



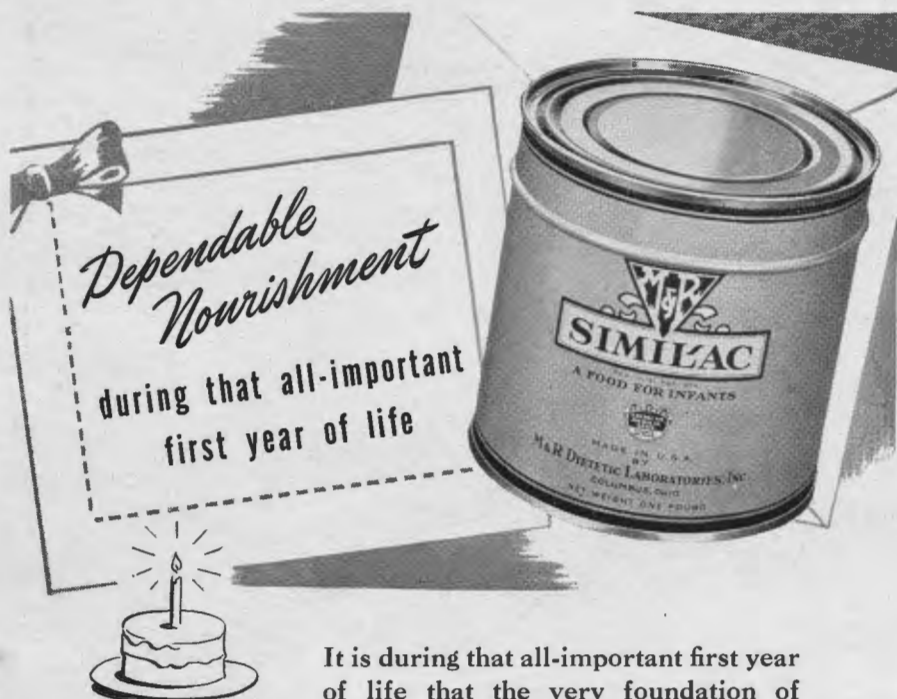
"Words are but shadows
of actions."

—Democritus.

BULLETIN

of the
MAHONING
COUNTY
MEDICAL
SOCIETY

Youngstown, Ohio
JUNE • 1948
VOL. XVIII No. 6



It is during that all-important first year of life that the very foundation of future health and ruggedness is laid.

And the well nourished baby is, in most cases, more resistant to the common ills of infancy. Similac-fed infants are notably well nourished; for Similac provides fat, protein, carbohydrate and minerals, in forms that are physically and metabolically suited to the infant's requirements. Similac dependably nourishes the bottle-fed infant —from birth until weaning.

M & R DIETETIC LABORATORIES, INC. • COLUMBUS 16, OHIO

SIMILAC

*Similar to
breast milk*



A powdered, modified milk product, especially prepared for infant feeding, made from tuberculin tested cow's milk (casein modified) from which part of the butter fat has been removed and to which has been added lactose, coconut oil, cocoa butter, corn oil, and olive oil. Each quart of normal dilution Similac contains approximately 400 U.S.P. units of Vitamin D and 2500 U.S.P. units of Vitamin A as a result of the addition of fish liver oil concentrate.

TABLE OF CONTENTS

Vol. XVIII—No. 6

June, 1948

PRESIDENT'S PAGE	212
MEDICAL SERVICE FOUNDATION	213
RADIOACTIVE ISOTOPES DISCUSSED BY DR. QUIMBY	215
RESUME OF POSTGRADUATE DAY	217
FEEDING THE SICK	219
COUNCIL MEETING	229
MEDICAL CRIER	231
THE DOG PROBLEM	235
DIFFERENTIAL DIAGNOSIS OF CORONARY INFECTION	237

