to cause a deterioration of the quality of medical care," and

WHEREAS, A physician cannot morally, ethically or professionally serve the best interest of his patients under any third party program that intrudes into the physician-patient relationship and interferes with medical judgement as to diagnosis and treatment, now

THEREFORE, BE IT RESOLVED, That the Ohio State Medical Association emphasize to all physicians that they are free to decline to participate in the system of medical care established by H. R. 6675 or any similar legislation, and that they are urged to maintain their professional principles, to continue to care for their patients as before, even without pay, but not to participate in any system of medical care that would lend itself to a deterioration in the quality of that care, and

BE IT FURTHER RESOLVED, That the Ohio State Medical Association direct its Delegates to the American Medical Association to present, to the June 1965 Annual Meeting of that organization, a similar resolution urging all physicians in the United States to adopt the same course, and

BE IT FURTHER RESOLVED, The action recommended by this resolution be publicized in a suitable manner to the entire membership of the Ohio State Medical Association.

SEN. GILMARTIN THREATENS PHYSICIANS

Ohio State Senator Thomas P. Gilmartin issued a statement on Tuesday, May 18, that he was going to ask the state legislature to revoke Ohio Licenses to practice medicine for all doctors who refuse to go along with the Medicare Law.

However, the Medicare Bill, itself, specifically states that the individual physician may or may not take part in the program, according to his own desire. Furthermore, the so-called "non-participation" resolution, passed by the Ohio State Medical Association, again leaves it up to the individual physician as to whether or not he wishes to participate. The purpose of the resolution was to point-out to doctors that they did have a choice.

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Bulletin Board

We regret to announce the recent death of Lester O. Gregg, Sr. in Pittsburgh. He was the father of E.N.T. man Lester O. Gregg, Jr. We all extend our sympathy.

We all wish a speedy recovery to William L. Mermis, former Youngstown. He is back in the hospital again in Arizona.

At the recent Ohio State Medical Association meeting in Columbus one of the outstanding exhibits was sponsored by St. Elizabeth Hospital. It featured the very new Diabetic Manual written by Staffman Leonard P. Caccamo; Edward Kessler, Director of Medical Education in the Department of Internal Medicine; and Dr. J. Leonard Azneer, Ph.D., Rabbi of Anshe Emeth Temple and member of the Staff of the Department of Philosophy, Youngstown University.

—Harold J. Reese, M.D.

SASKATCHEWAN SPEAKER NEXT

What really happened in Saskatchewan? Members of the Mahoning County Medical Society will be able to get first hand information at the Tuesday, June 15, meeting of the Society.

Speaker will be Irwin W. Bean, M.D. of Regina, Canada. Dr. Bean is a general practitioner and past president (1962) of the College of General Practice of Canada. He was born in Saskatchewan, obtained his B.A. from the University of Saskatchewan in 1938, and his M.D. and C.M. from McGill University in 1943. He is 48 years of age.

He was a member of the Board, Saskatchewan Division, Canadian Medical Association for two years. In addition, he was Chairman of the Economics Committee for several years and is still a member. He has been a representative of the College of Physicians and Surgeons on the Medical Care Insurance Commission since 1962.

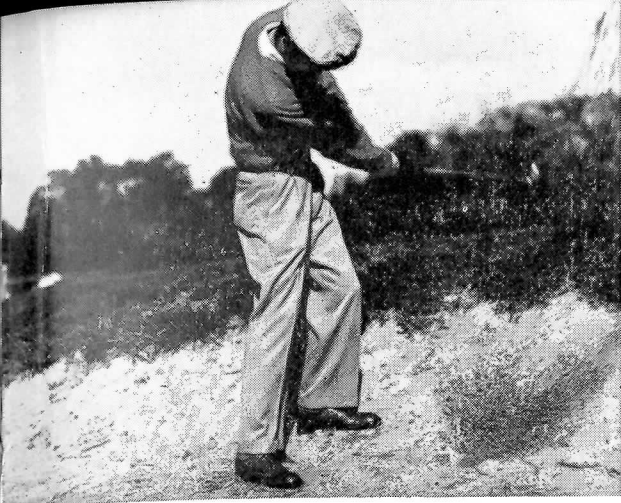
The meeting will be held at the Mural Room. Following a social hour, a buffet dinner will be served at 6:30 p.m. Dr. Bean will speak at 7:30 p.m. Reservations for dinner may be made by sending a check for \$3.50 to the Medical Society office. As usual, there is no charge for those wishing to come after dinner to hear the speaker.

