

BULLETIN

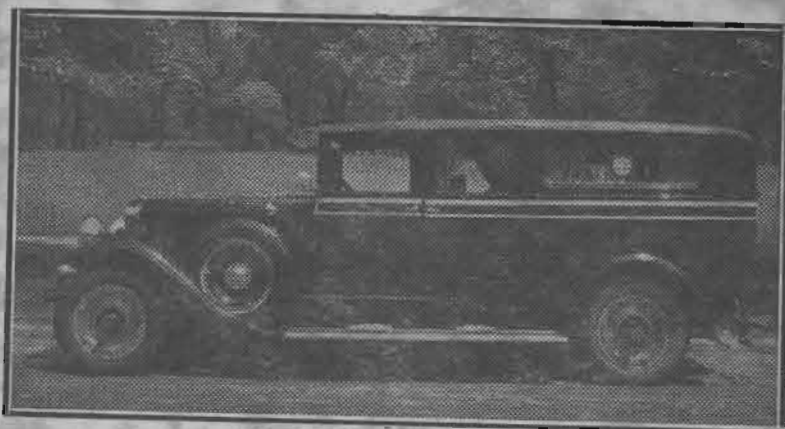
MAHONING COUNTY MEDICAL SOCIETY

DECEMBER, 1931

Volume One

Number Twelve





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"You are ruled more by ideas and less by tradition than any other people in the world.

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"The prices that were forced too high had to come down. Today all the prices are too low.

"There is now a golden opportunity for every man who has eyes to see it.

"Dollars are now being sold for thirty cents. Practically every security in the United States is now being sold at less than its value.

"The way to create a fortune is to buy from pessimists. Pay your money and take the risk.

"Frick started his career by buying coke ovens in the slump of 1873. Carnegie made \$300,000,000 by buying steel plants in slumps.

"Hundreds of fortunes have been made by buying from pessimists. Ye gods, what a chance there is at this moment!

"In five years from now most American business men will belong to the 'I WISH I HAD' Club.

"Then it will be too late to buy a dollar for thirty cents. The opportunity will be gone.

"When a horse balks, the balk is in his head, not in his legs. He moves when he thinks he will.

"And when an American business man is depressed, **THE SLUMP IS IN HIS HEAD.** There is nothing serious to prevent him from making money if he thinks he will.

"When fear rules the will, nothing can be done; but when a man casts fear out of his mind, the world becomes his oyster.

"To lose a bit of money is nothing, but to lose hope or lose nerve and ambition—that is what makes men cripples.

"This silly depression has gone on long enough. Get rid of it. It is inside of you. **RISE AND WALK!**

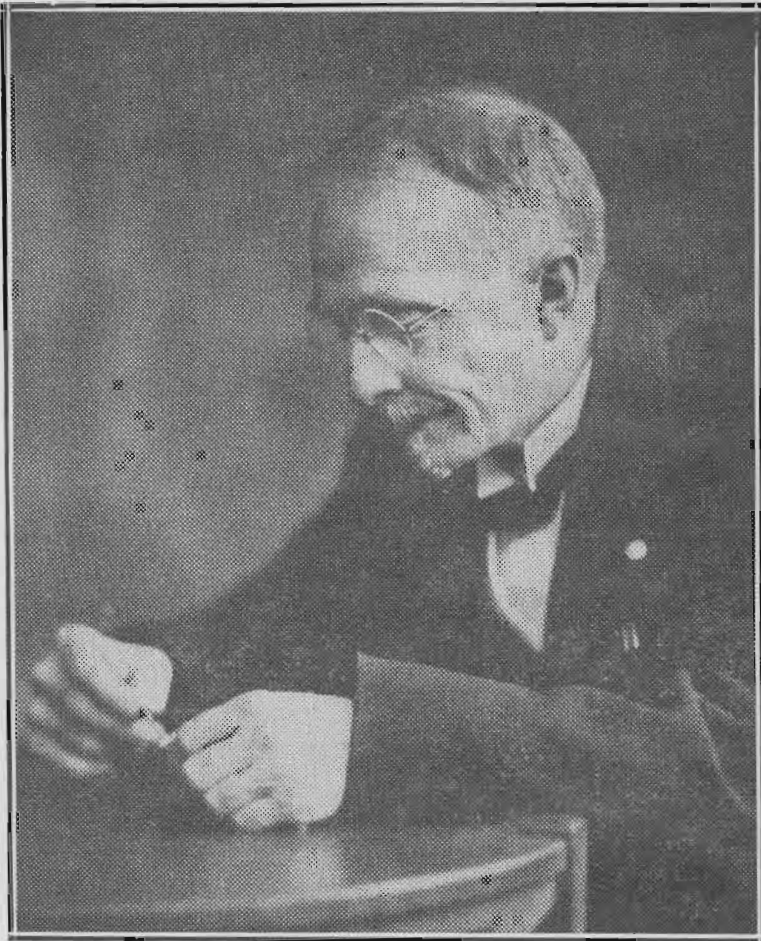
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CHEVALIER JACKSON, M. D.

