

# BULLETIN

of the

## MAHONING COUNTY MEDICAL SOCIETY

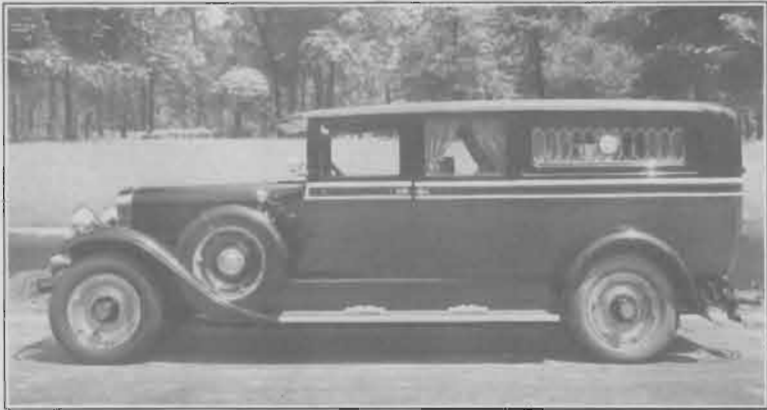
MAY, 1932

Volume Two

Number Five

*Diagnosis by intuition is a rapid method of reaching a wrong conclusion.—Da Costa.*





*Hospital on Wheels*

We wish this month to congratulate the officers and members of The Mahoning County Medical Society for their very splendid Annual Post Graduate Day on April 28, 1932.



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## The President's Page

An explanation, a warning and a challenge.

After many weeks of preparation the Post-Graduate Day has come and gone. It is interesting to note that there were visitors from sixty-one towns, representing five different states. At this time I wish to thank the various committees for their splendid work, and the whole membership for their loyal support. A great success—yet—let us pause a moment and analyze just what this means.

The Post Graduate Day was developed through the feeling that possibly others, living outside our immediate vicinity, might welcome the opportunity of sharing the privilege of hearing leaders in our profession whom we would be able to bring to Youngstown. The first meeting proved that this was true. Consequently so stimulated, greater effort was expended and each year has seen a larger attendance, so much so that this gathering just past taxed our facilities as provided to the utmost. Many new faces were seen; everyone was enthusiastic; the majority are already looking forward to the next year and want to come again. Say what you will we have gotten ourselves into something. We cannot sit back, smile and think we are good, the test has only begun. Why? What has happened? To me it seems just this. We cast out a lure and it was eagerly taken. In satisfying an appetite we created a bigger one. For what has been accomplished we have been complimented. For the spirit shown and the desire to share our good things we have been praised. A standard has been set, nothing less will do, and more will be expected of us in the future. We are challenged, we have work to do, and plans for next year must be started at once. Would it be better to stop now, quit? No!! Absolutely no!!! We answered a call, made good, and in no small degree allayed a deep thirst. Let us then, profiting by our experience, strive to new heights, and make Youngstown known, not alone as a great center in the production of iron and steel, but also as the home of a modest Medical Society, made up of a membership endeavoring to advance in the art and science of Medicine, so that their further knowledge thus attained will be to the advantage of our fellow citizens.

A. E. BRANT.

## Secretary's Report

Dr. W. M. Skipp

The Fifth Annual Post-Graduate Day of the Mahoning County Medical Society was held on April 28. The program was presented by a group from the staff of the Peter Bent Brigham Hospital in Boston, including Drs. Henry A. Christian, Samuel A. Levine, William C. Quinby and Merrill C. Sosman. The morning and afternoon sessions, including an attractive commercial exhibit, were held at the Hotel Ohio, followed by an excellent dinner and scientific program at the Youngstown Club.

More than four hundred members and guests were registered at the meeting and approximately three hundred seventy-five attended the dinner. Expressions of satisfaction were heard on all sides, as this was one of the biggest things the Society has ever done. The subjects presented by the speakers were very practical and were the last word in scientific medicine. The Society as a group and individually thanks these distinguished doctors who traveled so far to give us this treat.