TWO ORTHOPEDIC CLINICS AVAILABLE

The Council of the Mahoning County Medical Society would like to remind all physicians that both St. Elizabeth Hospital and Youngstown Hospital Assn., South Unit, maintain orthopedic clinics which are in operation every Tuesday morning. Any physician may refer patients to these clinics. No patient is turned away. Any treatment indicated is available.

AMA USES MAHONING PHOTOS

The current issue of "PR Doctor," a nationally circulated Public Relations magazine published by the AMA, contains material submitted by the Mahoning County Medical Society. In conjunction with an article about Community Health Week (Nov. 7-13), entitled, "How to Surpass '64 in '65," seven photographs are used. Three of these are from the annual medical health tent at the Canfield Fair. Pictured are the medical careers booth of the Woman's Auxiliary, a GP exhibit, and the Heart Association exhibit.



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Also available as 'Soma' Compound with Codeine: carisoprodol 200 mg., phenacetin 160 mg., caffeine 32 mg., codeine phosphate 16 mg. (Warning: may be habit-forming.)

(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.*

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VOLUNTARY HEALTH ORGANIZATIONS

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Organization: YOUNGSTOWN SOCIETY FOR THE BLIND AND DISABLED

Address: 2246 Glenwood Avenue, Youngstown

Telephone: 788-2411

Executive Director: John F. Myers

General Description: It is the purpose of the Society to further interest in the blind and disabled, and to open to them all possible avenues of independence, self-respect and social usefulness, through investigation, education, employment and recreation.

Services: The broad range of services include:

1. A comprehensive pre-school children's program.
2. An optical aids program, including ophthalmological consultation, and counseling and training in the use of optical aids.
3. An educational program including free instruction in cooking, knitting, ceramics, Braille, cane walking, typing, golf, swimming.
4. Clearing house for Braille books, talking records, tools, canes, aids and appliances especially adapted for the blind.
5. Case work services.
6. Manufacturing and sales center, as well as employment center, for products and services for the blind.
7. Sponsor for social recreational and hobby activities.

How to Obtain Services: Referrals are accepted from the following sources: ophthalmologists and other physicians, schools, VNA, hospitals, public and private welfare organizations. Referrals must be made on forms available from the society.

Finances: The Society is financed by the United Appeal, Youngtown Lions Clubs, and charges to patients.

Staff: Executive director, social worker, others.

* * * * *

Organization: MAHONING COUNTY COUNCIL FOR RETARDED CHILDREN

Address: 244 West Boardman Street, Youngstown

Telephone: 743-4974

Executive Secretary: Mrs. Virginia Brownlee

General Description: The purpose of the Council is to provide academic training and recreation for severely retarded children.

Services: The Council maintains a retarded children's school and day camp. Additional services are in the fields of sheltered workshops, recreation, public relations, PTA, monthly parent meetings.

How to Obtain Services: Call the Council.

Finances: United Appeal.

Staff: Executive secretary, school and day camp staff.

* * * * *

Organization: THE HEART ASSOCIATION OF EASTERN OHIO, INC.

Address: 808 Wick Building, Youngstown

Telephone: 744-8919

Executive Director: Anthony Radich

General Description: The Association maintains programs of research, education and direct services, both locally and nationally as a member of the parent American Heart Association.

