

**MEDICAL COSTS NUMBER**

**BULLETIN**  
**MAHONING COUNTY**  
**MEDICAL SOCIETY**

**SEPTEMBER, 1931**

*Volume One*

*Number Nine*



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 Idora Phcy., 2636 Glenwood

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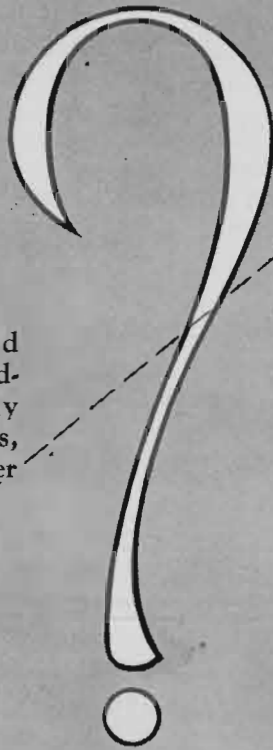
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## PROGRAM OF THE SEPTEMBER MEETING

SPEAKER—DR. JOHN ERDMANN

Professor of Medicine and Director of the New  
York Post-Graduate Medical School.

SUBJECT—Diverticulitis and Diverticulosis

PLACE— The Youngstown Club

TIME— Tuesday, September 15th

DINNER— At 6:30 P. M. Sharp

All members are urged to come whether they can attend  
the dinner or not. Return your card now to Dr. Walter B.  
Turner.

Out of town doctors are cordially invited.

## In Memoriam



DR. J. J. THOMAS

1852 - 1931

The Mahoning County Medical Society reverently pays tribute to the memory of one of its founders. Coming to this city in 1882 he entered actively into practice and was made township physician, later becoming city physician which office he held until forced to retire by ill health.

Of a jovial and kindly disposition, Dr. Thomas was beloved by patient and confrere alike. His tales of practice in the early days of Youngstown were filled with humor and love for the calling which he served.

The laity and profession of Youngstown unite in a common regret at the end of this life filled with unselfish service.

# The Mahoning County Medical Society BULLETIN

Published Monthly at Youngstown, Ohio, by the Editorial Committee

JAMES L. FISHER, M. D. . . . . Editor	WM. M. SKIPP, M. D. . . . . Adv. Mgr.
MORRIS DEITCHMAN, M. D., Asst. Editor	B. W. SCHAFFNER, M. D. . . . . Asst. Editor
COLIN M. REED, M. D. . . . . Asst. Editor	ARMIN ELSAESSER, M. D., Cons'g Editor

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By all means do not fail to read the President's Message in this issue. It might well be called the "Battle Cry" of an awakening profession which has too long been disorganized and supinely defenseless. Would that it could be printed in every paper of the land to be read by every economist, sociologist and philanthropist who would socialize, criticize or communize the practice of medicine.

The suggestion recently made by one of our members that all the doctors of the country take a week off together and go vacationing to Canada is highly fanciful but provokes a great deal of thought as to what the results would be. Certainly our efforts would receive much more appreciation for some time afterwards. The plan is of course entirely impractical as there are no physicians who can afford it.

The patient and his family are frequently responsible for high costs of medical care. After years of neglect, in time of illness they demand that no expense be spared, that the best specialists be called and everything possible be done to restore health. This attitude is not to be criticized where such service is necessary, but how frequently after the storm is over do they experience a change of heart!

The public should realize that they can avoid much unnecessary expense by following a few simple rules:

1. Make use of the methods of preventing sickness—including periodic health examination, vaccination and diphtheria inoculation.
2. Have a family physician, carefully chosen for his background of education, his ability and integrity and follow his advice. Make more use of the general practitioner.
3. Call your doctor early before the remedies of the neighbors, friends and corner drug store have failed.
4. Make provision by budget or otherwise for the inevitable cost of sickness and pay your doctor promptly. You can save money on any commodity by paying cash.

In our efforts to prevent sickness we are obstructed by cultists, quacks and those who "don't believe in new-fangled methods." On the other hand we are called slow and non-progressive because we do not adopt every new thing until its value is thoroughly proven. It is time we made it known to our critics that doctors are quite often thoroughly disgusted with the public.—J. L. F.