The Post Graduate Day Committee worked tirelessly to make the day a success, and the meeting itself was a compliment to their efforts. The Publicity Committee did their work well in getting notices and programs so well distributed. Those in charge of the Banquet wish to thank our members who so graciously waited while out-of-town guests were served.

Advertisers in the Bulletin are congratulated on their interesting exhibits, and are given our best wishes and a cordial invitation to come back next year.

Your Secretary has nothing to report in relation to business that has been transacted by your Council.

Several of our members who were ill are able to be with us again. They are: Dr. C. M. Reed, Dr. Sidney McCurdy, Dr. H. E. McClenahan and Dr. O. J. Walker. We extend our hand and welcome you back to carry on your work with increased vigor.

Dr. A. P. Smyth, Dr. O. W. Haulman, Dr. J. P. Harvey and Dr. M. P. Jones are still on the sick list, and we extend best wishes and hope they make an early recovery. Please stop in and see Dr. W. P. Reckley who is confined to his home at 1336 Belmont Avenue.

Dr. John S. Lewis and Dr. Edgar Baker presented an excellent scientific exhibit at the A. M. A. Convention at New Orleans, consisting of colored plates, films and shadowgraphs representing various types of urinary obstruction.

Ohio State Medical Society Meeting, May 4th and 5th at Dayton, Ohio

Your President and Secretary attended with the purpose of bringing back to our Society some of the business side of this meeting. Most of the business of the State Society is done by committees, several of whose meetings we attended without the privilege of vote, as our qualified delegates were not present.

It was learned at these meetings that several county societies pay the expenses of their delegates, also that some make their President and Secretary delegates.

We feel that our Society should pay its delegates' expenses, as their entire time is taken up with business sessions. We feel that this small outlay would not embarrass the treasury and would insure our representation at the State meetings.

The Chairman of the Medical Defense Committee, Dr. Tuckerman of Cleveland, cited many cases of damage suits and warned physicians to guard against derogatory remarks about another physician or his treatment, as such thoughtless statements are often responsible for mal-practice litigation.

We were impressed by the fact that at the State Convention there were only a few more than seven hundred fifty registered, while our humble Society registered more than four hundred. This made us feel very proud of the Mahoning County Medical Society.

The following local men were at the meeting: Dr. C. D. Hauser, Dr. B. B. McElhaney, Dr. W. H. Bunn, Dr. Ivan C. Smith, Dr. A. E. Brant and your Secretary.

## The Application of Normal Diet to Diabetes

Among the many tendencies in modern medicine, the most encouraging one is the rationalization of therapy. There is a definite healthy skepticism as to accepting any further empiricism, and demand that a new procedure must be rational and thoroughly proven. There is further the tendency to question the teaching of previous generations and an attempt to put that teaching on a rational basis.

In Diabetes that same tendency is most evident. It was impossible to feed normal diet to the Diabetic previous to the discovery of Insulin by Banting and Best in 1921. Before that discovery the dietary schedule was one of limitation. For several years after that the program was still that of starvation and partial invalidism for the diabetic, and Insulin was a life saver only for the severe case, but of no particular benefit to the moderate or mild one. The procedure until about 1925 was that of giving Insulin only to those who must have it to live.

There have been certain very distinct advances since that time. Sansum and his co-workers seem to have been among the first to appreciate that the reason for metabolic disorders in the diabetic might be due to the very strict limitation of carbohydrate intake. They attempted to follow the rules of normal dietetics as outlined by McCollum, Harris, Benedict, and others, and to apply the same laws in feeding the diabetic patient. An analysis of the Normal diet as compared with diabetic diet showed that the chief difference was in the ratio of Carbohydrate to Fat. The Normal Diet ratio was about three grams of carbohydrate to each gram of fat but the standard diabetic diet as given by Joslin, Allen and most others was almost the reverse of that. Newburgh and Marsh even advocated a higher fat diet than that. The realization that improper fat metabolism due to insufficient carbohydrate, might be a factor in the frequent occurrence of acidosis and coma was recognized early. Further everyone appreciated that the higher fat diets were less palatable and more expensive and almost invariably led to occasional sprees of overeating, with serious consequences. One must see a high fat, low carbohydrate tray to understand.