DaCosta said of him, "If he had performed his wonders in New England in the Eighteenth Century he would have been accused of witchcraft!"

The Jackson Meeting

As a climax to a year filled with the highest type of scientific programs, the Mahoning County Medical Society will have the opportunity on the evening of December fifteenth to see appear before it the man who originated and developed bronchoscopy and esophagoscopy, and hear from his own lips the story of his work.

For years the tales of this man's marvelous exploits in removing foreign bodies from the lungs have been exciting the wonder and astonishment of the public, and his clinic has been the Mecca which has attracted devotees from all corners of the earth. He has been responsible for the establishment of bronchoscopic clinics at the University of Pittsburgh, Jefferson Medical College, University of Pennsylvania and Temple University and all those of the profession who came to learn his methods have been taught in the true medical spirit—withholding nothing, and without thought of personal aggrandizement or gain.

The Medical Society feels that this world celebrity is too good to keep selfishly to itself and has arranged for the facilities of the Stambaugh Auditorium so that the people of Youngstown and vicinity may enjoy this rare opportunity of seeing and hearing a man who has made medical history.

Members of the medical profession, nurses, parents, teachers and all who are interested are cordially invited to attend as guests of the Medical Society. Please arrange to be in your seats at eight o'clock as the meeting must start promptly.

Dinner Announcement

There will be a dinner for Dr. Jackson at the Youngstown Club, to begin at 6:00 P. M. sharp, Tuesday, December 15th. Any member of the Society who wishes to attend may do so, but must communicate with Dr. E. C. Goldcamp who is making the arrangements.

Important Business Meeting

There will be a meeting for election of officers and transaction of other business on—

Tuesday, December 29, 1931

at 8:30 P. M. at the Youngstown Club.

Your interest will be shown by your attendance. This is the only announcement you will receive of this meeting.

Secretary's Report

The name of Dr. James B. Birch will be presented to the Society for membership at the annual meeting on December 29, 1931.

Dr. Karl Allison is recuperating from an attack of pneumonia at the North Side Unit of the City Hospital.

Dr. Samuel Tamarkin has returned to his practice after a severe illness.

Dr. Harry Patrick is recuperating from a three month illness at his home and will return to practice in a week or two.

Annual dues are now payable and we trust everyone will facilitate the work of the Secretary and Treasurer by remitting their dues (\$15.00) immediately. Send checks to the Secretary or Treasurer.

Let us have a real turnout at the annual meeting on December 29, 1931 at the Youngstown Club. You will hear the reports of various committees and Council. Election of officers and a annual friendly gathering;—bridge, billiards, etc.

This Society is growing large enough and is active enough to warrant the central office for the business of the organization with a paid executive Secretary who can handle all the routine business of the Society, The Bulletin, credit bureau, etc. Let us think this proposition over seriously this year or next.