ADVERTISERS' LIST

PATRONIZE THEM—THEY MAKE THE BULLETIN POSSIBLE

Ayerst, McKenna & Harrison	208	Lyons Physician Supply	228-230
Beil-Rempes Drugs	240	McKelvey's	222
Blair Dry Cleaning Co.	232	Mead, Johnson & Co.	cover
Bowman Bros.	240	Mercer Sanitarium	218
Breon & Co.	236	Merrell	240
Buffington's	234	Professional Pharmacy	220
Central Square Garage	240	Renner's	230
Ciba	216	Scott Co.	226
Connecticut Mutual Life Ins. Co.	222	Similac	206
Cross Drugs	230	Spencer Supports	238
Endo Products, Inc.	236	Squibb & Sons	238
Healthaven	226	Stillson, Lloyd T. & Asso.	220
Isaly's	214	Strouss-Hirshberg Co.	228
James & Weaver	234	Thornton's	238
Laeri's Pharmacy	222	Truedley, H. H. & Co.	236
Lester's Pharmacy	232	White Drug Stores	218
Eli Lilly & Co.	210	Yo. Printing Co.	236
Lincoln Ave. Alcoholic Clinic	234	Zemmer Co.	238
Lincoln Lab., Inc.	232		

middle age + emotional tranquility

In many women, the physical distress of the menopausal syndrome is aggravated by emotional instability. "Premarin" therapy, in the majority of cases, is synonymous with prompt relief of physical discomfort as well as restoration of emotional calm.

In addition, there is a "plus" in "Premarin" therapy...the gratifying "sense of well-being" so frequently reported following the administration of this naturally occurring, orally active estrogen.

Flexible dosage regimens to adapt treatment to the particular needs of the patient are made possible with "Premarin" Tablets of 2.5, 1.25, or 0.625 mg., and liquid—0.625 mg. per 4 cc. (one teaspoonful).

While sodium estrone sulfate is the principal estrogen in "Premarin," other equine estrogens...estradiol, equilin, equilenin, hippulin...are probably also present in varying amounts as water soluble conjugates.



4817

Conjugated Estrogens (equine)



"PREMARIN"®



**Ayerst, McKenna & Harrison
Limited**

22 East 40th Street, New York 16, N. Y.

THE MAHONING COUNTY MEDICAL SOCIETY

209

OFFICERS AND COMMITTEES

OFFICERS

JOHN NOLL, Pres. 101 Lincoln Avenue J. K. HERALD, Treas. 403 Central Tower	J. N. McCANN, Pres.-Elect 2724 Mahoning Avenue MRS. MARY B. HERALD, Exec. Sec'y 125 W. Commerce Street	V. L. GOODWIN, Sec'y 501 Central Tower
---	---	---

Censors

W. H. BUNN ('48)
E. J. REILLY ('49)
G. M. McKELVEY ('50)

Delegates

W. M. SKIPP ('48)
E. J. WENAAS ('49)
G. G. NELSON ('50)

Alternate Delegates

R. E. ODOM ('48)
I. C. SMITH ('48)
W. J. TIMS ('48)

THE COUNCIL

W. H. BUNN	J. N. McCANN	R. E. ODOM	W. J. TIMS
V. L. GOODWIN	G. M. McKELVEY	E. J. REILLY	E. J. WENAAS
C. A. GUSTAFSON	G. G. NELSON	I. C. SMITH	
J. K. HERALD	J. N. NOLL	W. M. SKIPP	

COMMITTEES

PROGRAM—Coombs, Chairman; Bunn, Collier, Golden, Evans, Myers, Lewis, Reed, Rogers, O. A. Turner, Yarmy, Renner.

POSTGRADUATE—Ondash, Chairman; DeCicco, Phillips, Wagner, Frances Miller, De Tesco, Reese, Vance, Shensa, Curtis, Deitchman, Hart, W. L. Mermis.

PUBLIC RELATIONS AND ECONOMICS—Reilly, Chairman; Walker, Hubler, Cukerbaum, Bowman, Wasilko, Firestone.

SUB COMMITTEE ON PUBLIC RELATIONS—Tims, Chairman; Goldberg, Rothrock, E. H. Young, Welter, Kendall, McGregor, McReynolds.

SUB COMMITTEE ON ECONOMICS—Ivan C. Smith, Chairman; J. C. Hall, W. P. Young, Szucs, S. H. Davidow, Raupple.

SUB COMMITTEE ON INDIGENT RELIEF—Getty, Chairman; Burrowes, Sidney L. Davidow, Rummell, Brody, Dulick.

LEGISLATIVE—Skipp, Chairman; Walker, Reilly, Smeltzer, Colla, Kaufman, Beede, Zeve, Belinky.