Services:

1. Research: locally, research grants are made to investigators at both the Youngstown Heart Association and St. Elizabeth Hospital.
2. Education: Free literature and films are provided for professional and lay groups and individuals. In addition, the parent organization publishes professional books and journals and sponsors national scientific conferences.
3. Community Services: The stroke rehabilitation program is available to recent stroke victims on referral from their physicians. It includes training by a nurse in passive exercises, and speech therapy where necessary.

How to Obtain Services: Call the Association. For the stroke program, the physician must fill out a form available from the Association.

Finances: Donations.

Staff: Executive director, nurses, speech therapist.

INSURANCE PAMPHLET STILL AVAILABLE

The brochure, "Your Health Insurance Check-up," printed just one year ago by the Mahoning County Medical Society, has received much favorable comment in the newspaper and in medical publications. It is still a most valuable tool for doctors who wish to help patients with their health insurance.

Every doctor would do well to have copies available in his waiting room for patients to pick up. Supplies of the blue colored pamphlet are in stock at the Medical Society office. Call the office (RI 6-8431) for more if your supply is running low.

June 16

M. J. Sunday

June 18

P. L. Boyle

H. E. Hathhorn

June 19

C. W. Stertzbach

June 22

M. A. Kachmer

June 23

J. J. McDonough

J. A. Patrick

H. A. Smith

R. L. Thomas

June 24

E. H. Jones, Sr.

M. C. Raupple

June 28

W. S. Curtis

R. A. Hall



Get Your Annual Check-up

June 30

A. V. Banez

July 2

E. Weltman

I. Mendel

July 4

F. S. Coombs

July 5

F. A. Miller

July 6

M. M. Kendall

M. L. Fok

July 9

G. L. Altman

S. A. Myers

W. A. Welsh

July 13

D. W. Metcalf

G. Boulis

Is it Time to Renew Your Driver's License ?

BABSON ON STOCKS

The following five-point outline for investing was presented at the April meeting of the Mahoning County Medical Society by the speaker, Mr. David L. Babson, and is herein reprinted for the benefit of those members who were unable to attend the meeting.

1. GROWTH OF U. S. ECONOMY

Average Annual Rate—3½%

Industrial Production Doubled Between

1866-1880—14 years

1880-1892—12 "

1892-1909—17 "

1909-1928—19 "

1928-1942—14 "

1942-1964—22 "

Doubled On Average—16 years

2. (a) Average Annual Return On Common Stocks, 1871-1964

	PERIOD	DIVIDENDS & CAPITAL GROWTH
Cowles Commission	1871-1938	8.1%
30 Dow Industrials	1938-1964	11.5
95 Year Average		9.0%
University of Chicago—Merrill, Lynch Study	1926-1960	9.0%

(b) Average Annual Return on Fixed-Dollar Investments

High-Grade Bonds, 1860-1960—4.01%

Average Annual Return on Savings Accounts,

Investment Insurance, etc —3.4%

3. DECLINE IN THE VALUE OF THE DOLLAR

(a) The Value of the Dollar of:

1900 is now 25 cents

1939 is now 45 cents

1950 is now 77 cents

1955 is now 86 cents

1960 is now 95 cents

Long-Term Annual Average Decline—2.0%

(b) Value of the Dollar, 1939—100 cents

Cur.—44.0	1958—48.0	1952—52.3	1946—71.1
1963—45.5	1957—49.3	1951—53.5	1945—77.0
1962—45.8	1956—51.0	1950—57.6	1944—78.8
1961—46.5	1955—51.7	1949—58.3	1943—80.2
1960—47.5	1954—51.5	1948—57.6	1942—85.2
1959—47.6	1953—51.7	1947—62.2	1941—93.4

Average Annual Decline

1957-1964—1.5%

1951-1957—1.3%

Average Annual Decline

1945-1951—5.9%

1939-1945—4.2%

(c) Federal Government Budget Results

FISCAL YEAR	CIVILIAN EXPENDITURES	DEFICIT OR SURPLUS	FISCAL YEAR	CIVILIAN EXPENDITURES	DEFICIT OR SURPLUS
1966**	\$48.1 Bil.	—\$5.3 Bil.	1961	34.0 "	— 3.9 "
1965*	45.3 "	— 6.3 "	1960	30.8 "	+ 1.2 "
1964	43.5 "	— 8.2 "	1959	33.8 "	—12.4 "
1963	39.9 "	— 6.3 "	1958	27.2 "	— 2.8 "
1962	36.7 "	— 6.4 "	1957	25.6 "	+ 1.6 "

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REMISSION OF DISSEMINATED CARCINOMATOSIS TREATED WITH MELPHALAN

Report of a Case
by Arnoldus Goudsmit, M.D.