## Secretary's Report

At the Annual County Medical Society Golf Tournament and picnic, held at Squaw Creek Country Club on August 6, 1931 the following prize winners were selected by due process of competition:

The Medical Champ:—Dr. W. A. Welsh.

Low Net Winner:—Dr. W. X. Taylor.

President's Cup (one year):—Dr. Jos. Colla.

Blind Bogy Winners:—Dr. J. S. Lewis, Dr. R. M. Morrison.

\* \* \* \*

The following applications for membership will be voted upon at the September meeting:—Dr. Julia March Baird, Youngstown, Ohio and Dr. Samuel Klatman, Youngstown, Ohio.

The application of Dr. L. H. Moyer, Youngstown, Ohio, will be presented to the society.

\* \* \* \*

With the incidence of anterior poliomyelitis much greater than usual in the Eastern States and some cases in this county the physicians are urged to assist in obtaining convalescent serum for any cases that may occur in our community. The blood can be used no matter how long ago the patient has had the disease. The laboratory at the City Hospital is anxious to obtain any donors who are willing to give 50 to 100 c. c. of blood. This will be kept and can be used for at least a year after collecting. One will be doing a public benefit if he explains to any patient the harmlessness of giving a little blood which sooner or later may save a life from Infantile Paralysis.

\* \* \* \*

The Council of the Medical Society has met once or twice a month during the past year and transacted the routine business of the society.

\* \* \* \*

All physicians and druggists are urged to place in their waiting rooms or stores the signs prepared by the Medical Society calling attention to the need for vaccination against Smallpox and Diphtheria at this time. If you have not obtained a card communicate with the Secretary at once.

—J. P. HARVEY, M. D.



## The President's Corner

For some months we have read much about the high and excessive cost of medical care. No one has offered the suggestion that the cost of this service was too low,—each article which I have read starting upon the premise that it was too high; and since a careful analysis should consider both sides of the problem, let me reflect upon the proposition that medical service is an inexpensive and necessary part of the family budget.

And, quoting the statistics in the May issue of the Pittsburgh Medical Bulletin, let me observe that the following expenditures are too high and let us appoint a commission to investigate this matter. I read that the annual family expenditure in the United States is, for tobacco, \$67.00. There must be a great number of Adam's Apples that need consideration if this figure is true, and many throats which require kindness. But I have not heard a strenuous complaint against this \$67.00 bill. The item spent for candy is \$37.00 and for soft drinks, \$34.00 and still no-one has asked for an injunction against the manufacturers of these LUXURIES. For non-commercial gasoline, \$37.00 is said to be spent in propelling vehicles of persons on pleasure bent. The theatre takes \$35.00 and an additional \$29.00 is allotted to the jeweler and furrier without whose products it would be no fun to go to the theatre. Radios and musical instruments require \$16.00, sporting-goods \$16.00 and cosmetics \$15.00. The total of these items is \$286.00 and for medical care the estimate is \$67.00. As the Pittsburgh Bulletin states, "we do need a change in our national sense of values." Why should a howl be raised to high heaven because of a yearly sickness obligation of \$67.00 when the same amount is uncomplainingly spent for tobacco? Why not stand on the other foot for a while and have an investigation into the high cost of tobacco? And why should every sob-sister, writing a story, inject some character who finds himself poverty-stricken because of doctor's bills? Why not because of his tobacco bill or his candy and soft (or hard)-drink bill? But hospital bills and doctor's bills have always been the alibi of every delinquent individual who is groping for an excuse to escape paying some other less-deserving account. And upon inquiry, I have repeatedly found that these individuals who cry the loudest have never paid a doctor bill in their lives, and if they have been at some time hospitalized, they still owe that bill.

Perhaps it just depends upon the viewpoint of the individual. I have not recently seen an estimate in dollars and cents, of the value of a human life, but to place it at a minimum let me say \$10,000.00. In other words, allow my contention that in every problem we handle, we are dealing with an object worth that sum of money. This means that the average cost of medical care is \$67.00 for an average family of five persons, or a monetary valuation of \$50,000.00, or about thirteen-hundredths of one per cent. I presume that the average yearly cost of mechanical care of an automobile worth \$1000.00 is perhaps \$25.00, or two and one-half per cent (nearly twenty times the cost of medical care). A radio costs about the same percentage of its value as does an automobile. To be maintained properly, a \$50.00 suit of clothes should show a yearly cleaning and pressing bill of at least 10 per cent and a \$10.00 pair of shoes will surely require 10 per cent of servicing per year. This sort of comparison could go on to fill a volume.