PUBLIC HEALTH—Hathhorn, Chairman; Mahar, Wales, Giffin, McDonough, Kiskaddon, Keogh, Tarnapowicz, Brandmiller, Schmid, Hayes, Miglets, Mossman, Welsh, S. G. Patton, Franklin, Tims.

LAY EDUCATION AND SPEAKERS—G. E. DeCicco, Chairman; Fuzy, Delfs, Dreiling, Mylott, Brown, Sidney Keyes, Stotler, Schwebel, Cronick.

VETERANS—Nelson, Chairman; I. C. Smith, Middleton, Boyle, Randell, Weller, McConnell, McElroy, Moyer.

CANCER—Brandt, Chairman; Heberding, S. J. Tamarkin, E. C. Baker, Lowendorf, Frances Miller, E. H. Young, Sears, Lupse, Scarnecchia, Altdorffer.

HOSPITAL RELATIONS—Allsop, Chairman; McNamara, Bunn, Birch, Brant, J. R. Buchanan, Ranz, Ipp, A. J. Fisher.

INDUSTRIAL HEALTH—Neidus, Chairman; J. U. Buchanan, Kennedy, W. B. Turner, Nesbit, Harvey, Welter, Allsop, Kravec, J. E. L. Keyes, Kirkwood.

HOUSING AND LIBRARY—Wenaas, Chairman; Nagel, Patrick, Klatman, Marinelli, Banninga, McOwen, McKelvey.

HARD OF HEARING—Odom, Chairman; R. A. Hall, Walker, Goodwin, Mylott, F. F. Piercy, R. L. Piercy, Myers, S. W. Goldcamp.

PUBLICITY—Morris Rosenblum, Chairman; Sofranec, Kupec, Fusco, Kocialek, Kiskaddon, Zlotnick.

MENTAL HYGIENE—Poling, Chairman; Elder, Olson, Lawton, Reese, Gustafson.

MEDICAL—LEGAL—Smeltzer, Chairman; J. L. Fisher, Fuzy, Walker, Coe, Clifford, McCune, Wilkoff.

SOCIAL—J. S. Goldcamp, Chairman; Odom, Birch, Hubler, Samuel Tamarkin, R. A. Hall, Sisek, Brandt, Hutt.

AUXILIARY ADVISORY—W. O. Mermis, Chairman; C. D. Hauser, Allsop, Weller, J. D. Miller, Rappoport.

ALLIED PROFESSIONS COMMITTEE—Skipp, Chairman; McKelvey, McCann, Nardacci, Reilly, Walker, Dentists—E. C. Brown, Kerr, James, Tomb, Mr. R. White, W. Hoobler, T. Hewitt, G. F. Hammond, Emma Modeland, Elizabeth Evans.

ASSOCIATED HOSPITAL—Patrick, Chairman; C. D. Hauser, Allsop.

STATE COMMITTEES—Medical Care of Veterans—Nelson; Judicial and Professional Relations—Wenaas; Medical Service Plans—Skipp; Delegate to A. M. A.—Skipp; Sub-Committee on Legislation—Skipp; Rural Health—E. G. Caskey; Mental Hygiene—Lawton.



**IMPORTANT INDICATIONS
FOR**

HISTADYL HYDROCHLORIDE
(Thenylpyramine Hydrochloride, Lilly)

- ▶ *Pollinosis*
- ▶ *Food and drug allergy*
- ▶ *Atopic dermatitis and eczema*
- ▶ *Chronic urticaria*
- ▶ *Allergic cough*



'Histadyl Hydrochloride' (Thenylpyramine Hydrochloride, Lilly) is a potent anti-histaminic which is relatively free from side actions. Literature is available to physicians upon request.

ELI LILLY AND COMPANY
INDIANAPOLIS 6, INDIANA, U. S. A.