Experimentally it was then shown that on the same insulin dosage it was often possible to increase the carbohydrate intake if the fat was reduced, proving that insulin not only acts to convert glucose but is also a factor in fat metabolism. It was possible to substitute as much as two grams of carbohydrate for each gram of fat without increasing the insulin.

More and more liberal diet for the diabetic was advocated, and the carbohydrate intake increased, as the fat was decreased. Adequate caloric intake was provided by increased carbohydrate and not excessive fat. Diets are now restricted to a fat intake of less than a hundred grams a day, and the carbohydrate has been increased to two hundred grams or more, thus approaching the normal diet. All other dietary principles are observed so that the diet of the rest of the family can be eaten by the diabetic except that his diet must be measured. Insulin is given in large enough doses to make adequate feeding possible.

To summarize: (1) The modern trend in diabetic treatment is the liberalization of the diet with a marked increase of carbohydrate intake, and a marked decrease of fat.

(2) All dietary necessities are included to avoid deficiency diseases.

(3) The carbohydrate intake is usually increased until the ratio of carbohydrate to fat is two to one.

(4) In infection the carbohydrate is further increased accompanied by an insulin increase to cover the additional carbohydrate.

(5) Insulin is the agent which has made normal diet possible for the diabetic, and should be used in adequate amounts.

(6) I believe the underweight diabetic is going out of style, and average weight tables should apply to the diabetic patient just as with the healthy individual.

(7) Radical starvation diets of the old type are definitely out of date.

(8) Given an adequate dosage of insulin, and a modern diet, the diabetic becomes a normal individual from a dietary standpoint, as we thus make up the only difference, that of insulin deficiency.

Morris Deitchman, M. D.



# The Mahoning County Medical Society BULLETIN

JAMES L. FISHER, M. D. . . . . Editor      E. R. THOMAS, M. D. Advertising Mgr.  
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A. W. THOMAS, M. D.

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We are approaching the time of the year when we are often asked to advise some young man, or woman whether he or she should study medicine. The answer should not be given without much thought and an attempt to analyze the individual requesting it. These enthusiastic youngsters are at the romantic and impressionable age, and many of them are idealists. Few of them have had an intimate glance into the life and problems of a physician. The girls speak of the "amount of good" that a doctor can do. The boys like to visualize themselves as surgeons and, with a great show of blood, by the wielding of a knife, saving life after life in a most spectacular way, and gaining the admiration of all who hear of their skill. We have all heard them state that they are not going to be doctors,—no sir, they are going to be *surgeons*. Perhaps some of them are, but their ideas are not well-founded upon their own qualifications for either medicine or surgery.

My idea is, that in order to practice medicine scientifically and, from a monetary standpoint, successfully, the candidate should be peculiarly endowed with certain qualities. He should have what is known as personality,—that indefinable something which radiates charm and which instills confidence into the minds of those who will employ him when they are ill. He should be of the type who are not only willing, but anxious to devote the rest of their lives to intensive study. In medicine, text-books cannot be closed upon graduation, never to be opened again. It is a lifetime of research and investigation. He must have endless courage. First, courage to carry on through the discouraging hours of his medical course. Then courage to bolster him up during his interne days and through the first dull years of establishing a practice. Again, courage to combat disease and to never give up hope for his patient. Finally, courage to meet unfavorable criticism from disgruntled clients, and to insist upon remuneration for work well done. He must be willing to never again call his life his own,—to be at the beck and call of all who would have him serve them,—to have but a taste of family life as those in other professions understand it and enjoy it. He must be, in order to attain real success, thoroughly honest. His must be a stable nervous system which is not easily upset either mentally nor emotionally. It seems that he must have an endless number of qualifications, and but few practitioners have them all. The medical profession contains too many disciples who have failed because of the lack of some of these major traits.