And a word about hospital expense. It costs very nearly the same to board an Airdale at a dog hospital while the family is away on a vacation as it does to hospitalize an infant-feeding case. Yet I have heard no mourning about this situation. And the fee of the veterinary for his services in the case of a sick, \$100.00 animal will never be less than 2 per cent of its monetary value. Again, the very people who bitterly denounce the hospital for a room-charge of \$6.00 will gladly take a hotel room while on their vacations and with pride will announce that it cost them \$10.00 a day WITHOUT meals, nursing service, proper food and trained care, all of which are included in the hospital account.

If the medical profession really charged fees proportionate, based upon the estimated value, in an economic way, of a human life, I dread to think what the comment would be. And yet it would be a fair manner of computing fees. I know of a lawyer recently who took up the cause of an estate which demanded some \$60,000.00 from an insurance company. I understand that the agreement was that the attorney should have 30 per cent of what he was able to collect, and he collected it all. Instead of contesting his fee of \$20,000.00, they felt very pleased that they had received the \$40,000 balance (he deducting his fee FIRST). The whole matter was concluded in about eight days,—just about the length of time it takes an appendectomy to be performed and the patient sent home. The skill, judgment and care required for the proper removal of an appendix are far beyond the efforts put forth by that attorney, and yet, had a surgeon charged that attorney \$500.00 for a surgical operation it would have been considered exorbitant and payment would have been, very likely, at least delayed. We "do indeed need a change in our national sense of values."

I am convinced that if Mr. John Doe, of Main St., America, would spend a little more of his coin on a regular, careful inventory of his physical condition, and then if he would follow that advice, he would save money in his annual bill for medical care. He will do this for his car (every 1000 miles) but just will not do it on his body. I heard a citizen explain it the other day and he said "a feller will spend good money to keep a car going because the car cost him \$1000.00, but he won't spend money on his body 'cause he got it so durn cheap."

The medical fraternity *does* have a great responsibility in the proper consideration of every client who approaches them for help. The fees have never been nearly as large as they should have been, compared to this responsibility. This is not a plea that we increase our charges, but it is an effort to look at the cost of medical care from perhaps another angle and to look at it fairly. It would be quite reasonable for the American Medical Association to appoint a Commission to investigate the high cost of cigarettes, candy, soft drinks, theatres, jewelry, furs, radios, sporting-goods, cosmetics, Airdales and lolly-pops.

Let us be patient with these critics and commissions, and let us go our way, performing the best service of which we are capable and charging fees which are commensurate with that service. —A. W. THOMAS, M. D.



## Contemporary Review

Milwaukee physicians have long awaited the time when a Medical Arts Building should become a fact. Now that it is assured there will be much enthusiasm about this project. A center about which medical activities of the city revolve has long been needed here. Nearly all major cities of the country can boast of at least one such building. Some of the largest cities have several.

It will interest our members to know that provisions have been made for Society quarters in the building. Executive offices and the Physicians' Service Bureau will have ample space; joint use of the auditorium and lounge with the Academy of Medicine, who will move their library to the building, has been agreed upon. The Society is to pay no rent for its quarters or the privileges extended to it. This conforms to the plan adopted in other cities. The basis for this arrangement is the fact that adequate Society quarters will attract desirable tenants.

To make this project successful, care will be exercised to admit as tenants only qualified physicians and men in good standing in their medical societies. This will recommend the project to many desirable men. A Board of Governors on which the Society will be adequately represented, will determine the eligibility of a physician.—*Milwaukee Medical Times*.

\* \* \* \*

It is unfortunate that our medical men, who are our logical preceptors in such matters, teach us so little about the fundamentals of their science. They are too busy. They are not to blame. They need no defense. Moreover, few of them have that peculiar gift for separating simple essentials from intricate surroundings. Many of them, as far as medicine is concerned, have forgotten their mother tongue and can speak only the precise but formidable dialect of their professional tribe. Even when they are able to overcome these handicaps, the ethics of their calling frown upon their appearance in print except in the approved channels of the medical press.