MEDICAL CALENDAR

1st Tuesday	Monthly Staff meeting, Youngstown Hospital Auditorium—Nurses' Home
8:30 p. m.	Monthly Staff meeting, St. Elizabeth's Hospital, St. Elizabeth's School of Nursing
Sunday following 1st Tuesday 11:00 a. m.	Monthly Surgical Conference, St. Elizabeth's Hospital Library
2nd Monday 9:00 p. m.	Council Meeting—Mahoning County Medical Society—Office of the Society—Schween-Wagner Bldg.
2nd Tuesday 11:30 a. m.	Monthly Medical Conference, Youngstown Hospital Auditorium—Nurses' Home
8:30 p. m.	Monthly Staff Meeting—Youngstown Receiving Hospital Auditorium
3rd Tuesday 8:30 p. m.	Monthly Meeting—Mahoning County Medical Society—Hotel Pick-Ohio.
4th Tuesday 8:30 p. m.	Monthly Staff Meeting—Tuberculosis Sanitarium, Kirk Road
Every Tuesday 8:00 a. m.	Weekly Medical Conference, St. Elizabeth's Hospital Solarium
Every Tuesday 11:00 a. m.	Orthopedic Conference, St. Elizabeth's Hospital Library
Every Thursday 12:30 p. m.	Orthopedic Section, Library—South Side Unit, Youngstown Hospital
Every Friday 11:00 a. m.	Weekly Surgical Conference, Youngstown Hospital—Nurses' Home
	Urological Section, Library—S. Side Unit, Youngstown Hospital
Every Friday 11:30 a. m.	Clinico-Pathological Conference, St. Elizabeth's Hospital Library
	Clinic—Pathology Conference, Auditorium Nurses' Home South Side Unit Youngstown Hospital
Alt. Saturdays 11:00 a. m.	Obstetrical Section—North Side Unit of Youngstown Hospital

COMING MEETINGS

American Medical Association Annual Meeting, Chicago, June 21-25, 1948.

Sixth Councilor District Post Graduate Assembly, Akron, October 13, 1948.

PRESIDENT'S PAGE

★ ★ ★

Mahoning County has a long history of industrial and humane pioneering. Eight years ago the local Alcoholics Anonymous was formed and began their excellent work in this area. In March, 1946, a small private hospital was opened at 145 Lincoln Avenue and after a successful trial was taken over by the local committee for education on alcoholism in October, 1947. This hospital has been approved by the Council of the Mahoning County Medical Society and the professional service is under the guidance of a group of local physicians. In a recent issue of "Parade" the local organization received much deserved publicity and all became cognizant of the fact that this hospital is the only one of its kind in the country run by local subscription for non-profit with the cooperation of Alcoholics Anonymous.

Realizing that the general public needs education on this subject, a special meeting was held in Columbus, Ohio, two months ago under the auspices of the various departments of the State. Again our local Alcoholics Anonymous showed that it has the only committee for education on alcoholism which has accomplished a liaison between its hospital and Alcoholics Anonymous Headquarters. Such a liaison makes a definite advance in solving an important national problem.

The medical profession is realizing that there are definite scientific problems in alcoholism which need to be studied. This need has prompted our Society to invite Dr. Howard W. Haggard, Chief of the Laboratory of Applied Physiology, Yale University, to speak at our regular meeting this month. The Women's Auxiliary of the Mahoning County Medical Society has been invited to be our guests at this meeting. Dr. Haggard is a national authority on the subject and will speak in the Ball Room, Hotel Pick-Ohio, Tuesday evening, June 15, 1948, at eight-thirty o'clock, on the subject: "Alcoholism as a Medical Problem." This will be a scientific discussion for the doctors and their wives on a rather new field of scientific research.

JOHN NOLL, M. D.

BULLETIN of the Mahoning County Medical Society

Published monthly at Youngstown, Ohio

Annual Subscription, \$2.00

VOLUME 18**JUNE, 1948****NUMBER 6**

Published for and by the members of the Mahoning County Medical Society

C. A. GUSTAFSON, Editor
101 Lincoln Avenue

ASSOCIATE EDITORS

F. S. Coombs

H. K. Giffen

H. E. Patrick

W. D. Coy

S. Klatman

H. J. Reese

J. L. Fisher

J. D. Miller

R. J. Scheetz

S. W. Ondash

W. J. Tims

MEDICAL SERVICE FOUNDATION, INC.

Final plans for the incorporation for the Medical Service Foundation of the Mahoning County were made at a dinner meeting at the Youngstown Club on May 25th. These plans represent the culmination of many months of work on the part of Dr. E. J. Reilly and his committee. The incorporation papers have now been completed and sent to Columbus. There still remain many details to be worked out before this foundation is in full operation. Further information on the operation of this plan will appear in the next issue of the Bulletin.

