



Bulletin

of the Mahoning County Medical Society
First & Second Quarter 2012

THOMAS E. ALBANI, JR., MD NAMED 2012 DISTINGUISHED PHYSICIAN



Doctor Thomas E. Albani, Jr. was named 2012 Distinguished Physician by the Mahoning County Medical Society and presented with a plaque commemorating the honor at the Annual Meeting of the Society on Tuesday, May 8, 2012, at The Lake Club in Poland. Presenting the award to Dr. Albani was Dr. Rashid Abdu. Dr. Albani was joined by his wife, Karen, parents Tom, Sr., and Gloria, children Rebecca, David and Matthew, friends and members of Dr. Albani's office staff.

Dr. Abdu noted that most of the previous recipients of the MCMS Distinguished Physician Award are "retired, old or dead", but he was happy to say that Dr. Albani was still in practice, young and "not dead".

Dr. Albani, a Hubbard native, received his medical degree from The Ohio State University School of Medicine and has had a private practice In Family Medicine in Canfield since 1990. In 2011, Dr. Albani was named the Ohio Family Physician of the Year by the Ohio Association of Family Practice after being nominated by his patients. In addition to serving as the current president of the Mahoning County Medical Society, Dr. Albani is the chairman of the Primary Care Department at St. Elizabeth Boardman Health Center where he received the Humility of Mary Health Partners' Mahoning Valley Leadership in Health Award. He is a volunteer faculty member for the family medicine residency program at St. Elizabeth Health Center and an assistant clinical professor at Northeast Ohio Medical University in Rootstown.

In 2008, Dr. Albani became the Medical Director for the Midlothian Free Health Care Clinic which he helped to establish to provide free primary care to those who have no health insurance or who are not eligible for other health care assistant. He also serves on the board of Access Health Mahoning Valley.

Dr. Albani and his wife have five children and live in Boardman.

Also honored at the dinner were the recipients of the Ohio State Medical Association Fifty Years in Medicine Award. Honored were Dr. John Altier, Dr. Y. T. Chiu, Dr. Charles Crans, Dr. Anthony Deramo, Dr. Sudershan Garg, Edward Hobbs, Dr. Chander Kohli, Dr. Felix Pesa and Dr. C. Conner White. All received their medical degrees in 1962.

Left to right:
Drs. Pesa, Crans,
Deramo, Garg and
Hobbs.



Left to right:
Dr. Conner and Barb White,
Dr. Y.T. and Marilyn Chiu,
Dr. Chander and Karen Kohli.



Bulletin

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August 28, 2012

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GUEST EDITORIAL

Thomas S. Boniface, MD

An excerpted version of an address to the Alpha Omega Alpha Honor Society during the Induction Ceremony at NEOMED.

A few weeks ago, I was on a plane, and sat near a couple from Youngstown, who I know well – she taught three of our children in second grade, he is a patient and member of our church, they are parents of a NEOUCOM grad who spent time with me in her 4th year and is now finishing her chief resident year in Internal Medicine, about to enter fellowship in critical care. We were discussing what she is doing, and why, etc. – he made a statement to the effect of “it’s too bad how things are going in medicine” – and when I asked him what he meant he said “you know – declining reimbursements, government telling you what to do, limiting doctors and their treatment, Obamacare changing the way government can control our lives” – I think we have all heard these kind of comments, and perhaps even agree with them to an extent. Just this week I saw a survey of physicians on the impact of health reform, which included the statistic that 9 out of 10 physicians are unwilling to recommend health care as a profession. Medscape’s annual survey shows physician satisfaction with income around 50% - even in Orthopaedics, where the average income is actually at historically record levels.

Before I go further, I should tell you that politically and philosophically I tend toward the right side of the aisle, more libertarian than social activist – I believe that people should take more responsibility for their actions and be willing to suffer their own consequences, I don’t generally favor social entitlements. Nonetheless, I had to disagree with the father’s assertion on the sad state of medicine today – I told him I believe we are doing quite well, thank you, and that I am actually highly optimistic on the future of medicine as a profession.

There are certainly issues facing us today, which trigger complaints and concern. Government can overreach, perhaps valuing votes over reason. Insurance companies and others make profits from our labors. Consumerism and commodification of health care undermine relationships. The conversion to an Electronic Medical Record, substituting cut-and-paste documentation for genuine narratives, adds to the assembly-line mentality creeping into our work. Even Evidence Based Medicine can be seen as a triumph of statistics over reason, distracting us from the fundamental reality that every patient is a unique individual, forgetting the fact, as one of my patients noted, that the word “NORMAL” is a setting on her dryer, and cannot be used to describe a person. Private practice of medicine is going the way of the dinosaurs, being replaced by corporate models, insurance companies buying or building their own hospitals, and hospitals becoming insurance companies, resulting in movement of patients and their health care resources like pieces on a chessboard.