If these conditions are changing at all—and they appear to be—it is for the better rather than for the worse. One reads with pleasure in the Boston papers that the Harvard Medical School has resumed its course of free popular lectures on medicine and hygiene. They are given Sunday afternoons, so as to insure the largest possible attendance.

We find on the list of speakers such men as Dr. E. P. Joslin, the nationally known specialist in diabetes, Dr. W. H. Robey, Dr. J. D. Barney, and ten or a dozen others of commanding reputation. These men are rendering a fine and highly useful public service; and their example is one that may well be followed by other medical men and by other medical institutions throughout the country.—*From "Oh, Doctor!" an editorial in The Saturday Evening Post*.

\* \* \* \*

Remember the meeting Tuesday, September 15. If you can't come to the dinner, come to the meeting afterwards.

\* \* \* \*

Display the immunizing placards in your office. They can be obtained from the Secretary or from the staff rooms of the hospitals.

## SAVING FOR SICKNESS

The indispensability of medical care is frequently urged as a reason for socializing healing or placing it under the control of lay philanthropy. Under the existing social order, it is surprising that another method is not more often proposed, a method which is in accord with the individualism of our economic system and which has been successfully applied to the acquisition of the luxuries of modern life. Systematic saving has been suggested for many purposes. It makes millions of dollars available for Christmas spending; it insures vacation trips; it buys radios and automobiles. Is medical care less important than any of these?

No one would dream of omitting rent from the family budget or of demanding rent free because shelter is urgently required. Yet only a negligible proportion of the community makes financial provision for illness, and when it comes inopportunely the doctor is expected to serve without compensation because the need is so great. This indefensible mental attitude has cost the profession thousands upon thousands of dollars.

The budget is an accepted feature of domestic financing in intelligent homes. No household schedule is complete which does not take cognizance of the yearly cost of sickness. When ill health comes there is no reason why a fund should not be available for it, just as for other recurrent expenses. If illness is fortunately absent, money accumulated in excess of a safe reserve can always be put to happier uses.—*From New York Medical Weekly.*

\* \* \* \*

## ANOTHER WAY TO PICK A DOCTOR

Commenting on C. Houston Goudiss's advice on the selection of a medical adviser in a strange place, quoted by us from *The Forecast* recently, *Minnesota Medicine* (St. Paul) thinks that Mr. Goudiss failed to mention an important service of information, namely, the county medical society. It says:

"County medical societies are enlarging and strengthening their organizations as never before. They are adding special committees for this type of public relation, other committees for that. They are more conscious and better equipped to take care of their public obligations than ever before. Yet a large section of the public still knows nothing of the most fundamental and elementary service the county medical society has to offer—that of identifying and certifying honest physicians and protecting the public against quacks. The medical profession should certainly inform Mr. Goudiss just how it is prepared to assist his laudable campaign for discouraging quacks."—*The Literary Digest.*

\* \* \* \*

## MALPRACTICE

There can be no suit for malpractice if there is no doctor helping the plaintiff and his attorney. Malpractice suits hit the just as well as the unjust, therefore each is liable. It takes only a careless remark or a slurring expression when the work of another is being considered to start trouble. Remember, no one practicing medicine is secure from this method of attack against purse and reputation, hence use of the Golden Rule is urged.

Recently one of four doctors who handled an accident case was advised by an attorney that suit would be started. Two medical friends of the doctor conferred after which one went to the doctor suspected of helping the plaintiff. The suspicion was correct. An explanation of the original care of the case, and the fact that three other doctors were involved, an appeal to his sense of justice and he went to the attorney and withdrew his support from the proceedings which killed the action. A mighty fine way of disposing of a serious and disagreeable matter for which the plaintiff's physician is entitled to credit.