The corporation is founded for the purpose of advancing the contribution of the medical profession to the cause of public health; affording facilities for medical research and education which otherwise might not be available; improving the guidance and training afforded to the interns in the several hospitals in the county; offering aid in the education and training of the nursing profession; enhancing the standing and dignity of the medical profession; and seeking to improve the relation between physician and patient and the care and service afforded to the latter; all with particular reference to Mahoning County, Ohio.

The foundation will be directed by a board of trustees which include: Drs. F. S. Coombs, C. A. Gustafson, J. K. Herald, G. M. McKelvey, C. G. Nelson, E. J. Reilly, W. M. Skipp, I. C. Smith, E. J. Wenaas, Mrs. John W. Ford, H. W. Jones, Bishop A. McFadden, William F. Maag, Jr., Charles G. Nichols, Carl W. Ullman. Dr. Noll as president and Dr. L. H. Getty as chairman of the committee on indigent relief, will serve ex-officio. Attorney Franklin B. Powers is counsel.



Isaly's Exhibits Again at Post-Graduate Day Assembly

Through the courtesy of the Mahoning County Medical Society, the Isaly Dairy Co., for many years has been privileged to display its milk and other dairy products at Post Graduate Day Assemblies. Isaly's has welcomed and enjoyed this contact with members of the Medical Profession and the opportunity it affords annually to explain the quality and safety of these highly essential foods. Medical men, in turn, are always welcome at Isaly's.

Isaly's

DAIRY SPECIALISTS

RADIOACTIVE ISOTOPES DISCUSSED BY DR. QUIMBY AT MAY MEETING

The diagnostic and therapeutic applications of atomic energy, rather than their propensities for mass destruction, were the subject of an excellent paper by Dr. Edith H. Quimby of Columbia University at the May 18th meeting of the Mahoning County Medical Society. This discussion of radioactive isotopes was all the more timely because the year 1948 marks the fiftieth anniversary of the identification of the first naturally occurring radioactive element, radium, by Madame Curie. Dr. Quimby, who has greatly advanced the science of radiation physics both as an educator and as a research clinician, emphasized that the artificially produced radioactive isotopes thus far investigated are not a cure-all for cancer and deplored the optimistic statements appearing in the lay press.

Although it is now possible to produce radioactive isotopes of any element, phosphorus, sodium, strontium, and iodine have been used most extensively in the treatment of malignant processes. P-32 especially has found favor in such generalized processes as lymphoma, leukemia and carcinomatosis. It was pointed out by Dr. Quimby that the phosphorus is not preferentially absorbed by such tumor tissue however, and thus is not superior to, or a replacement of, radiation therapy, whereas radioactive iodine is preferentially absorbed by functioning thyroid tissue and can thus exert more specific localized destruction in certain varieties of cancer of the thyroid gland. Until additional radioactive elements are produced in the atomic pile which will selectively concentrate in a specific tissue, the treatment of malignancy in general will continue to be carried out by other modalities.

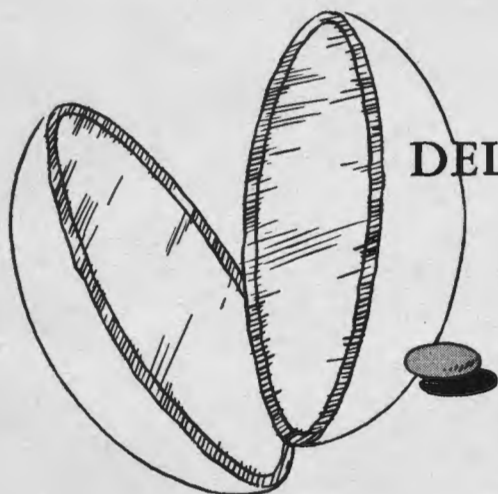
Two non-malignant conditions are being treated with P-32 with considerable success. In Polycythemia Rubra Vera, radioactive phosphorus is now considered the treatment of choice, results being much better than with other forms of therapy. More recently radioactive iodine has been used in the treatment of both primary and recurrent forms of non-nodular toxic thyroid disease. Of 52 primary cases so treated 86% showed a satisfactory remission of toxic symptoms; of 25 cases previously treated by other methods, 90% obtained a satisfactory remission. However, Dr. Quimby expressed the belief that radioactive iodine will not replace surgery in the treatment of thyrotoxicosis except possibly in recurrent cases where this form of therapy is possibly superior. She stated that thus far it is impossible to predict what ill effects, if any, might occur in such patients in future years.

