

# BULLETIN

of the

## MAHONING COUNTY MEDICAL SOCIETY

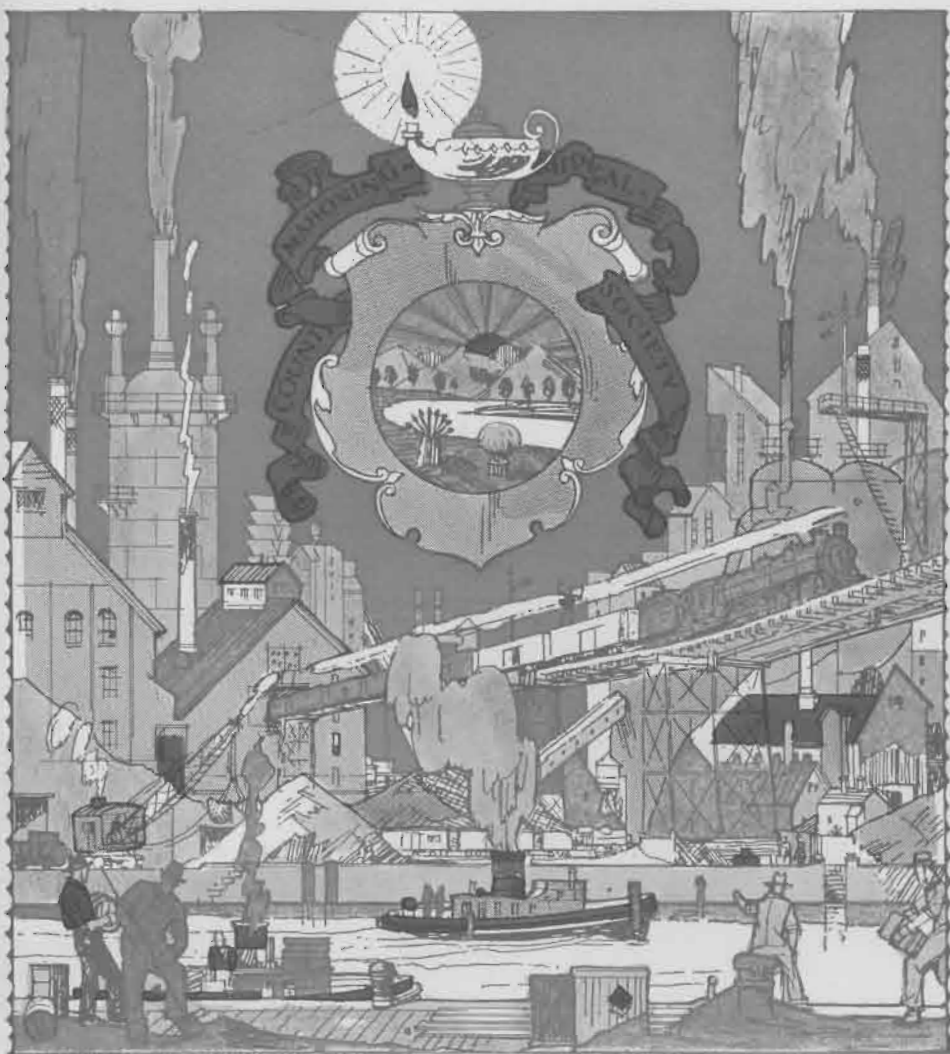
DECEMBER, 1932

Volume Two

Number Twelve

*The medical profession must educate the people in the use of Doctors to prevent as well as treat disease.*

*—E. H. Cary, M. D., President of the American Medical Association.*



PUBLIC EDUCATION NUMBER

# QUIET DIGNITY



*Hospital on Wheels*

Our "HOSPITAL ON WHEELS" is designed especially for the comfort of the patient.

You can depend on prompt service and courteous treatment,



DAY OR NIGHT SERVICE



## The Shriver-Allison Co.

225 N. CHAMPION ST.

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# INDIAN CREEK FARM

The Home of Youngstown's Better Milk



**W**E have been accused of being too modest by our doctor friends – so here goes. We are particularly proud of our Bacteria reports.

Certified Milk may have a Bacteria count as high as 10,000 per c. c.

Grade I or II up to 500,000 per c. c.

Our counts for November on both our Jersey and Baby Milk were 300! Now isn't that Something!

And you can buy this perfectly fine milk for the following prices:

Standard Milk 3.5% Butterfat, 10c per qt.