J. P. HARVEY.

Medical Gleanings

Don't forget the Annual Business Meeting on Tuesday, December 29, at the Youngstown Club. Mark your calendar now. Committees should have their reports ready for this meeting.

They say that carbon monoxide has a depressing effect on the cardiac and respiratory centers. A good way to find out is to warm up the motor with the garage doors closed.

Nurses are especially invited to the Jackson meeting, and as an inducement they will be ushered to their seats by the hospital internes.

When things are bad, think up ten ways of bettering them and then start doing one at a time. You will at least be too busy to worry.

When the mother says, "But Doctor, you never told me he should have toxin-antitoxin," who is to blame?

The Kelly Pool gang all hope that meetings will be continued at the Youngstown Club.

The Bulletin wishes everybody a Very Merry Christmas, in spite of—.

President's Corner

December, 1931

The Mahoning County Medical Society has been in existence for nearly sixty years. From the very first meeting, its growth has been gradual and healthy. We find ourselves, at the end of 1931, in a position of strength, and with one hundred and seventy-five of the most active physicians in the community upon our roster. We hold an intrinsic latent power which can be used as we see fit, and which has never been abused. Ours should be the task of making our organization of the greatest benefit both to us and to those whom we serve.

During the past few years our strides have been greater and our vision has increased. We have gained a certain momentum which we must not lose. We must not, for even a moment, relax. But what should be our aims?

It is my feeling that, through our training and our experience, we are justified in demanding that we be the guardians of the health of Mahoning County. And we should take part in each and every activity which is related to health problems. Every local organization which has to do with health should include upon its official board, some member or members of our profession and of our Society. We are slowly but surely attaining that position. Through this policy, the uses of these groups may be enlarged, and the abuses corrected.

There is no question but that our Society should anticipate the early adoption of a central office headquarters, with a full-time executive Secretary. This office and personnel should include our own telephone exchange system; editorial headquarters for the Bulletin, and stenographic service; credit and collection department, and perhaps our own library. Eventually it is to be hoped that we shall have our own more elaborate rooms with auditorium, club—and lounge-rooms, library and banquet-hall. We should stress the fraternal side of our Society more than we have done, and should foster the spirit of even closer friendship among our members than exists now. And we simply **MUST** emphasize the financial aspect of the practice of medicine.

The Bulletin of the Society should, by all means, be continued. This publication acts as our official announcement of meetings; it carries our name beyond our geographical confines; it contains articles of interest and of profit to each of us, and it is OURS. Every other medical society of our size in this country has a similar Bulletin, and after having inspected many of them, I believe that we can congratulate our Bulletin Committee upon publishing a magazine which is second to none, and of which we may well be proud.

I am firmly convinced that we should sponsor the candidacy of some one of our number for membership on the city and county boards of education. There is a health department in the schools, and where there must be the supervision of the health of over 35,000 children, surely it is consistent to have a reputable physician on the boards controlling these departments.

Radio broadcasts were conducted for some months last year, but we have not continued that practice in 1931. One of our members was good enough to speak over the air a great many times, but the hour of broadcast was not at all suitable. I understand that we could probably obtain a better hour for the purpose at this time, and I believe that it should be done but that no one physician should have to have the entire task. A committee could supervise the material which is to be broadcast, and from an educational standpoint it would be worth while.

Problems, such as the round-up of pre-school children, should be fairly faced and I am convinced that the ruling of Council was wise. The Council felt that such examinations should certainly be encouraged and that children be given a careful examination, but that this was best done through the influence of the parent-teacher organizations in urging parents to take these children to their own family physician for his examination. There is no reason for such an examination to be done gratis, nor should it come among the duties of the school physician, nor is it, in the strictest sense, the business of the schools.

We should make it our affair to supervise the activities of whatever free clinics are conducted in this county, and to assure ourselves that they are confining their activities to those persons who are deserving and who are unable to secure their own medical service. This includes hospital dispensaries.