Despite these issues and the subsequent complaints of many, I would submit that the profession of medicine and, more importantly, the health prospects for the human race in general are better than ever. The scope and breadth of medical knowledge are expanding exponentially. Disease and suffering, at least in developed nations, are minuscule in comparison to the scourges of the past. To me, the issues confronting us today are philosophical and financial, more about accounting and distribution than about disease and suffering, and only threaten our profession to the extent that we let them.

If I were king, would I have come up with a scheme like Obamacare? Probably not, but I’m not king – which is a good thing I think. While I may prefer, and can certainly enumerate the advantages of relationship-based primary care, that is not the direction the world is heading. For many reasons beyond the scope of this discussion our culture can no longer rely on the strength of individuals to care for themselves, nor on the simple generosity of physicians and hospitals to provide free services.

To paraphrase Robert Pirsig, in his book Lila – An Inquiry Into Morals, societies and cultures evolve over time, like living species, reacting and responding to dynamic, creative forces. Characteristics are selected for or against accordingly. We live in a dynamic world, and cannot control what people value, what they buy or sell. What a culture or people value “cannot be contained by any intellectual formula.” As Pirsig puts it, “man doesn’t invent cities or societies any more than pigs and chickens invent the farmer that feeds them.” For better or worse, our place is to participate in the process, and advocate for Quality where we are able.

Continued on Page 7



From the President by Thomas E. Albani, MD

ON BROAD SHOULDERS

The Mahoning County Medical Society Annual Dinner Meeting was held on May 8, 2012. It took place at the Lake Club on a lovely spring day that required no coats or umbrellas. It was a marvelous opportunity to have an evening out and to visit with old friends in a lovely setting. Karyn Frederick deserves a very big "Thank You" from all of us for putting together such a wonderful evening.

I would be remiss if I did not take this opportunity to also thank the members of the Society (most especially Dr. Rashid Abdu for the nomination), for my receipt of the Mahoning County Medical Society's 2012 Distinguished Physician of the Year Award. It is an honor that has truly taken me by surprise. I cannot adequately express my appreciation for such a lofty recognition by my peers. There simply are not enough words. I want to extend a very sincere, heart-felt "Thank You" to one and all.

Our meeting was highlighted by recognition of those physicians with fifty years in medicine. The following were honored: Drs. Y.T. Chiu, Charles A. Crans, Anthony Deramo, Sudershan K. Garg, Edward M. Hobbs, Jr., Chander M. Kohli, Felix A. Pesa, C. Conner White, Jr., and John Altier. All but Dr. Altier were able to attend. What a gift the rest of us were given! Here in this room were gathered together a very significant core of those who shaped the medical care for our community over the past fifty years! These are the very men who have helped to teach those of us who have followed exactly what it means to be a physician. They have led by example. They have tirelessly given of their time and talents for the betterment of their friends, families, and neighbors throughout our community. They have been the ones with whom the medical buck has stopped, whether the patient had the ability to pay or not. They are the ones who have ensured that our community has had well staffed hospitals in existence so that community members did not have to travel to Akron, Cleveland, Pittsburgh or elsewhere for routine inpatient care. They have been the ones who have established and/or supported the various residency programs in our hospitals so that Youngstown, Ohio has remained on the cutting edge of current medical knowledge and also ensuring an opportunity to attract and maintain new physicians in our community. These community pioneers have practiced a significant portion of their medical career without the benefits of all of the more advanced research and technology we enjoy today. They have taught us to keep the ART of medicine alive. They have demonstrated that sometimes a kind word or an open ear can be every bit as powerful and therapeutic as any known drug. They have been saving lives well before we had things that are taken for granted today, such as cimetadine, PPI's, IV nitroglycerine, CT scans, MRI's, Cardiac echo's, nuclear stress tests, etc., (to name only a very few). With the influx of new technology, these men of knowledge and vision have taught us to always remember that it's what's between our ears, not a test result alone, that should determine the care of the patient. Tests all have their intrinsic limitations, and can often be misleading. It is our responsibility as our patient's advocate to use these studies to confirm or refute our suspicions as to the patient's status, not to make the diagnosis or decisions for us.