Household Joy Milk, 4.5% Butterfat, 15c per qt.

Special Jersey Milk with Seal-Kaps, 20c per qt.

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It's not what we put into it but what we keep out of it that gives our milk that better flavor.

Turn over a new leaf (if you have not already done so).

Buy and recommend our milk—it contains neither an aquarium nor a graveyard—it's clean.

FLORENCE L. HEBERDING.

# The Fish's..Name...Is....HALIBUT

On account of long experience in the cod liver oil field, Mead Johnson & Company happily is able to offer without delay — now — to the medical profession, a superior grade of *undiluted* halibut liver oil containing viosterol, distinguished by the following exclusive features:

(1) Golden yellow color, not dark brown; (2) lowest acidity — 0.7%; (3) highest potency — 100,000 U. S. P. vitamin A units and 3,333 Steenbock vitamin D units; (4) undiluted — no vegetable oil or other diluent; (5) one-fifth of the vitamin D in this product is supplied by the *undiluted* halibut liver oil.

## MEAD'S VIOSTEROL IN HALIBUT LIVER OIL 250 D

is for sale at drug stores in 5 c.c. and 50 c.c. brown bottles in light-proof cartons to prevent the vitamin-deteriorating action of light. The unique combination dropper-and-stopper prevents waste and minimizes contamination in use. No dosage directions accompany the package. Samples to physicians on request.

**DOSAGE TO PHYSICIANS:** This is the same as with Mead's Viosterol in Oil 250 D: Infants, 10 drops daily; prematures and rapidly-growing children, 15 drops; older children, 10 to 20 drops; adults, especially pregnant and nursing mothers, 25 drops or more. Special cases may require larger dosage.

**MEAD JOHNSON & CO., Evansville, Ind.,** *Pioneers in Vitamin Research*

Please enclose professional card when requesting samples of Mead Johnson products to cooperate in preventing their reaching unauthorized persons

## The President's Page

Let us review again that portion of Article 2 of the Constitution:—"Purposes of the Society" which reads—"as will elevate and make effective the opinions of the profession in all scientific, legislative, public health, material and social affairs, to the end that the profession may receive that respect and support within its own ranks and from the community to which its honorable history and great achievements entitle it."

The Aims and Objects of our Society as outlined above in our Constitution demand that we be wholly acquainted with the times. It makes it doubly imperative that we be not exactly slow and deliberate, yet not hasty nor impulsive in any course we pursue. It is mighty easy to be stampeded into an action we might regret later on. The stress of circumstances, economical as well as social, absolutely dictate that we as never before must work united rather than as individuals.

Any success I have had during this last year as your President, is due to the unstinted guidance of the officers and council, the constant assistance of the committee chairmen and fellows, and the loyal support of you members. In closing I wish all good things for you and yours during the holiday season and for the coming year.

A. E. BRANT.

## Secretary's Report

W. M. SKIPP, M. D.

Dues for 1933 are now payable.

At the last regular meeting of the Society on November 22nd, 1932, the Council recommended that the dues be cut one-third, thus a reduction from fifteen dollars to ten dollars. The Society voted to accept this recommendation and the dues were thus reduced. However, do not forget we will have to economize this year every way possible, as our income will be cut in half. Although the dues were only cut five dollars or one-third, the State Association receives five dollars of the ten dollars, therefore our dues are only five dollars, for carrying on our extensive programs.

A member becomes delinquent if he has not paid his dues by January 1st, 1933.

Do not forget the Annual meeting of the Society December 20th, 1932. This is a very important meeting, let's all be there. It is at this meeting we elect the officers for the coming year. This is the last year we elect a President, hereafter and including this year we will elect a President-elect.

At the meeting on November 22nd, Dr. I. S. Ravdin, William White Professor of Surgical Research, University of Pennsylvania Medical School, Philadelphia, Penna., gave a very interesting paper on "Water Metabolism in Clinical Patients." This paper was exceptionally good and the subject was of interest to all of us, both surgical and medical.

Dr. H. Lynn Beers, is still on the sick list, but is able to be about his home, and I know he would welcome any of the members who would call on him. His address is 142 W. Madison Avenue.

Dr. John Lindsay is confined to his home with the "Flu". Early recovery old top!

Drs. Ed. C. Baker, M. H. Bachman and O. D. Hudnut have just returned from the American Roentgenologist Association meeting which was held at Atlantic City.

## Applications for Membership

William Albert Clark, Jr., New Wilmington, Pa. (Non-Resident).