If we are to be health advisors of the community, we should conduct a yearly inspection of the institutions supported by the taxpayers, and make whatever suggestions are necessary as to the sanitation, ventilation, medical arrangements, food, etc. This past year we have had the temerity to inspect the Mahoning County Infirmary and the Tuberculosis Sanitarium but we should also include the county and city jails, the Children's Home, the Crittenton Home, the detention home and whatever other institutions there may be. Not with the intention of intruding where we have no concern, but with the stimulus of offering suggestions for the betterment of those places.

Before long we shall have a Better Business Bureau in Youngstown, and I am sure that we should subscribe to membership in this most deserving project. This is one way in which we may rid the community of sheer quackery and bunkum.

We should be in close contact with the Ohio State Medical Board, and should demand from them such measures as will eradicate irregular and obnoxious practitioners. The public cannot identify these fakers, and it is our duty to call the attention of the authorities to these offices and to erase them. Would that we had the powers which the Bar Association seems to have, but the right to practice medicine cannot be rescinded except by the Medical Board which is 180 miles distant. And, in this connection, we should manifest a continued interest in those whom we send to Columbus to make our laws, and should discourage them in the forming of new legislation designed to restrict us in the proper and legitimate practice of medicine. Who among them is qualified to say that we shall not have heroin, or that eight ounces of whiskey is enough to last any one of our patients for ten days?

As has been stated before in this column, we have the problem of what is called charity. I believe that the same fund which pays the hospital account of indigent persons, should also assume a reasonable charge for medical or for surgical service. I see no reason why this should not be so. And it seems only proper that this fund be derived from general taxation, so that everyone bears his proportionate share of this burden. We should, one day, take a definite stand on this matter and settle it for once and for all. We also find that several of the neighboring villages send their indigent sick to our hospitals agreeing to pay the hospital account, but registering great surprise when it is even suggested to them that the physician or surgeon make even a nominal charge. Why should we carry the poor of these other villages? Some definite plan should be worked out, and a scheme whereby we should gain some definite compensation for work well done and for great responsibility assumed.

We have made a good start in an effort to solve the problem of lodge and contract practice. Nine of the physicians who have been doing that work, or to whom such appointments have been offered, have agreed to discontinue such work at the end of their present contracts and to accept nothing new. This is an excellent example to us, and it establishes a precedent. We, as a Society, must support them in their resolve, and must go the limit in investigating other similar practice and in discouraging it.

Why is it that a municipal and also a county medical appointment be made with utter disregard for the organized medical profession in this district? Neither of these appointees has ever been a member of our Society. I would not for one moment infer that these men are not thoroughly capable, but why, in the making of an important appointment, are we not invited to advise? In the one case we were simply ignored, but in the other case we were definitely rebuffed. We have no candidates for these positions, but the continuance of such practice will some day result in an incompetent officeholder, and the reflection will be upon the entire medical profession.

We should by all means continue with our annual Post-Graduate Day. This has been a most successful event each year and has been the means of instructing us; of bringing to Youngstown for the day, a great number of physicians from within a radius of one hundred miles; and allowing us to become acquainted with them; and it has brought the Mahoning County Medical Society into prominence in the Universities which have been good enough to send members of their faculties to address us.

Our annual banquet, our summer golf tourneys and perhaps our oldtime picnics should be continued. They serve a valuable purpose and it is at these events that our members become better acquainted and where lasting friendships are formed and developed. A few men have suggested our having an annual dance, but the majority have not favored the idea, and so such an affair has not been promoted. Possibly it should be again considered. And at one of these events, it would not be absurd to invite the dentists and druggists.

We should give the local health departments our support and our suggestions. Would that some better and more full use could be made of the Municipal Hospital.

We should purchase our own addressing machine as a necessary part of our office equipment, and we should own a motion-picture projector and a lantern. A reasonable amount of additional clerical materials will soon be apropos also.