I have been taught since I was a child that we all stand on the shoulders of those who came before us. These fifty year honorees have provided some very broad shoulders for us to stand upon. I thank each of them for their common sense, their wisdom, their guidance, their caring and their compassion. They have helped to teach me that it is a very delicate balance between what's in your head and what's in your heart that makes a true physician. It is not often that we are given the opportunity to express our thanks for such priceless gifts. I very much appreciate this opportunity to make my own attempt to do just that.

Thomas E. Albani, Jr. MD

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The 2013 Membership Dues invoices will be mailed at the end of August to all current MCMS and OSMA members. Once again you will have the choice of joining just the county society, the OSMA only, or both. Membership in both organizations is encouraged and you are free to change your selection from last year. Membership dues for the MCMS are \$316 annually for full-time, Active members. Dues for first and second year in practice and part-time physicians are discounted. Retired physicians who have been MCMS members for the five years preceding retirement pay no dues. If you have any questions about the dues or membership, please feel free to call the Society office at 330-533-4880.

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The common concerns today about reimbursement, government control, overspecialization, and consumerism are the reality with which we will live. Government can and will regulate behavior, spend our money, and make what may be colossal mistakes. Insurers are in the business of profit, and if their efforts improve the well being of patients it is by accident, a by-product of their business. If EMR actually improved care or enhanced safety it would be adopted on its own merits rather than by mandate. As for Evidence Based Medicine, as I like to say there are lies, damn lies, and then there are statistics – one can quote level 1 studies for or against virtually anything, depending on what questions are asked. Finally, consumerism and the commodification of Medicine are reflections of our modern society, which values bigger, homogenous, and predictable over local, unique, and personable, despite the fact that the former is in no measurable way superior to the latter.

So what is the basis for my optimism? As I said before, the issues at hand – to me at least – are more about style than substance. One need not look far to find examples of tremendous progress in what we are able to do in improving the health of our patients and our communities. The broad use of statins has dramatically decreased the incidence of heart disease, so far without significant side effects. In my practice of Orthopaedics, we are applying patient-specific knee replacement, the greatest advance in arthritis surgery in the 25 years I have been at this, seeing not only rapid recovery after surgery, but more importantly patients experiencing what amounts to a normal knee instead of just a “better” one than they had pre-op. I am currently reading The End of Illness, by David Agus, which takes a radical step in our concept of the human organism. He believes medicine has been shortsighted in its focus on germ theory and other single points, rather he believes medicine needs to go beyond such simplistic thinking and study the human as the complex **system** it really is. His acknowledgment that medicine “has evolved to be a binary field – yes versus no. But in reality it’s a giant shade of grey that we cannot quantify because we don’t have all the necessary data” – represents a new kind of thinking, the same kind of thinking that Steve Howell applied to kinematic, patient specific knee replacement. I don’t know if his work on proteomics, studying the protein products of cellular function and their role in illness, will bear fruit, but the fact that this type of deeper thinking and research exists, going beyond the “if A then B” mindset of medicine today, gives me great hope for the future.

These examples signify the positive effect each of us can have in our profession. Unlike Pirsig’s analogy we are not pigs and chickens. While we cannot dictate which direction the world will go, I am not suggesting a passive acceptance of the changes that will inevitably come. Engagement and advocacy for patients and availability of the best possible care, without regard to reimbursement, is crucial, but must move beyond empty threats of withholding care if Medicare is cut, and lamentations on the plight of the physician serve no one.

In putting this talk together, I remembered a schtick by the comedian Louis C K, titled “everything’s amazing, and nobody’s happy,” in which he reflects on how quickly we forget from where we came, and don’t appreciate where we are. I think this applies in many ways to the world of medicine today.

In closing, I want to leave you with some advice from Jim Valvano – you should remember him as the basketball coach of NC State, who was dying from cancer when he addressed the ESPY’s in 1993. If you haven’t seen it, you should take 10 minutes and watch – easy to do with Google, YouTube, or any number of amazing ways that didn’t exist a decade or so ago. Mr. Valvano said that there are three things you should do every day – and in the practice of medicine these should be fairly easy. He said every day you should laugh, you should think, and you should have your emotions – happy or sad - moved enough to cry. If you can do all of these in one day then it’s a full day.

Congratulations, best wishes in your bright futures, and may God bless you in your work.

A handwritten signature in black ink, appearing to read "J. A. Baird, MD". The signature is fluid and cursive, with the letters "J", "A", and "B" being particularly prominent.

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