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No, this is not the title of a new talkie or the theme song of a radio program, but the oft used, time worn expression which every doctor, sometime in his career, has had cause to lament, as he charged the account off to Bad Debts. We suggest the next time you are exposed to this line of chatter, you obtain the signature of this responsible person to a statement such as this—

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Report of Communicable Diseases for August, 1931

DISEASES	Youngstown Cases	Campbell Cases	Struthers Cases	County Cases	Total Cases
Scarlet Fever .....	16	5	10		31
Influenza .....					
Chicken Pox .....	3				3
Tuberculosis .....				1	1
Measles .....	10		2	6	18
Diphtheria .....	3				3
Syphilis .....				1	1
Pneumonia .....					
C. S. Meningitis .....					
Erysipelas .....				1	1
Whooping Cough.....	24		2	9	35
Septic Sore Throat...					
Poliomyelitis .....	2				2
Typhoid .....	1				1
Smallpox.....					
Mumps .....					

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## S. Q. Laypius Observes:

In the "strange as it may seem" column must be included the case of a citizen who was operated for appendicitis recently, and who, when he received his surgeon's bill, said, "By golly, it was worth every cent of it."

\* \* \* \*

We heard another sad case of a baby being "marked" by its mother. This good woman was riding out through the country one evening, and passed by a field where a group of individuals were burning a fiery cross. She was much upset about this, and, sure enough the baby was cross-eyed.

\* \* \* \*

The medical term for elimination as sluggish as the Erie Railroad seems to be about grade crossings, is "constipation."

\* \* \* \*

Haven't heard much about the "medical trust" recently and the medics have been forced to "trust" more clients than ever before.

\* \* \* \*

What this country needs as much as anything else is a good hair tonic.

\* \* \* \*

Americanism—feeling depressed all day by present business conditions and then coming home and listening to some radio artist recite funeral poetry and croon dismal and forlorn melodies.

\* \* \* \*

Just by way of being different, let's return to the frock coat and long whiskers of a generation ago. But then they didn't have electric fans in which whiskers might become entangled.

\* \* \* \*

After this depression it's going to take us twenty years to save up enough money to lose in the next stock market fiasco.

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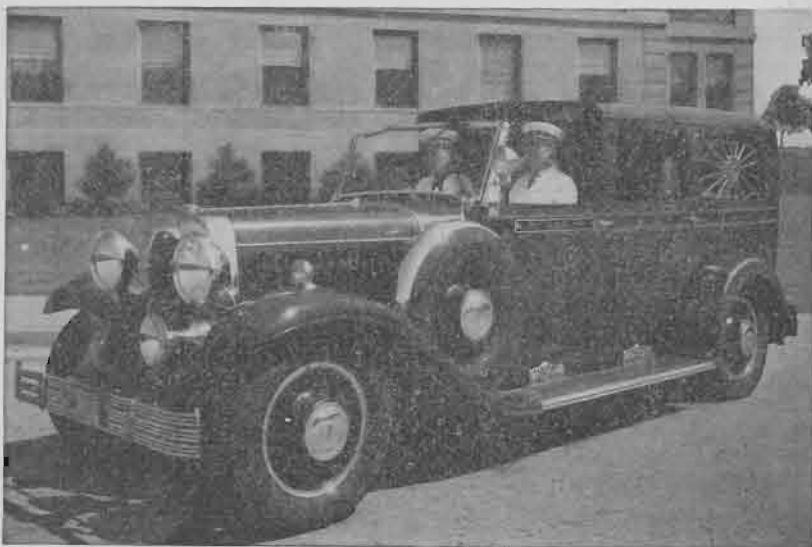
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## "When, As and If"

the bottle fed baby exhibits symptoms indicating partial vitamin B deficiency—described by Hoobler as (1) anorexia (2) loss of weight (3) spasticity of arms and legs (4) restlessness, fretfulness (5) pallor, low hemoglobin, etc.—

Dextri-Maltose with Vitamin B may be used in adequate amounts (up to 71 Chick-Roscoe units) without causing digestive disturbance. This ethically advertised product derives its vitamin B complex from an extract of wheat germ rich in B and brewers yeast rich in G. Physicians who have attempted to make vitamin B additions to the infant's formula but who have been obliged to abandon same due to diarrheas or other unfortunate nutritional upsets, will welcome Mead's Dextri-Maltose with Vitamin B. This is a tested product with rich laboratory and clinical background and is made by Mead Johnson & Company, a house specializing in infant diet materials.