These are some of my reflections upon what I should like to see our Society consider. I will not tire you with any more. I am appreciative that the progress made in 1931 has been through the loyalty and the very hard work of our several committeemen and their chairmen. Our programs have been particularly excellent, and not one of our committees has failed to respond one hundred per cent when called upon to work. The Council has held innumerable meetings and have seriously and tirelessly deliberated upon a great many problems and their help has been invaluable. But what has been done for the Society, has been through the shoulder-to-shoulder cooperation of many men and I bespeak the same loyalty for my successor. It has been a pleasure to serve you this year, and I am not unmindful of the great honor which is attached to the office of President. If I were to express a wish for the Society, it would be that the elected officers have vision and good judgment and endless courage, and that they have the loyal support of a membership consisting of close friends, practicing medicine in Mahoning County. Let our slogan be,—“It CAN be done,—CARRY ON.”

A. W. THOMAS.

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The Mahoning County Medical Society BULLETIN

Published Monthly at Youngstown, Ohio, by the Editorial Committee

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The Bulletin Marks a Milestone

In the President's message in this issue are a number of ideas and suggestions for the future progress of this Society. These plans are not idle dreams, but are sound and logical. They are being done elsewhere successfully, and merit the thoughtful consideration of every member.

The Editorial Committee is grateful for the kind mention made of the Bulletin, but is mindful of the fact the interesting material in its pages comes from the individual contributors and to each of them credit is due.

This is our twelfth effort and probably the last for this Committee. In our first issue we expressed the purpose of the Bulletin to be "not only a chronicle of past and future events, but also a medium of exchange of ideas among the membership to the end that it will stimulate an even greater interest in Society affairs and aid in the crystallization of opinion on various matters which affect the profession." We do not claim to have accomplished our purpose, but it is the ideal toward which we have striven and we hope that we have laid the groundwork for greater accomplishment.

It has been our desire to have more articles by local men on various subjects—scientific, historic and literary—but the exigencies of the times have forced a limitation of space in the last few months, to conform to the income received. Whether such articles are worth while or not in a publication of this kind is a matter of doubt, and an expression of opinion from the membership at large would undoubtedly be helpful to future committees.

We have felt that the publishing of Contemporary Review has been very much worth while. In the pages of our many exchanges are valuable items dealing with professional problems, showing what other Societies are saying and doing—which might not be seen by local men without a medium of this kind. And we are happy to say that the material in our own pages has been freely copied by other Society Bulletins.

We would urge that the members make free use of the Classified Advertising, and that they show their appreciation to our loyal advertisers in a concrete manner.

The years work, while at times exacting, has been very interesting and enjoyable and we are happy to have had some part in the Society's activities.

THE EDITORIAL COMMITTEE.

Some Clinical Observations with Points of Contrast in the Course of Typhoid Occurring in the Child and in the Adult.

Abstract of a paper read before St. Elizabeth's Hospital Staff September 4, 1931 by
BOYD W. SCHAFFNER, M. D.

There are points of contrast in the clinical course of Typhoid fever manifest in children and in adults which seem timely to discuss at this season of the year, although, thanks to modern sanitation and Typhoid immunization, it has become a comparatively rare disease.

When we inquire why diseases in children often run a course that differs both in degree and in kind from that found in adults, we find the reasons to be both anatomic and physiologic.

Prior to the last two or three decades, the child was considered simply as a small adult and treated accordingly; Little or no importance was attached to the fact that he is but a potential adult and that many histologic, anatomic and physiologic changes are daily taking place in his complex organism.

These processes of growth and development calling for an increase of protoplasm to carry on the differentiation and specialization of cells are at a maximum in infancy and early childhood.

There is found for example, in contrast to the adult, a difference in the normal blood picture; very young children having less red cells and more white per cubic millimeter. The liver is relatively larger and the lymphoid tissue relatively greater in the child. The child's nervous system is unstable and incompletely developed and nerve inhibition is not fully under control; an example of which is seen in the convulsion which so frequently ushers in an infectious disease and which has its counterpart in the chill of the adult.

There are but a few of the many factors determining the child's reaction to disease as well as his relation to health, and having called attention to them, we pass on to make a few observations relating to typhoid in the child and in the adult.