For these reasons, those of us who are asked to advise, should not do so until after much thought and deliberation. In a final analysis, it is up to the individual to decide, but for his enlightenment a true picture of the problem should be painted. There is no more unhappy person than he who has, through unfortunate advice or through personal decision, chosen wrongly.

A. W. T.



**PROGRAM OF THE MEETING**  
**MAY 19, 1932 – THURSDAY**



**DR. TEMPLE FAY**

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## THE OLD MINUTES

By Dr. Louis Deitchman.

Articles embodied in the first constitution of the Mahoning County Medical Society referring to THE BLACK LIST.

Art. 8. It shall be the duty of each member of this Society to report, at the end of every three months, the names of all no paying patients that names of such may be entered upon a BLACK LIST, which shall be kept by each member of this society for "refferance."

Art. 9. Members of this society shall not give medical advice or treatment to any person whose name shall appear on this list until he or she gives satisfactory proof that they have paid for previous treatment. MERITORIOUS CASES ALWAYS EXCEPTED.

Art. 10. Paupers under control of Public Guardianship shall be charged as any other patients and we agree to collect all or none of bill so charged. Should Public Guardians fail to acknowledge such bill, place their names upon the blacklist for further "refferance."

Youngstown, Ohio, April 2, 1873.

The subject for discussion, cerebrospinal meningitis was called. Dr. J. E. Woodbridge having such case at once read the report stating that it was not a true meningitis but an "essential fever", had no constant symptoms, autopsy did not prove it a meningitis. He treated it with the sulphites and subnitrites and substantiated his treatment by reciting cases, results, etc. . . .

August 6, 1873.

Dr. Starr presented a report on Cholera Infantum. (This was a perennial subject for discussion in the late summer). He gave a pretty general view of the subject. Dr. McCurdy gave his views at some length rejecting the use of catechu and kino and extolling Hydr. Chlor Miti in ¼ gr. doses frequently repeated. He thought that where stupor and paralysis occurred, it was owing to the effusion on the brain and into the ventricles of "scerums" (serums) analogous to that passed by the Bowels, and not having any outlet for the time being, produced compression.

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## HOSPITAL NOTES

### YOUNGSTOWN HOSPITAL

The Commencement Exercises for the graduating class of nurses of the Youngstown Hospital Association was held in the Stambaugh Auditorium on the evening of May 10th. Mr. W. E. Wenner was the speaker. There were fifty-seven nurses in the class, which was the largest class ever graduated in one year at the Youngstown Hospital. Music for the reception and dance was furnished by Doc Kerr and His Orchestra.

The hospital report for the quarter ending March 31, 1932, showed the number of patient days at the South Side 18,690; at North Side 5,535. For the same period last year, the number of patient days at South Side was 20,972; North Side 7,718, which shows a decrease for the quarter of 2,282 and 2,183, respectively.

The number of treatments rendered in the Out-Patient-Department for the same period was 6,356, which shows an increase over the first quarter of 1931.

### ST. ELIZABETH'S HOSPITAL

Hospital Day was observed on May 12 by holding open house from 1:30 to 8:30 P. M. The celebration was sponsored by the doctors' wives. The Children's Department with its new cubicles was in charge of doctors' wives who were nurses. An interesting feature was two furnished wards, one representing nursing in the Colonial Days and the other modern nursing in our present day hospitals. Music was furnished by the Wurlitzer Orchestra.

Graduation will take place June 6th at the Public Auditorium in Cleveland. Because of recent affiliation with the John Carroll University, diplomas and pins will be granted on the same evening as the other Corporate Colleges.

The Faculty of the School of Nursing will be represented in the procession. The graduating class is composed of 23 members.