A fifty-four-year-old widow had noted a mild productive cough in January of 1964. During February she discovered a lump on the left chest wall. This was excised on March 4th. Pathologically the tissue was diagnosed as an essentially undifferentiated carcinoma.

A chest film taken March 3, 1964, showed multiple nodular metastatic infiltrates bilaterally. A previous chest film, taken in February, 1962, had been reported as negative, and even in retrospect showed completely clear lung fields. Suitable search for a primary lesion failed to reveal one, and the patient was started upon a course of treatment with 5-fluorouracil (5 FU). A progress chest film in May, 1964, showed no essential changes and her therapy was continued. By August 29, 1964, however, some increase in the size and number of the metastatic lesions had become apparent, and the use of 5 FU was stopped. All told, over the course of twenty-three weeks, she had received 23 grams of the drug.

In the meantime, the patient's expectoration had increased; she coughed more and her sputum often was mixed with blood. Hence, on September 21, 1964, she was started upon the oral administration of methotrexate, which she came to receive intermittently through December 28. During these fourteen weeks a total of 322½ mgs was administered. A chest film taken November 28, 1964, showed a slight increase in size of metastatic nodules in both lung fields. By the end of December, cough and bloody expectoration had progressed further, and her general condition was worsening.

On January 16, 1965, the patient was started on melphalan (Alkeran^R), 2 mgs daily by mouth, a dose subsequently reduced in accordance with results of periodic blood examinations. Between then and March 11, 1965, a period of fifty-five days, a total of 86 mgs was administered. Within a few weeks the patient began to cough less, expectorate less, and the admixture of blood concomitantly diminished in the expectorate. By March 18, 1965, the patient was practically completely free of any symptoms. A general physical examination at this time did not reveal significant objective abnormalities. A chest film on March 11, 1965, showed that the multiple pulmonary nodular metastases had undergone marked regression, that some had disappeared entirely, and that others were being supplanted by small fibrotic areas.

One could discuss the successive events in this case from a good many angles. For the purpose of this preliminary note, however, only a few essential points would appear to merit inclusion. Obviously, the reversal of the course of a previously progressive case of disseminated carcinomatosis of unknown primary through the use of chemotherapy is always gratifying and is sufficiently uncommon to merit publication for this reason alone. However, this particular case appears to be the first one in which melphalan, the L-isomer of the phenylalanine derivative of nitrogen mustard, was the drug associated with the remission. Judging from reports in the literature, melphalan has been a most effective compound in the treatment of multiple myeloma, but it has not produced remissions of significance in solid tumors, with the possible exception of some cases of ovarian carcinoma. One clinician who checked this patient thought that one ovary was enlarged. However, subsequent examinations were unable to confirm this observation.

This patient's remission appears particularly remarkable in that it was achieved in a relatively short period of time, using a relatively small amount

of drug, with moderate alopecia (in addition to leukopenia) as the only sign of toxicity. There is no way of ascertaining whether her malignant neoplasm represented a rare instance of native exceptional sensitivity to the particular configuration of the drug. However, a much more intriguing assumption might consider that the prior treatment with methotrexate was a factor in bringing about the extreme responsiveness of this carcinoma to melphalan.

OSMA APPROVES AMENDMENT

The "nominating committee" amendment to the constitution of the Mahoning County Medical Society, passed by the Society on Nov. 17, 1964, has been approved by the Ohio State Medical Association, and is now incorporated into the constitution.