Infantile Typhoid is considered to be quite rare, yet it must be remembered that a number of cases may go unrecognized because of the absence of many of the symptoms which characterize the disease at a later age. There is a foetal form of the disease, transmitted through the placenta, which remains essentially a blood stream infection, since the intestines are not yet functionally active. The age incidence increases as childhood advances and reaches the maximum between the ages of ten and fifteen years. The peculiar features of typhoid in early life are seen in children under ten years old, and may be described as a fever characterized more often by nervous symptoms than by intestinal symptoms, albeit nervous symptoms are but rarely pronounced. The clinical course is milder and of shorter duration than in the adult, serious complications and sequela less frequent, the prognosis is better and convalescence more rapid. In neurotic children the onset is more apt to be of an abrupt type, rising at once from 102-105 degrees F. In cases with gradual onset there is the step-ladder rise during the first five to seven days, until the maximum is reached—then a period of continued high temperature of about the same duration—followed by the downward trend which is characterized by marked variations. In young children the entire febrile course is often completed in two weeks. After the tenth year, it conforms more closely to the adult type.

The slow ratio of the pulse to temperature elevation which characterizes Typhoid in adults, does not occur in the child until after the eighth to the tenth year, and the same age factor holds good with reference to the dicrotic pulse.

The nervous symptoms in children are, as a rule, more severe than the intestinal symptoms and are proportionate to the height of the temperature. The extreme nervous symptoms, however, belonging to the typhoid state in adults, are not often present in childhood. Headache, and mild delirium at night are

common symptoms in a majority of cases. Young children are usually apathetic to a degree bordering on to stupor, yet there are exceptions in which the disease may simulate a meningitis. Complications in children are infrequent and usually mild. Bronchitis is present in most of the severe cases. Pneumonia has been reported in nine per cent of cases. Serous and purulent effusions into the chest are occasionally seen, and sometimes abscess of the lung. Suppurative otitis occurs more often than in adults, especially during the cold season.

Out of a large group of collected cases taken from hospital reports intestinal hemorrhage occurred in three per cent, and the majority of these were in children over ten years old. Intestinal perforation is even more rare, occurring in only one per cent of cases. Differential diagnosis:—Cystitis, certain forms of acute rheumatism, the gastro-intestinal form of influenza, and pneumonia, must occasionally be differentiated. Sometimes appendicitis must be ruled out. Miliary Tuberculosis (a common disease in childhood) which runs a temperature for several days before pulmonary or cerebral symptoms appear may be mistaken for typhoid.

Ileo-colitis (not seen as frequently as it used to be) occurs chiefly in the first three years of life, a time when typhoid is rare.

In recent years, undulant or Malta fever has frequently been diagnosed as typhoid, and the agglutination test to *Brucella abortus* may be the only positive means of differentiating between these two infections.

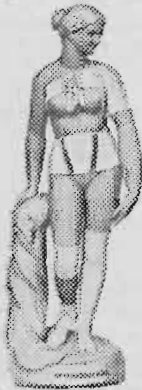
Fever lasting for several days, perhaps weeks, without any known demonstrable cause, suggests the probability of either typhoid or undulant fever. Other obscure organic diseases may be excluded only by repeated examinations, both clinical and in the laboratory.

From what has been stated it will be recognized that the diagnosis of typhoid fever in the child is more difficult to make than it is in later life, and that clinical symptoms alone can not, in every case, be relied upon. The prognosis in children, is on the whole, more favorable than in adult life, but it depends

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greatly upon the virulence of the epidemic; as there have been reported rarer, but more serious types, than the usual mild form which has been described.

The mortality in children over two or three years old does not exceed three or four per cent; death seldom occurs from the disease itself, but usually from accident or complication, the most common of which is broncho-pneumonia.