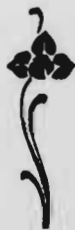
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# PUBLIC HEALTH DEPARTMENT

## MUNICIPAL HOSPITAL REPORT

Smallpox cases .....	10
Syphilis cases (negative) .....	5
Syphilis cases (positive) .....	3
Epidemic Cerebro-Spinal Meningitis .....	1
Scarlet Fever .....	1
Whooping Cough .....	1
Total Cases .....	21

## Report of Communicable Diseases April, 1932

DISEASES	Mahoning County	Youngstown Cases	Campbell Cases	Struthers Cases	Total Cases
Chickenpox .....	8	52		1	61
Diphtheria.....		17		1	18
Measles .....	388	237	17	22	664
Scarlet Fever .....	28	84	12	1	125
Whooping Cough .....	35	25		45	105
LaGrippe .....	1	13			14
Tuberculosis .....	4	20		1	25
Syphilis .....		3		1	4
Pneumonia .....	14	1	1	2	18
Smallpox .....		14			14
Mumps .....	2	1			3
Erysipelas .....	1		1		2
Ophthalmia Neonatorum.....	1				1

SPRING TYPE

# HAYFEVER

GRASS AND TREE HAY  
FEVER

Differentiated by Diagnostic  
Cutaneous Tests and Treated by

EARLY CO-SEASONAL  
Injections of Pollen Extracts

Local Distributors of Leading  
Brands

Biologicals Properly  
Refrigerated

Emergency Night Service  
Store 4-0131 or Lyon's Home 3-2871

The Lyons-Laeri Company

Youngstown's Surgical Supply  
House  
26 Fifth Ave., North From Spring  
Common

The best your money  
can buy -

YOUNGSTOWN

Brand

LIME RICKEY

and

GINGER ALE

KINGSBURY

PALE

Dar Beverage Co.

Phone 3-3333

## PRESCRIPTION WORK



We solicit your prescription problems and special formulae as earnestly as we do your general work.

We enjoy the confidence of most medical practitioners of Youngstown, and appreciate it.

(Note: We are distributors of the Pollen Antigens, Vaccines, Antitoxins and products of the Lederle Laboratories of New York)

## WHITE'S DRUG STORES

Dependable Prescription Druggists

### S. Q. LAYPIUS

How many of you birds have actually told your secretaries that you appreciate their services and their diplomacy and their patience and their loyalty? Lots of these girls would like to know that.

If you are behind in your office rent; if you need a new suit of clothes; if you are wondering whether you can keep up the payment on your life-insurance premiums; if your broker writes you nasty letters about the stock you bought on margin; if the bank wants you to pay a note that is past due; if your wife has had to dismiss her laundress; if your child can't have that new bicycle; if you can afford a hair-cut only every two months, then you are a doctor, young man, you are a doctor.

Americanism:—Lots of newspaper space about a murder in Honolulu, but almost a disregard of mentioning a convention of 425 medical scientists whose meeting will be a blessing to suffering humanity in their community.

Many a young man has mistaken Greeley's admonition. They think he said "Go rest, young man, go rest."

We pay tribute to those of our families, who, being still financially able and inclined to do so, have paid their doctor's accounts. Without them, we should have been lost.

I'll lay a bet that lots of doctors have learned how to clean wallpaper this spring.

We are beginning to feel very sorry for Charity—she has been suffering for so long and no one seems to do anything about it.

It occurs to us that some of these re-claimed cars could properly be called "LIQUID-8's."

The present financial situation is far-reaching indeed. Today I found that my car was blue and that even the clutch was depressed.

# When we say S·M·A is "Like Breast Milk"

*We mean similar in all these ways—*

## Fat

Not only does S. M. A., when ready to feed, have the same total amount of fat as human milk, but S. M. A. fat also resembles human milk fat in having the same chemical and physical characteristics. S. M. A. fat has the same Saponification number, Iodine number, Reichert-Meissl number, Polenske number, Melting point, and Refractive index as the fat in mothers' milk. We mean these things when we say "Like Breast Milk."

## Protein

S. M. A. has the same percentage of protein as breast milk and this protein, as a result of the laboratory processing, has a curd tension close to that of breast milk, producing a soft fluid curd instead of a hard curd like cows' milk. This is one thing we mean when we say "Like Breast Milk."