Herman A. Kling, Youngstown, Ohio (Active).

Arthur Shagrin, Youngstown, Ohio (Active)

Samuel J. Tamarkin, Youngstown, Ohio (Active).

Peter Boyle, Youngstown, Ohio (Active)

These names are published in accordance with Chapter II, Section 1 of the By-Laws which is here appended:

Section 1. Applications for membership, either Active, Associate or Non-Resident, must be made in writing upon blanks provided by this Society and the applications must be accompanied by the entrance fee. All applications shall be read at the next regular meeting of the Society, and referred promptly to the Board of Censors, with any information concerning the eligibility of the applicant that may be in the possession of the Secretary.

The Board of Censors shall, after due consideration of the eligibility of the applicant, report within one month their findings to the Council of the Society. The Council shall review their findings and proceed to ballot, and if a majority of the Council membership cast their vote in the affirmative the applicant shall be provisionally elected. The Secretary shall publish same in the Bulletin, and after fifteen days should there be no written objection received by the Secretary, the election shall be considered final and the applicant notified by the Secretary who will have him acknowledge in writing his allegiance to the Constitution and By-Laws of this Society. If, within the fifteen day period, a written objection is received by the Secretary the application shall go to the Council for their final acceptance or rejection; two-thirds of the total Council membership votes constituting an acceptance. This acceptance shall be final and the Secretary will immediately notify the candidate of his election to this Society, and will have him acknowledge in writing his allegiance to the Constitution and By-Laws of this Society.

## Medical Gleanings

Dr. H. W. Weinberg has removed his office from the City Bank Bldg., to the Professional Bldg., 226 N. Phelps St.

Dr. E. R. Thomas gave a radio address recently on "Child Health" under the auspices of the Federation of Women's Clubs.

Dr. A. W. Thomas addressed a public meeting in New Castle October twenty-sixth on "Public Co-operation With the Doctor in the Prevention of Disease."

The amplifying system to be used in our Public Health meeting will be the same efficient outfit used at the Post-Graduate Day. It is really a small broadcasting station.

Volunteers are needed to act as ushers. Please report to Dr. Brant or Dr. Fuzy.

Council has authorized the purchase of several copies of the report of the Committee on Costs of Medical Care. There will be no special comment on the report in this issue of the Bulletin because it is just released as we go to press. Members are urged to study this report carefully, both in the Journal of the A. M. A. of December third, and in the original volume.

It is being urged that meetings be held in the near future to discuss the application of the recommendations embodied in this report and it behooves each member to be well informed on the issues to be discussed.

## CORRESPONDENCE

Dear Doctor:

I appreciate the copies of your society Bulletin which you send me. They are instructive and sometimes quite interesting. The article about your first lady member caused me to refer to an old Polk's Directory I have published about in 1897. It gives: Helen L. Betts, Women's Medical College, Philadelphia, 1872. 46 St. Johns St., Boston, Mass.

With best wishes to your society.  
Fraternaliv vours. F. P. CUTHBERT, M. D.

Ky. School of Med. '93, Hahnemann Med. Col., Phila. '94.

Titusville, Pa., Nov. 29, 1932



# The Mahoning County Medical Society BULLETIN

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## EDITORIAL

It is only in the recent past that members of the medical profession have started surveying the situation and taking inventory. One sees, more and more, the tendency of writers to analyze customs and practices, and to urge renovating where it is indicated. That recommendations for the abandonment of certain precedents have been linked with very definite constructive suggestions, proves the efforts to be worthy ones,—at least worthy of careful thought and consideration.

The medical profession has always been the first to honor those of its members who through work and study, make some new observation or discovery which contributes to our ability to fight disease. But too often we honor these pioneers in naming the disease or the syndrome after these persons rather than in some other manner. As a result, at present we find many diseases, syndromes, techniques, laboratory methods, bacterial stains, culture media, body cells, etc., referred to by the names of those men who first called attention to them. A beautiful thought indeed, but most impractical.

In medical reading and from the rostrum, one is confused by reference to these proper names. It becomes necessary for the physician who reads and who listens to carry the most recent medical dictionary with him at all times if he is to have even a vague comprehension of what it is all about. A list of diseases sounds like a roster of the four hundred. Consistency here should be a virtue and the policy should be to either name all diseases after the men who first described them, or to name them in understandable terms according to pathology, histology, chemistry, or whatever term will give scientific interpretation to them. Medical writers refer to Hooligan's disease, or to Mendelsohn's syndrome, or to Prvtzsk's solution or to Heilmnt's medium or to Wasitu' stain and personally, the writer is in a daze and a fog. Medical speakers glibly refer to these names and again I am confused.