Not all infants require vitamin B supplements, but when the infant needs additional vitamin B, this product supplies it together with carbohydrate. In other cases, the carbohydrate of choice is Dextri-Maltose No. 1, 2 or 3.



**THE FRED B. KING CO.**  
INTRODUCES  
**DeLuxe Invalid Car Service**  
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We have just added this smart new Town-Car model Invalid Coach—resplendent in rich two-toned purple and chromium—the most beautiful car of its type in this part of the country. It brings to Youngstown an entirely new standard of elegance, comfort and service at no extra cost.

Skilled, experienced attendants, immaculately uniformed—many new built-in features for added comfort and luxury—all available for your service at those times when these details mean so much to yourself or to your loved one.

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# INDIAN CREEK FARM

## The Home of Youngstown's Better Milk

Dr. J. E. Crewe of Rochester, Minn., conducts a Sanitarium in which his patients are given milk treatment, he uses only clean, fresh raw milk from healthy cattle. We quote him in his article on New Blood for Old.

### NEW BLOOD FOR OLD

By Dr. J. E. Crewe, Rochester, Minn.

Pure raw milk is the ideal food. It contains all the vitamins necessary to sustaining life and building tissue. (A, B and C.)

Pure raw milk is easily digested. Its properties have not been injured by heat or storage.

Dr. William Osler says: "Milk is nothing more nor less than white blood."

A cow's udder is filled not with milk but with blood, and it is the mechanical process of milking that transforms the blood with slight chemical changes into milk.

Milk rebuilds blood.

More and better blood is made faster from milk than from any other known food. The same results might be accomplished with other foods if they could be secured and properly combined. Milk happens to combine the proper elements in the right proportions and it can be fed in larger amounts.

The theory that food should be taken only at long-separated intervals is apparently wrong. Milk digests perfectly when taken every half hour.

Saying that raw milk is easily digested means that it is transformed readily into blood. A patient can comfortably drink from five to seven quarts daily. This amount supplies much more nourishment than the body normally requires. Three quarts of milk daily would supply more than enough nourishment for a patient in bed. It is the excess of nourishment that builds up weak tissues and restores the body mechanism as a whole to its highest efficiency.

A superabundance of blood corpuscles enters the blood stream. The business of the blood is to feed and rebuild the tissues and carry off waste and poisons. This process is known as metabolism.

With the milk treatment, the natural processes of metabolism are hastened and carried forward in a more thorough manner. New tissue is built and the waste products and poisons are carried away and eliminated more rapidly.

It is distasteful to give long lists of diseases that can be improved by milk treatment. It can be said, however, that striking results have been obtained with patients who are run down generally, with patients whose elimination is impaired; patients with diseases of the heart and kidneys, including high blood pressure; patients for whom it is difficult to make a specific diagnosis but who are not robust and may be suffering from auto-intoxication, chronic constipation and anemia, and patients who must be strengthened for some needed operation.

Many doctors may take exception to the claim that improvement is made in such a sweeping variety of conditions, yet few physicians will deny that most diseases are benefited by an improved condition of the blood, better nutrition, better elimination, and an increase in the alkaline reserve. The word cure is not used. We avoid it for the reason that we do not wish to make undue claims, although it could be used with propriety.

The process of muscular reconstruction is clearly visible under milk treatment, and there is every reason to suppose that the endocrine glands and all internal tissue are improved equally.

In spite of the fact that the patient takes no exercise, the rebuilt tissue is not fat and flabby but firm and solid.

Most new patients approach the milk treatment apprehensively. They declare that it is not humanly possible to drink from five to seven quarts daily. Many of them insist that they dislike milk; that milk disagrees with them; that milk is a poison to them. Yet my records, covering seventeen years, prove that less than two per cent of all patients have an actual intolerance to milk.

Our milk is better because our cattle are healthy and we produce it scientifically.

Phone 22344 Florence L. Heberding

# How long should an infant be continued on S.M.A. ?



While primarily developed for infants from birth to twelve months of age, practical experience by physicians has shown that S.M.A. may be continued with consistently good results throughout early childhood.

Write us for a few copies of this helpful little booklet entitled "Diets for the Average Well Child from Twelve Months to Six Years of Age".



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