## Carbohydrate

S. M. A. has the same percentage of carbohydrate as breast milk and the same kind, namely lactose. Furthermore, this is a combination of alpha and beta lactose in the same proportion as it occurs in human milk, thus making it identical with the "natural" lactose found in breast milk. We mean this, too, when we say "Like Breast Milk."

## Buffer

The buffer value of S. M. A. is the same as that of breast milk. This means that the pH of the stomach contents after ingestion of S. M. A. are the same as after the ingestion of breast milk. This is in contrast to the strain on the gastric glands caused by the feeding of formulas having incorrect buffer capacities such as ordinary cows' milk formulas. This identical pH is another reason why we say S. M. A. is "Like Breast Milk."

## Digestibility

S. M. A. may be used for infants of any age with excellent results, either when breast milk is not available or as a supplement to breast milk. Since S. M. A. is so similar to breast milk, such combinations are very readily made with excellent results. Furthermore, because the buffer value of S. M. A. is the same as that of breast milk, S. M. A. imposes no extra load on the digestive system with the result that the gastric emptying time is the same as when breast milk is fed. These are two of the things we mean when we say "Like Breast Milk."

## Stools

The stools of S. M. A. in most instances have the same color, odor and consistency as those

produced by human milk; and when stained according to the Weigert-Escherich stain show the bacterial flora to be predominately acidophile. This is another thing we mean when we say "Like Breast Milk."

## Minerals

The mineral content of S. M. A. is adjusted so that it contains adequate amounts of potassium, sodium, magnesium, calcium, phosphorus, iron, copper, chlorides and sulphates according to the standards set by human milk itself. Therefore in these respects also S. M. A. is "Like Breast Milk."

## Other Physical Characteristics

S. M. A. has a caloric value of 20 per ounce, a pH of 7.0, a depression of freezing point of 0.56, and an electrical conductivity of 0.0022, and these are all the same as the corresponding values for breast milk. So in these respects also we say S. M. A. is "Like Breast Milk."

## Antirachitic Factor

Breast fed babies are customarily given cod liver oil to prevent rickets and spasmophilia. S. M. A. contains enough cod liver oil to prevent rickets and spasmophilia. S. M. A. is therefore a distinct advance and we are pleased to admit that in this respect S. M. A. is not "Like Breast Milk."

IT IS TRUE that there are many meritorious infant feeding methods that produce satisfactory results when supervised by a physician. However most physicians agree that breast milk is the ideal food when available. Therefore we sincerely invite your consideration of S. M. A. for infants deprived of breast milk not only because it resembles breast milk so closely and prevents rickets and spasmophilia but also because S. M. A. produces results more simply and more quickly.

It was demand created by news of such results that caused S. M. A. to be offered to the medical profession generally in 1921. Since then, the excellent results produced by intelligent prescribing of S. M. A. have caused physicians to prescribe it for hundreds of thousands of infants. Today S. M. A. is available practically everywhere in the United States and in several foreign countries.

## What is S·M·A?

S. M. A. is a food for infants—derived from tuberculin tested cows' milk, the fat of which is replaced by animal and vegetable fats including biologically tested cod liver oil; with the addition of milk sugar, potassium chloride and salts; altogether forming an antirachitic food. When diluted according to directions, it is essentially similar to human milk in percentages of protein, fat, carbohydrates and ash, in chemical constants of the fat and in physical properties.

**S·M·A Corporation**

**4614 Prospect Avenue  
Cleveland, Ohio, U. S. A.**

San Francisco: 437-9 Phelan Building  
Toronto, Canada: 64 Gerrard Street, East

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Attach this coupon to your prescription blank or letterhead. Please send me without obligation:

- Trial supply of S. M. A. with feeding suggestions.
- "Milk Allergy" booklet . . . a resume of current literature on milk allergy with information concerning Smaco Hypo-Allergic Milks.