I am sure that referring to the disease according to pathological change or clinical symptom would help me a lot, and my feeling is that many medical men have the same reaction.

To be consistent, rib resection should be referred to as Adam's operation.

But if there be change, it must emanate from the medical schools and this is as it should be. It is proper and fitting to honor and to remember the men who contribute to medical knowledge, but why should not a tablet or a monument or a building erected by universities adequately perform this service? A grateful government could (as some do) very gracefully subsidize such individuals, but let us meanwhile call a spade a spade, and not refer to it as Casey's or Davis' or Paschlekkoff's instrument.

For the furtherance of medical instruction amongst medical men, this plan is necessary.

A. W. T



## The Rise and Decline of Osteopathy

Louis Deitchman, M. D.

A local newspaper recently carried a press item which reviewed Dr. Fishbein's book "Fads and Quackery in Healing". Immediately a series of letters by a spokesman of the irregulars appeared, in which the writer, an osteopath, by statistics and argument, jumped at this opportunity to show the marvels of his sect and its superiority to the regular medical profession. The osteopathic curriculum, he stated, exceeded the medical, hour for hour, and the premedical and professional training of osteopaths equaled or exceeded that of the allopaths.

This would be amusing except that statements of this sort reach a large reading public which is not prepared to weigh such figures for what they are worth. Here are more figures from the pen of the same osteopath-statistician: Whereas statistics for the 1918 influenza epidemic show a 15 to 20 per cent mortality in cases treated by M. D.'s, those who were fortunate enough to be treated by osteopaths had a mortality of only one-half of one per cent.

Let us consider these figures, also the variety of osteopath of that day. His theory was that all disease was produced by some "structural maladjustment." On this basis he would explain the epidemic as due to wholesale impingement of nerves and ligaments and treat the cases by the manipulative tricks which were at the command of the average osteopath of that vintage. In most of the states he was not even permitted by law to sign death certificates. This would make him as well qualified to treat influenza as it would to diagnose and treat yaws, psittacosis, or sprue. How they would obtain accurate statistics is therefore puzzling, to say the least. In other words, the old saying that figures don't lie apparently has its exceptions. As this sort of misinformation is daily fed in tons of literature to an all too credulous public, by some thirty-five thousand irregular practitioners, it should be a matter of some interest to us.

The problem of cults and cultists has always concerned the regular practitioner. Every generation has had its quota of irregulars who had some favorite panacea to offer: The medieval rulers touched for the King's Evil; there was Weapon Ointment; Bishop Berkeley's Tar Water was swilled by lord and yeoman alike and with like therapeutic results; there were charlatans like Perkins with his Magnetic Tractors. Dr. Oliver Wendell Holmes in his essay "Homeopathy and Kindred Affections" traces these cults down to his bone of contention which was homeopathy. With a clarity and logic which would seem to strike a death blow he attacked this particular sect. What immediate effect it had on the fate of homeopathy is mere conjecture. His prophecy in regards to homeopathy as well as other cults however was a pertinent one. Homeopathy as a cult is dead now just as he predicted. Unfortunately others and many more of them rose to take their place and today we are still confronted with the same problem. Let us therefore examine some of the predominant cults of our day.

There is an irregular practitioner in this country for every four M. D.'s. Their number in 1932 is:

Osteopaths .....	7,650
Chiropractors .....	16,000
Naturopaths and allied groups .....	2,500
Christian Science and New Thought Healers .....	10,000

Outside of this country and Canada the cults are practically unknown. There are only 1800 Christian Science Healers and not more than a hundred osteopaths and chiropractors throughout the rest of the world. That the rest of the civilized world is able to struggle along without them suggests either that our people are unusually gullible or that our laws regulating medical practice are inadequate.

The scope of practice of the irregulars varies from limited branches to the most unlimited legal right to practice medicine and surgery, such as osteopaths now enjoy in eleven states. Through powerful lobbies and strong organizations each sect is able constantly to push legislation which widens its scope of practice in every state. Congress just recently passed a bill which gives osteopaths in the District of Columbia unlimited powers to practice.

All cults have a similar development and history; the origin of every one can be traced to a scientifically unsound theory. Someone "discovers" that all disease

is due to some single new and hitherto unknown cause which all these years was overlooked by medical science, and that all doctors have been fooling the people since the dawn of medicine. With the cause of disease so simply explained, the treatment based on this is equally simple.