Concerning the diagnostic applications of radioactive substances, Dr. Quimby expressed considerable enthusiasm. Both hyper- and hypo-thyroidism can be detected by studies with radioactive iodine and the Geiger Counter, a diagnosis of Cretinism having been made as early as three weeks of age. The optimum level for amputation in cases of gangrene has been determined by studies utilizing radioactive sodium. Other studies are underway to discover additional uses of isotopes.

The use of radioactive elements as tracers in physiological research was discussed and some interesting studies were reported. This method of study has limitless possibilities and Dr. Quimby has expressed the opinion that important facts concerning growth, metabolism, and cancer will be brought to light. She ended her discussion with a plea for the use of adequate protective methods in the handling of radioactive materials so that there need be no recurrence of the epidemic of radiation injuries which marked the early years of experimentation with radium and X-rays.

R. J. S.

PYRIBENZAMINE *in a NEW form . . .*



DELAYED ACTION TABLETS

FOR NIGHT-LONG ALLERGIC RELIEF

Many allergic patients may now receive symptomatic relief throughout the night. Delayed action tablets of Pyribenzamine are protected by a special coating so that the drug is not released for absorption until approximately the time an uncoated tablet ceases to be effective (4 to 6 hours). Sufferers from hay fever, urticaria, or atopic dermatitis can usually obtain night-long relief by taking one uncoated tablet of Pyribenzamine with one delayed action tablet at bedtime.

Pyribenzamine; scored tablets 50 mg., elixir 5 mg. per cc. (Council Accepted)

- Pyribenzamine delayed action tablets 50 mg. (Not Council Accepted)

Ciba

PYRIBENZAMINE (brand of tripeleminamine) Trade Mark Reg. U. S. Pat. Off.



CIBA PHARMACEUTICAL PRODUCTS, INC., SUMMIT, NEW JERSEY
2/13733

JUNE

Resume of Postgraduate Day Session

MEDICAL CLINIC

The Medical Clinic section of the annual Postgraduate Day assembly of the Mahoning County Medical Society was held on Wednesday, April 14, 1948, at 9:30 A. M. at St. Elizabeth's Hospital School of Nursing auditorium. The largest audience of doctors to ever attend the medical section was present. 102 physicians and their guests heard three very interesting cases presented and discussed.

The first case, which was one of diabetes in the aged and its complications, was discussed by Dr. Robert W. Keeton, Professor and Head of the Department of Medicine, University of Illinois. Dr. Keeton discussed the case from the point of view of why diabetic manifestations occur and how they may go on to encourage the development of complications. He also discussed at some length the hereditary aspects of diabetes.

The second case was one of hypopituitarism and hypogonadism in the male. This case was discussed by Dr. Willard O. Thompson, Clinical Professor of Medicine, University of Illinois College of Medicine. Dr. Thompson presented a very instructive, as well as humorous, coverage of the patient. He further discussed this type of case by the presentation of his own series of slides which he used to stress treatment of such cases with, chiefly, testosterone propionate or chorionic gonadotropin.

Dr. John B. Youmans, Dean of the College of Medicine, University of Illinois, was expected to present the third case, which was one to demonstrate the problems of geriatric nutrition. However, Dr. Youmans was stranded in the back-country of central Ohio by poor train service and was unable to appear at the clinic. Dr. Thompson presented this patient and quickly demonstrated by questioning the patient that the elderly person cannot be relied upon to feed himself an adequate diet.

H. J. R.

ANEMIAS OF NUTRITIONAL ORIGIN

JOHN B. YOUMANS, M. D.

Mild grades of nutritional deficiencies are more common than is generally supposed. There are several substances necessary to combat nutritional anemias, namely, protein which is necessary for cellular stroma; iron, copper, and possibly cobalt and Vitamin C.