The amendment will be printed in a coming issue of the Bulletin, in such a form that it may be clipped and inserted into each member's individual copy of the constitution.

S. Q. LAYPIUS OBSERVES:

Old S.Q. wishes to report the result of some intensive research. This is not a double blind test, only semi-blind.

In my series of one cases, a physician who was disabled by fractures, lacerations, contusions and sprains attempted to get caught up on his reading of the medical literature.

There were two handicaps to the experiment: 1. A considerable accumulation of material before the disability occurred and 2. A period of ten days in which the subject was more interested in turning over in bed and getting up to the toilet than in pursuing the goal he had in mind.

After the initial lag that subject was home, faced with the pile of journals, pamphlets, periodicals and booklets supplied for money or for free from many sources. But he had unlimited time and a firm resolve to wade through them.

So he started: A.M.A. first, G.P. second, Modern Medicine third, Ohio State Medical Journal fourth, Medical Times fifth, Medical Economics sixth and so on.

He read and he read. When things got fuzzy he would take time off for a Coke or TV or a little exercise on the crutches.

After a few days of this, the saturation point was reached. The Research Forum no longer held charm. The Transplantation Protocol was impossible.

There were other things to turn to: Life, Time, Saturday Evening Post, Sports Illustrated and National Observer. Besides he was supplied with other books of fiction and fact. He was reminded of the Biblical passage "Man cannot live by bread alone."

After ten weeks of intensive research, S.Q. wishes to report:

1. Medical literature is profuse and interesting but it is impossible to keep up with the volume.

2. There is a time when the most avid reader becomes surfeited.

3. Fiction, mystery and biography have their place in the scene and serve a useful purpose.

Recent books recommended: "Men To Match My Mountains," "The Spy Who Came In From The Cold," "This Rough Magic," "Von Ryans Express." Not recommended: "Banner With A Strange Device."

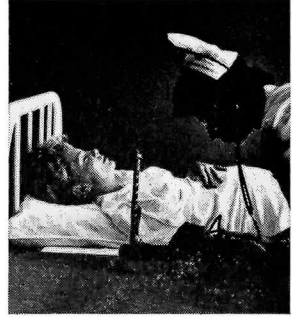
Also recommended "The Prevention Of Injuries" by S. Q. Laypius, not yet in print.



Edema



Essential hypertension



Toxemia of pregnancy

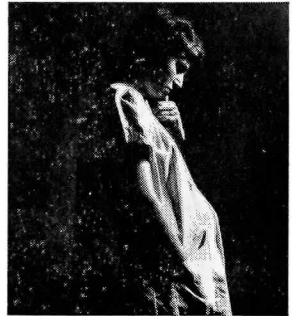
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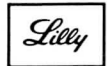
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tinued. Side-effects and contraindications of Anhydron apply to Anhydron K and Anhydron KR. There have been reports of small-bowel lesions associated with administration of enteric-coated potassium in combination with thiazide diuretics. The incidence 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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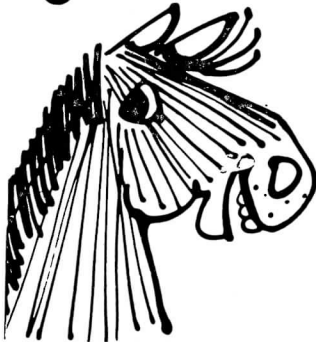
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From the Bulletin



THIRTY YEARS AGO—JUNE, 1935

"Hap" Hathhorn's Public Health Committee was conducting an intensive campaign to stamp out diphtheria, smallpox, typhoid fever and cancer. That was a big order.

So far as diphtheria, smallpox and typhoid were concerned, the means were available. It was their job to educate the public. They did very well. Those diseases are now rare and the people were never asked to contribute a dime.

Prohibition was repealed, a sad blow for the bootleggers.

It looked like the Mahoning Canal was a sure thing.