The story of the inception and subsequent development of osteopathy is typical of other cults. The others run a parallel course even though they may vary in the stages of their evolution. The founder of osteopathy was one Andrew T. Still, who is affectionately referred to by his followers as "the old doctor." Still was an eccentric, uneducated amateur philosopher, farmer, mechanic and jack of all trades, who in the eighties of the last century, while wandering from place to place, and from one occupation to another, discovered that he had a knack for healing and bonesetting. In floundering about for some explanation of disease, and lacking a scientific training, he struck upon an "original" idea. The body is a machine; disease occurs as a result of mechanical derangements; mal-locations of vertebrae, deviations from the normal skeletal articulations produce disordered nerve connections, which result in disturbed circulation of the body fluids". Furthermore, "all disease being due to limited and excited nerve action only caused by some structural maladjustment of some part of the body, the cure, of course, becomes obvious. All that is necessary is to find this maladjustment and correct it, and the cure is made. How simple!

With this concept of pathology and therapeusis as his basis Still went into the healing business seriously. He traveled from one city to another taking a crack at every form of ailment, and with the aid of the clap trap and showmanship which is the inevitable stock in trade of all quacks, and with a good eye for publicity, he was gradually gaining a following. Soon his ministrations began to pay dividends, and, as his practice expanded, he initiated his four sons and daughters into the "mysteries" of the "art". Then other people came who desired to learn his methods, which were becoming so lucrative. In 1892 Still founded "The American School of Osteopathy" which marks the beginning of osteopathy as a sect.

It is obvious that sooner or later the followers of Still would find that the problem of the production of disease and its treatment was not quite so simple. As a result osteopathy began to evolve and "broaden." Other causes of disease were beginning to be recognized, and gradually it has reached out and taken up one by one, the theories and procedures used by regular medical practitioners. Surgery, drugs, serums, vaccines and diet have been steadily incorporated, and now it embraces practically the whole field of medicine. While there is still a good deal of prattle among the old timers about "osteopathic lesions" the 1932 model of osteopath seldom parades this. He is more apt to hold that he is practicing scientific medicine and uses all the modern accepted methods of the M. D. Some of them are at present branching out into the specialties, particularly to oto-laryngology. What is actually happening is that the osteopaths are trying to forget that osteopathy is a distinct school of healing. For this purpose they are straining every effort to simulate and approach the standards of the medical profession.

What about the educational qualifications of the irregular practitioners? To continue with the osteopaths: until the dawn of the present century there were practically none. After the founding of the first school others sprang up like mushrooms. Some of them taught the "science" in twelve lessons, others gave short correspondence courses. All granted beautifully engraved diplomas and sent forth thousands to heal the sick. When this threatened to put the whole cult into disrepute, the American Osteopathic Association found it necessary to take a hand. A minimum course of three years was established, and a curriculum was drawn up which included anatomy, histology, embryology, chemistry, pathology, principles of osteopathy, therapeutics, diagnosis, obstetrics, gynecology and minor surgery. The entrance requirements, as late as 1910, were common school or less.

Since then the curriculum of osteopathic schools has been enlarged to four years, and includes practically all the subjects taught in the regular medical schools, using standard medical text books. The organization of the schools, even to the extracurricular activities, is imitative of medical schools. The entrance requirements are a high school certificate. Some are still willing to

flirt with less, allowing their prospective students to make up pre-osteopathic subjects at the school. None require preliminary college work, or suggest the desirability of internship.

Where the real rub comes in, of course, is in the quality of instruction. It is well known that only one-third of the cost of a medical education comes from the tuition paid by students. The balance has to be made up by endowment and subsidy. The osteopathic schools, depending as they do almost entirely on tuition fees, can hardly have high class facilities or instruction. As late as 1927 none of the osteopathic schools were able to meet the standards of even class C medical schools. Therefore, while the catalogues of the osteopathic schools are able to print an impressive array of "hours" and "courses", they are largely only figures.

The ethical standards of these schools may be well judged from the amount of "follow up" literature with which one is bombarded following an inquiry about their courses. They all hold out the great financial advantages of becoming a member of this "learned profession" and fairly reek with commercialism.