Iron deficiency anemia is usually due to inadequate utilization of iron and not to inadequate intake. This type of anemia cannot be relieved by diet but requires iron salts in therapeutic doses. It occurs in children born of mothers whose iron intake during pregnancy was inadequate with the result that the infants do not have adequate reserves for normal growth; women who have lost iron to the fetus during rapid multiple pregnancies; menses, and labor; and in blood loss from any cause.

There is a nutritional macrocytic anemia seen in the temperate zone which is similar to pernicious anemia and responds to Folic acid or liver.

Dr. Keeton presented a statistical analysis of the surprisingly high incidence of nutritional anemias.

J. D. M.

THE MERCER SANITARIUM

MERCER, PENNSYLVANIA

For Nervous and Mild Mental Disorders. Located at Mercer, Pennsylvania, thirty miles from Youngstown. Farm of one hundred acres with registered, tuberculin-tested herd. Re-educational measures emphasized, especially arts and crafts and outdoor pursuits. Modern laboratory facilities. Address . . .

JOHN A. MCKAY, M. D., Medical Director

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •



**"OVER--
HALF A
CENTURY"**



Dependable Prescription Druggists

WHITE'S DRUG STORES

FOUR convenient locations
to aid YOU and YOUR PATIENTS

259 W. FEDERAL
(Opp. Warner Theater)

283 E. FEDERAL
(Near Watt St.)

1648 MAHONING AVE.
(West Side, near Steel St.)

1843 HILLMAN ST.
(Cor. Warren Ave.)

FEEDING THE SICK

ROBERT W. KEETON, M. D.

There are two ways of getting into difficulties with the feeding of sick patients: Refusal of the patient to take adequate quantities of food and a defect in the patient's ability to take food. Appetite is not present at birth, but comes on with cerebral development. However, hunger contractions are present at birth. Patients that are fasting or unable to eat, lose their desire for food, but still have hunger contractions. So there are several centers involved in the physiology of hunger. In the cortex is the simple preference for different foods. In the hypothalamus is the desire for food, including intense desire or wolfing of food, and in the stomach are the hunger contractions which are transmitted via the vagus to the vagus center in the medulla. The cough center is near the vomiting center which often results in vomiting after coughing, as in whooping cough.

In the G. I. tract, the throat and the pylorus are the local reflex centers that cause vomiting. So if a tube is passed through the duodenum into the jejunum, food can be given to patients that are vomiting, without stimulating these vomiting reflexes.

In patients in whom the hunger reflexes are completely inactive for some time, as in anorexia nervosa, the resulting severe under-nutrition causes kidney failure, with a high N. P. N. The metabolism becomes low, cholesterol high, the adrenals become deficient, glucose curve becomes flat, and the 17 ketosteroids become low. There is failure of the anterior pituitary gland and resulting failure also of the target glands, so that the glands all become dormant and take care of only basal requirements. In an overweight patient, the pituitary gland does not suffer as a result of weight reduction. A patient 15% overweight by normal standards is considered overweight. Food acts on patients whether they reject or approve of the food. So underweight patients should be put on a high caloric general diet. If they reject this they should be tube fed. And if the tube is put past the duodenum, the psychic responses, nausea and vomiting, can be overcome.

As the patient's nutrition and psychological condition improves, the tube can be removed and one meal of 700 calories a day given. This can be increased to 1800 calories a day. The patient can then be given three meals a day and the calories gradually increased to 3000 calories a day.

C. C. WALES, M. D.

HERNIATED INTERVERTEBRAL DISC

OSCAR SUGAR, M. D.

A highly informative and complete discussion of the herniated intervertebral disc was given by Dr. Oscar Sugar. In the general explanation of the anatomical basis for the lesion it was pointed out that the fracture or tear in the annulus fibrosis was the first lesion and that this was followed by the protrusion of the disc or the nucleus pulposus. It was pointed out that the time interval which frequently exists between the onset of low back pain and the radiation of pain down the affected extremity can be accounted for by the interval between the rupture of the annulus and the actual pro-

**Dependable Disability Insurance
Underwriters
Lloyd T. Stillson & Associates**

GENERAL AGENT

LAMAR K. DONAHAY, Agency Manager
1304-5 Central Tower Telephone 7-4172 Youngstown, Ohio.