TWENTY YEARS AGO—JUNE, 1945

Speaker that month was Dr. Cole, prominent dermatologist from Cleveland. He said that with intensive treatment (arsenic and bismuth) early syphilis could be cured in a year. Penicillin was experimental but gave promise. It had to be given every 3 hours I.M. or I.V. and relapses occurred even after as much as 900,000 units.

Prevention of rabies was being urged by quarantine and anti-rabic inoculations of dogs. There was some concern expressed over the appearance of cases of trichinosis from black market meat.

Dr. J. N. McCann was appointed to the State Board of Medical Licensure. Alcoholics anonymous celebrated the fifth anniversary of its founding.

Captain L. S. Shensa and Major P. R. McConnell were home on leave. Captain Sam Tamarkin was promoted to major and Lt. Sam Schwebel to Lt. Commander. Capt. Larry Weller was sweating out the war in Texas and Major M. W. Neidus was at Camp Meade, near Washington. Brandmiller, Schellhase and DiCicco were heard from in the Philippines.

You could buy a rayon slack suit at McKelvey's for \$10.25 but couldn't find a white shirt anywhere.

TEN YEARS AGO—JUNE, 1955

C. A. Gustafson was elected Councilor of the Sixth District. W. M. Skipp was Delegate to the A.M.A. S. W. Ondash was member of the Board of directors of the Ohio Surgical Association. Francis Kravec was Secretary of the Ohio Chapter of American College of Chest Physicians.

Mrs. W. H. Evans was President-Elect of Woman's Auxiliary to the Ohio State Medical Association. Mrs. Craig Wales was Director for the Sixth District and President of the Mahoning County group, Mrs. Ivan Smith was President-Elect.

New members that month were Joseph V. Newsome, John Guju, H. A. Brinks and Ben C. Berg.

Morris Rosenblum and James E. Mitchell won the doubles handball championship at the Y.M.C.A.

—J. L. F.

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YOUNGSTOWNERS GARNER STATE HONORS

At meetings held in conjunction with the annual meeting of the Ohio State Medical Association in Columbus, several Youngstown physicians were elected to offices. Dr. Leonard P. Caccamo was elected vice president, and Dr. Sanford F. Gaylord, secretary and treasurer of the Ohio Society of Internal Medicine.

Dr. John A. Rogers was re-elected president of the Ohio Heart Association. Dr. Hugh N. Bennett and Dr. Caccamo were re-elected to the board of trustees of the same organization. Dr. William H. Bunn, Jr. was elected a delegate from the Eastern Ohio Heart Association to the state group.

Several local lay persons were honored. John S. Andrews was renamed to the state executive committee and also to the board of trustees of the American Heart Association. He is outgoing chairman of the Ohio board.

Rev. Eugene C. Beach was re-elected to the board of trustees, as was Victor A. Norling of Poland. Mrs. John A. Rogers was named delegate from the local to the state organization.

DR. CACCAMO HEART PRESIDENT

Dr. L. P. Caccamo was named president of The Heart Association of Eastern Ohio at the May meeting of that organization. He succeeds Dr. Hugh N. Bennett.

DR. RUMMELL ELECTED TO NF OFFICE

Dr. R. W. Rummell was named 1st Vice Chairman at the annual meeting of the Mahoning County Chapter of the National Foundation, held on May 26. Dr. Sidney Franklin was elected a member of the Executive Committee. Dr. Franklin also made a report as chairman of the Nominating Committee.

Members of the 57 man Board of Directors include: Dr. Ray W. Fenton, Dr. Franklin, Dr. James R. Gillis, Dr. Leonard Green, Dr. Rummell, Dr. Herman S. Zeve, and Howard Rempes.

James D. Turner was elected Chairman for 1965-66, succeeding Robert A. Manchester who has held that office for many years.

REV. O'DONNELL EXPLAINS CHURCH'S VIEW

Rev. Thomas J. O'Donnell, S.J., proved to be a dynamic speaker at the second annual Medicine and Religion dinner-meeting that attracted more than 130 physicians and clergymen.

He explained the Catholic Church view-point on the use of contraceptives, and assured his audience that there could be no doubt that the so-called contraceptive pill was not acceptable.