To summarize: Osteopathy like all cults began as quackery pure and simple, with a single unscientific cause of disease as a basis, and one method of treatment, which was a panacea for all ills. Gradually it began to incorporate the medical sciences and drop its pet theory, until the curriculum is now ostensibly the same as in medical schools. At present we find the osteopath entering into full-fledged and unlimited medical practice without the trouble of passing the rigid course of study of medicine or the two to four years of college, and one or more of internship, which are required of the M. D.

Dr. Louis S. Reed (Ph. D.) has written, on this subject, an admirable and wholly unbiased book. "The Health Cults". He states: "It is patent that as a theory purporting to explain the cause of all disease, osteopathy has no value. The osteopaths themselves view it only as a therapeutic agent. As a theory no recognition has been vouchsafed it by medical science. A broadminded view would consider osteopathic manipulations as a form of massage. This together with the psychic element of the therapy, are probably the chief benefits of osteopathy".

It is now only a question of years until osteopathy, as a cult, will have committed suicide, just as homeopathy and eclecticism did. The inevitable tendencies to drop its pet theory and to raise the educational standards to those required by the medical profession will in the end make them indistinguishable from the regular practitioners.

The limits of this paper will not at present permit the discussion of chiropractic and other cults. Chiropractic of 1932 is osteopathy of 1900. The theory is fundamentally the same. So much so that osteopaths claimed that the founders of chiropractic stole their thunder bodily. The evolution here is still in its lowest stage, but the tendency towards medicine is unquestionably there. It will take years of evolving until they reach even the present status of the osteopaths.

And what is happening in the meantime? All other professions have definite educational standards and requirements. The teacher, dentist, engineer, lawyer, druggist, veterinarian, all have standards of training which are more or less fixed. Even the higher mechanics, such as plumbers and electricians, have a definite period of apprenticeship and have to pass an examination. The right to treat disease, to have the very life and death of our fellow humans in our hands, to render the most essential and delicate service that one human can render another, this is handled on an entirely different basis. These 35,000 irregulars do not have to undergo a rigid course of training. On the contrary, they begin with the premise that our concept of disease, based on centuries of science and experience, should be thrown into the discard. They, with their unscientific theories, and preliminary education which may be anywhere from nothing up, and their methods of treatment which may be the mere laying on of hands, claim to be better fitted to practice the healing art.

In order to raise the quality of medical service we have raised the quality of the medical graduate by steadily raising the standard of preliminary and professional education. Since the beginning of this century the number of medical schools has been reduced nearly two-thirds by eliminating the class B and class C schools. All have a very high standard of educational facilities and teaching staff. The preliminary requirements are two to four years of college. In short

(Continued On Page 18)

# Second Annual Public Health Day

THURSDAY, DECEMBER 15th

*“Preventable Diseases  
and Their Control by  
Personal and Public Action”*

By

**Haven Emerson, M.D., F.A.C.P.**

Professor of Public Health Administration  
College of Physicians and Surgeons, Columbia University

Stambaugh Auditorium

8:00 P. M. Sharp

This is the Society's Annual Contribution to Health  
Education. The Public is Cordially Invited.

# Business Meeting

TUESDAY, DECEMBER 20

YOUNGSTOWN CLUB

8:30 P. M.

ANNUAL ELECTION OF OFFICERS

IMPORTANT BUSINESS

Each member is requested to read the enclosed folder relative to establishing a central office with an executive secretary. This is the best proposition we have had yet, and the Council recommends its approval by the Society.

## Your Christmas Gift From The Bulletin

To all members who pay their dues for 1933, the Bulletin Committee has prepared a beautiful membership certificate which can be had on application to the Secretary. It consists of a seal in color such as shown on our cover page, printed on heavy paper suitable for framing, with a suitable legend showing that the possessor is a member of the Mahoning County Medical Society, the Ohio State Medical Association and the American Medical Association.

The efforts of this Society and other affiliated associations in informing the public of the progress and accomplishments of medical science make membership in medical organizations particularly desirable. People are coming to know that Doctors who attend their Society meetings are the ones who are keeping abreast in matters of medical progress, that they have the proper background of education and training, and that the principles of medical ethics by which they are bound protect the patient.

At the Annual Public Health meeting announced in this issue, programs will be distributed to the audience. Among other things, they will contain a complete roster of members in good standing for 1932. Your patients in the audience will be looking for your name. If you are not in good standing please see the Secretary at once so that you may be included. And be sure to get the 1933 membership certificate with the Bulletin's compliments.