Prophylaxis is the same at all ages. The value of antityphoid vaccine has been repeatedly demonstrated. The protection is not absolute—some cases occur among the vaccinated—but the number is small. The best time of day for administration is about four in the afternoon, so that if a general reaction takes place the greater part of it will be over by the next morning. The duration of the immunity conferred is difficult to determine, but is thought to be a matter of years rather than months. Children bear the vaccination better than adults and should be revaccinated at two or three year intervals. From one quarter to one half the adult dose is given depending upon the size and age of the child. As a rule only local reactions occur.

Report of Communicable Diseases November, 1931

DISEASES	Youngstown Cases	Campbell Cases	Struthers Cases	County Cases	Total Cases
Scarlet Fever	57	7	1	6	71
Influenza	4	1			5
Chicken Pox	52			160	212
Tuberculosis	3	1	1	3	8
Measles	136			1	137
Diphtheria	7	1	1	2	11
Syphilis	3	1	1		5
Pneumonia	1			3	4
C. S. Meningitis			1		1
Whooping Cough.....		1	7	11	19
Typhoid	2				2
Enteritis.....	1				1

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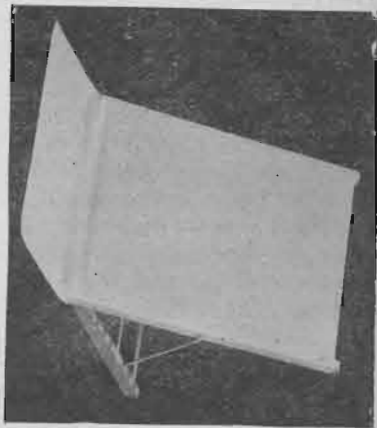
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S. Q. Laypius December, 1931

Business is on the upturn again, as evidenced by the fact that there have been two cases of hiccough in Ohio in the past three weeks.

Glad to hear that a dollar will go farther than it did. Here I'd thought that it was going faster.

I see that Mahatma Gandhi has sailed for India. Well, with winter coming on, it had to be either that or for him to buy a suit of clothes, and those English tweeds are mighty rough on the inside. But wearing tweeds would be preferable to sitting on those famed coral strands in Gandhi's costume.

Newspaper states that a baby was born in an airplane. Let's see, that would take an air-mail special delivery stamp, wouldn't it?

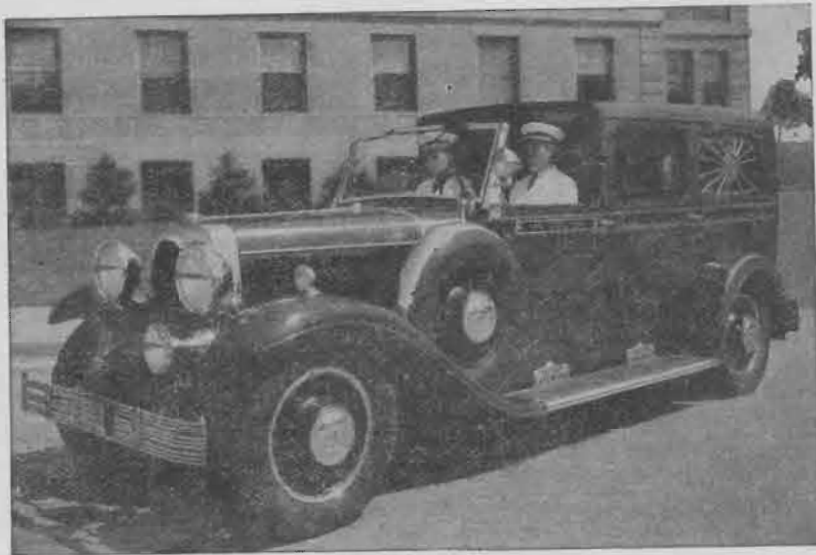
A bird-book states that crows live for one hundred years. "OLD CROW" never lasted that long.

We feel safe in saying that we are now a month nearer to the return of prosperity than we were thirty days ago.

Horse falls down. Humane policeman helps him get up. Horse steps on policeman's foot, not that he meant to do it, but, if there is anything in tradition, how could the horse miss it?

New microscope is capable of magnifying 15,000 times. This leads us to hope for the ultimate identification of the individual who starts rumors.