Arrangements for the meeting were made by the Medicine and Religion Committee. Dr. William Cleary, chairman, introduced Father O'Donnell.

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MEDICAL ASSISTANTS' SOCIETY

The third annual Educational Workshop for members of the Medical Assistants' Society of Mahoning County was held on Sunday, April 25th, in Hitchcock Auditorium at South Unit, Youngstown Hospital Association. Fifty-two members and guests attended the all day session.

Chairman for the successful event was Candy Shufflebarger, who was ably assisted by Selma Popa, her co-chairman.

President Dorothy Klein and Dr. G. E. DeCicco, Chairman of our Advisory Board, gave the opening addresses for our workshop.

The society members are most grateful and fortunate in having available for such an event the cooperative and obliging doctors who gave of their time and effort in providing us with a day of interesting and informative talks. Our sincere thanks and appreciation are extended to Dr. Frank Gelbman who spoke on "The Training of a Psychiatrist;" Dr. B. M. Schneider, who showed us slides of his "Trip to the Orient;" Dr. H. J. Marcella, who spoke on "Orthopedics;" Dr. D. W. Metcalf, who discussed "Anesthesia;" and to Dr. James Hill and members of the Laboratory Personnel for their "Tour of the Laboratory and Pathology Department" at South Unit. The IBM Corporation had their latest office equipment on display to allow us to get acquainted with the newest in their field. All in all, the day was well spent in getting educated, something none of us can afford to ignore.

As I previously reported, our May meeting will be held on the 25th, so I will report on that meeting next month and also include a report on our Installation Dinner which is planned for June 10th.

—Laura Marinelli,
Reporter

HEALTH DEPARTMENT BULLETIN

APRIL, 1965

	Resident		Non-Resident		Total
	M.	F.	M.	F.	
Births	98	78	109	126	411
Deaths	74	64	66	49	253
Infant Deaths	3	3	2	6	14

APRIL, 1964

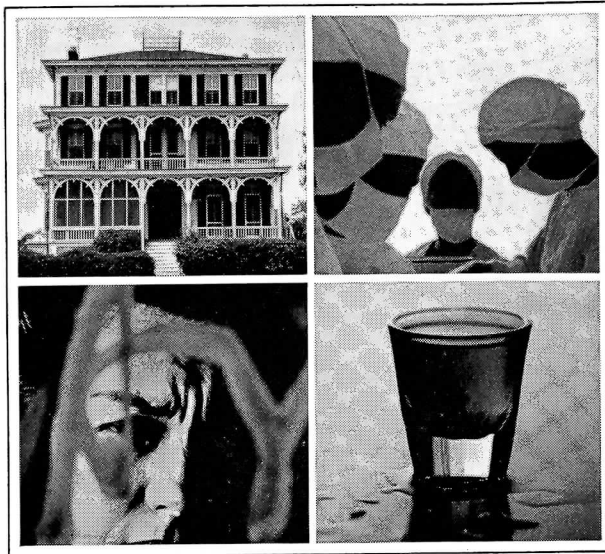
Births	118	87	117	126	448
Deaths	81	62	65	48	256
Infant Deaths	4	2	2	1	9

COMMUNICABLE DISEASES

	1965		1964	
	Cases	Deaths	Cases	Deaths
Measles	14	0	112	0
Scarlet Fever	1	0	7	0
Tuberculosis	3	0	4	0
Gonorrhea	21	0	18	0
Syphilis	4	0	6	0
Infectious Hepatitis	0	0	2	0
Rheumatic Fever	2	0	1	0

VENEREAL DISEASES

	Male	Female	
New Cases			
Syphilis	2		
Gonorrhea	15	7	
Total patients			24
Total visits (patients)			138



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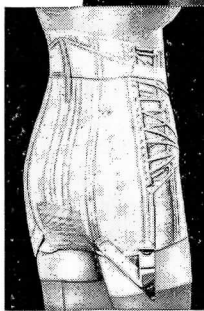
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