## THE OLD MINUTES. VIII

### Contract Practice Appraised

Youngstown, Ohio. November 11, 1874. . . . The censors made the following report on the contract system:

Mr. Chairman and members of the Mahoning County Medical Society:

Your committee to whom was referred the matter of contract practice beg leave to report as follows:

It is generally known (especially to physicians) that in counties, towns and small cities, the trustees, commissioners, societies and other such bodies generally make an effort to obtain the medical attendance of those occupying the institutions under their control at the lowest rate possible by advertising in the papers and otherwise for bids from physicians; persons so employing a physician do not think how the practitioner will perform his part, they only look at the cheap side, and the physician, in order to carry out the cheap "idea" will carefully furnish Sul Cinchona instead of Sul Quin. If good brandy is needed, he will furnish poor whiskey which is certainly not doing justice to the patient and anything but credit to himself.

As to the money aspect of the matter all organizations, public and private, make a contract not to secure the best physicians but to secure the cheapest. By so doing they seek to save money. That is, get more doctoring done than they pay for.

Whenever we place ourselves in competition with other physicians in bidding for a patient we lower our professional standing by bringing it into market and then bartering for it as you would for potatoes on the street.

There is a class of physicians called Eclectics who will underbid any regular physicians and by giving inferior drugs, and paying hasty visits, and making superficial examinations and grave diagnoses, will do as Thomas Carlyle says "the cheap and nasty", for less than any respectable physician can possibly attempt to do.

Let this occur and then we will find the respectable physician a strong convert to the non-contract system.

Again the contract system cuts off the channel by which our younger members of the profession gain a practice. And as we profess to aid each other in all things honorable, would it not be better to enjoy equal advantages as to gaining a practice? And,

Whereas we find Drs. Beuchner, Wilson and Clark, members of this society, have each contracts and,

Whereas the contract system is in direct violation of our established law and does not harmonize with the spirit of the code of ethics of the American Medical Association now in force,

Resolved that your committee discountenances the system and recommends that it be discontinued by members of this society as soon as practicable.

Very respectfully,

Jno. McCurdy  
Censors J. S. Cunningham  
W. S. Matthews

Report accepted and moved by Dr. Starr that contracts end at expiration of time. Motion carried. L. S. D.

**"Are Your Patients  
Taking Advantage  
Of the Depression"**

The words "hard times" and "depression" are in the air and too many of your patients are using these words mighty carelessly.

Why not go over your books and pick out this class of accounts for us to make personal calls on and collect under the title of your bookkeeper.

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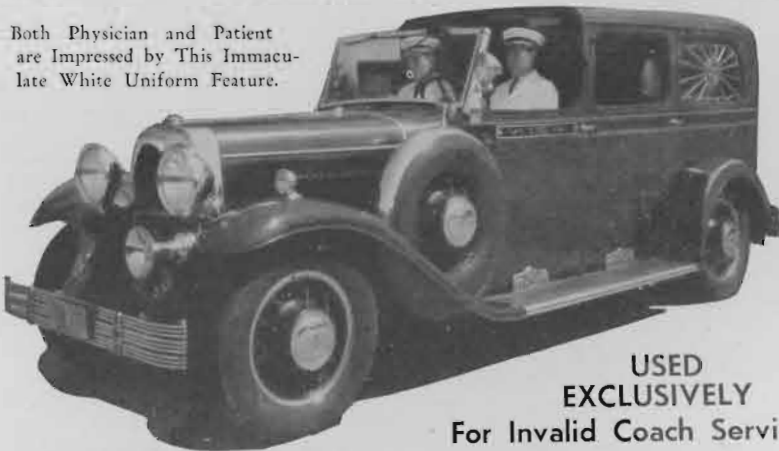
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## Report of Communicable Diseases for the Month of November

	City	County
Chicken Pox .....	64	30
Diphtheria .....	13	2
Scarlet Fever .....	42	16
Small Pox .....	6	91
Whooping Cough .....	18	2
La Grippe .....	6	
Mumps .....	1	
Syphilis .....	3	2
Measles .....	2	2
Typhoid Fever .....		1

### MUNICIPAL HOSPITAL

Small Pox .....	4
Syphilis (Pos) .....	4
Syphilis (Neg) .....	1
Syphilis (No report) .....	1
Blood Tests (Neg) .....	5
Blood Tests (Pos.) .....	1

This report of communicable diseases for the month of November shows a decided increase in chicken pox and a doubling in diphtheria cases.

Again immunization against diphtheria is urged as the only means of combating this disease.

The Municipal Hospital cases remain about the same—C. H. BEIGHT, M. D.