For every 100 blind men and boys in United States, there are said to be 74 blind women and girls. Final returns on blind tigers are not in yet, but the police report that there are none.



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Oddities of Dress

It is interesting to note what oddities of dress have outlived their original use or purpose. The buttons and vent on the cuff of our sleeves for instance are an heritage of the days when the use of forks was negligible, and the man of the house feeling the need of sustenance, had perforce to roll up his coat sleeves when he hacked off his three or four ribs of beef in order that the rich red gravy might not be wasted on his cuff.

Again in those same good old days, we understand that the horse was the generally accepted means of conveyance, and the slit in the back of our coats became a necessary feature so that when a man was astride his hay burner the coat tails could drape themselves more or less on each side of the saddle.

The comparatively short coat of today is of distinct American origin. It had its conception among the 'Vigilantes'—a group of men who took upon themselves the policing of the camps during the California gold rush of '49. These hardboiled gents found it to be considerably healthier to cut the tails off their coats, since by so doing they could beat the other chap to the draw by a second or two because of his having to fumble around under his long coat for his gun. These pioneers also found the short jacket to be more convenient in negotiating the dense underbrush of the frontier, and the result was that the long coat was very quickly forced out of the picture.

In the course of time the style drifted back to the East where it encountered much opposition among the tailors who at that time took keen delight in dressing their patrons as formally and uncomfortably as was possible. In their resentment these tailors slightly referred to the new coat as a 'sack' and this definition is still used by the craft to differentiate between the dress suit and the jacket we have now adopted for general use.

Fred Blewitt.



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Contemporary Review

The Health Department is launching a Fall campaign in the schools, particularly in the parochial schools, in an effort to see that every school child is immunized. The medical profession should do this immunization work as a part of private practice for those who can afford to pay. The pre-school child is peculiarly the responsibility of the private practitioner. — *Bulletin of the Medical Society of the County of Kings (N. Y.)*.

There has been a lot of loose talk and inaccurate statements in regard to the cost of medical care. The best modern medical care is worth all that you pay for it, provided you can afford the cost. The cost has not increased out of proportion to the increased cost of other services. Medical care, especially early diagnostic procedures and treatment, has been expanded and amplified by the discovery of more precise methods of diagnosis and has become exceedingly complex. This necessarily increases the cost of examination as compared with that of 40 years ago, when the physician used only his own senses and perhaps a stethoscope.—*Dr. A. J. McLaughlin U. S. Public Health Service. Reported in the Toledo Academy of Medicine Bulletin.*

The present tendency on the part of the public to rush to various specialists and to demand unnecessary and

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expensive investigation is responsible, in a great part, for the present fees paid to physicians. This amount could be considerably reduced if patients would first consult their family physician and permit him to decide as to the necessity for the services of a specialist, and to select the specialist best qualified to give this service.—*Pittsburgh Medical Bulletin.*

Norman Baker, notorious for his activities in promotion of an alleged cure for cancer and recently reputed to be an active sponsor of the campaign against tuberculin tests for cattle, addressed the local Junior Chamber of Commerce recently on the subject of A Sure and Positive Way to End the Depression. However, Mr. Baker offered a solution of that problem very quickly and easily and spent the rest of the time in denunciation of the "medical gang." The talk was indicative of Mr. Baker's position in the social and economic world.—*Bulletin of the Des Moines Academy of Medicine.*

Every call counts—especially in such a financial depression as we are now experiencing. The Academy Call Service insures that a maximum percentage of patient-calls shall reach the doctor. This is one reason it has been so successful.—*Bulletin of the Academy of Medicine of Cleveland.*

All medical activity outside of the private practice of medicine requires cooperation of an official organization with medicine in order to function and it can make use of social organizations if the limitations and the responsibilities of this group are understood. It is medicine's obligation to furnish leadership and in leadership rests the future position of medicine in public opinion.—*Bulletin of the Medical Society of the County of Queens (N. Y.).*

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