The distressing situation in Austintown Twp., from Smallpox can only be explained in the following way: In the first place the cases are very mild, with but few exceptions. This fact led many to neglect calling a physician. In checking over the school and community we found some who had undoubtedly had Smallpox but had been taken care of by the family.

This condition existed before school opened and children from those homes were allowed to ride in the buses and enter school. With no history of sickness, and no evidence present the rapid spread, under the conditions noted, was inevitable.

The situation is rapidly improving and an energetic campaign of vaccination has been carried out in which the physicians of Youngstown, Canfield, Austintown and North Jackson have given splendid cooperation. To date 1275 people have been vaccinated in the Austintown and Canfield Districts.

GEO. Y. DAVIS, M. D.

Health Commissioner Mahoning County General Health District.

## BANNER HEATING CO., Inc.

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## CONTEMPORARY REVIEW

Doctor, be careful about answering questions in hypothetical cases. If a patient comes in and makes a statement of certain facts covering medical service, and asks for your opinion—beware! There may be a subpoena waiting for you just around the corner.

Patients who seek litigation against a physician frequently obtain damaging information by using the above ruse on some unsuspecting doctor. If you are faced with your opinions and advice in such cases, you can expect to be embarrassed at a later date by being hauled into court and perhaps being forced to testify against a brother practitioner. Don't give cheap advice—it's expensive to you.—*Bulletin of the Wayne County Medical Society.*

"The costs and provision of medical care are admittedly perplexing, especially in such days as these of economic stress. The organized profession with the co-operation of allied social agencies is making an intelligent attempt to solve these problems; nor will it relinquish its efforts until its goal is accomplished. However, we must remember that any plan which does not assure the continued existence of the family doctor strikes at the root of medical practice and debases all professional self-respect." — *Bulletin of the Medical Society of the County of Queens.*

Talk medicine from the standpoint of prevention. Make each patient whom you serve see the relationship between his present complaint and his general health in the future. You can do this if you are keeping abreast of the times. In this connection never forget that their personal health is always a much more interesting topic to any patient than baseball, golf, fishing, or politics—*Journal of Phi Rho Sigma.*

### THE RISE AND DECLINE OF OSTEOPATHY

(Continued from Page 9)

we have closed the doors to those who are unfit or are unwilling to undergo the rigid training required to practice a highly scientific profession. But the joke is that we have taken care of the front door only. The back door is still wide open to the hordes of untrained and undertrained cultists to enter the healing profession. For every irregular, from the faith-healer to the osteopath, is trying to enter medicine through the back door. The inevitable result, in spite of our high standards, is a dilution and adulteration of the quality of healing service.

How can this be controlled? The solutions lie primarily in education and legal control. The latter is rarely effective. When a state legislature can make the teaching of the theory of evolution a criminal offense it is well nigh hopeless. By all the laws of common sense there should be a basic standard of scientific training for all practitioners. Several states have adopted a basic science minimum with the result that few cultists can pass the necessary examinations. At present there are, unfortunately, still ways of circumventing this and the problem remains a problem.

The real solution lies in the education of the general public along scientific and medical lines. While medical science has been rapidly advancing, the lay knowledge of the human body and its functionings has not kept pace with it. The public is tremendously eager for health information and it is our duty to supply it. Public lectures for the adult population should be sponsored and encouraged. The potentialities of the radio, the newspapers and the schools for educational purposes have not fully been used by us. The suppression of the cults depends on the dissemination of medical knowledge. This in turn should lead to a rise in the quality of medical service and to a healthier community, which, in the final analysis, is our chief aim.

NOTE: It is difficult to be objective in a discussion of this nature. An honest attempt at an unbiased attitude was made, and for this purpose books on the subject written by doctors were almost entirely disregarded. Dr. Reed's book was the most helpful source and it was used freely. Dr. Reed is not a physician. He is a member of the research staff of The Committee On the Cost of Medical Care, and has written an admirable and unbiased book.



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I have often wondered what is the definition of "light wines", and suddenly it came to me. These, gentlemen, are the wines upon which one gets "lit up".

Experience is a great teacher. It cost me a pound of tobacco to learn to never again question a Literary Digest poll.

Strange how many of your debtors you see at an expensive musicale.

If money is the "root of all evil", then doctors have sure "avoided all appearance of evil" in the past few years.

Newspaper item states that a certain patient has been in a state of stupor for ten months. That's not news. Lots of us have been in the same condition for longer than that.

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