— ASSOCIATES —

RANDALL L. CALHOUN
JAMES A. COZZA
OSCAR F. GAYTON
E. J. GILRONAN
ROY L. HARTZELL
EDWARD R. HEINZMAN
NORMAN W. IGO
HARRY D. L. JOHNSTON
HENRY J. KANNENSOHN

LEO H. LESS
THOMAS McDONAGH
P. E. MANSELL
DONALD L. SICAFUSE
WILLIAM P. SULLIVAN
E. M. TANNER
INNOCENZO VAGNOZZI
JOSEPH P. VAN NEST
FRANCIS P. WHITE

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

Professional Pharmacy

418 Dollar Bank Bldg.—4th Floor

Telephones — 37334 - 34127

3634 Market St.

Phone 24805

•

**Our service is limited to PRESCRIPTIONS, BIOLOGICALS,
AMPOULES and MEDICAL SUPPLIES.**

**Prompt attention and immediate delivery will be made on all
phone orders either to your office or to your patient's home.**

Store Hours—Daily 8 A. M. to 6 P. M.

OPEN—Monday, Wednesday and Friday Evenings

trusion of the disc tissue. In the discussion of the clinical symptomatology it was further pointed out that in addition to the fact that there is radiation of pain down the affected extremity, the character and the location of pain is of particular importance inasmuch as it not only establishes the presence of a herniation but has some localizing value in respect to the affected nerve root. In reference to the clinical syndrome the following was considered to be of particular importance:

- (1) Characteristic nerve root or radicular type pain extending down the affected extremity.
- (2) Localization of pain and/or sensory disturbances corresponding to the nerve root dermatomes.
- (3) Reflex changes.
- (4) Postural changes in the lower back, secondary to associated muscle spasm.
- (5) Percussion pain with extension corresponding to the dermatomes involved.

It was pointed out that in about 60 per cent of the cases the 1st sacral root is involved with associated loss of the ankle jerk, extension of pain to involve the lateral aspect of the ankle and lower leg, and radiation of pain to this same region. When the 5th lumbar nerve root is involved (in the 4th lumbar interspace), the pain and sensory disturbances are generally in the dorsum of the foot and the region of the great toe with preservation of the ankle jerk.

It was pointed out that operation should be deferred until such time as the patient is having acute symptoms and that the usual result of operation during the period of regression of symptoms is usually followed by poor or indifferent results.

In reference to spinal fusion following removal of the herniated intervertebral disc, it was pointed out that the actual operation for the removal of the disc involves practically no loss of bony substance or support of the back and that the need for fusion is not dependent upon any change brought about by the operative procedure itself. However, when a herniated intervertebral disc is associated with a structurally inadequate or weak back, or when a herniated disc occurs in an individual who earns his livelihood by severe or excessive physical labor, it was felt that fusion should be carried out at the time of removal of the disc herniation. In these instances the entire operative procedure is carried out jointly with the orthopedic service.

O. A. TURNER, M. D.

INTESTINAL OBSTRUCTION

JOHN T. REYNOLDS, M. D.

Dr. Reynolds made no attempt to cover all of the conditions which may cause obstruction in the intestine. However, he observed that acute obstruction in the colon is a relatively frequent disease which is curable if it is attacked early. Fatalities occur from varied reasons. Carcinoma is one of the most common causes of such intestinal obstruction. Half or more of the lesions are found in the distal part of the colon and rectum. Many of these originate from polypi which have become malignant. Bleeding is usual and irregularity in the bowel habits is frequently the first symptom complained of by the

Palm Beach **FORMALS**

For Summer Dress-up Occasions

For summer weddings, dances and all dress-up occasions, you will find Palm Beach formals so comfortable and cool, you'll really enjoy dressing up! Your wardrobe should include a white Palm Beach shawl-collar jacket. Come in today for your selection.

\$22.50

Formal Jacket

A Goodall Fabric

McKELVEY'S

(Men's Store — Street Floor)

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

No SOCIAL SECURITY for the Medical Profession

The Connecticut Mutual Life Insurance Company will help you create your OWN pension. Plan guaranteed against death or disability.

LEON C. TAGGART, District Manager

**11 W. Commerce Street
Office 78989**

**Youngstown, Ohio
Residence 23496**

"Does it matter who fills the prescription?"

"Ah Doctor, does it matter who writes the prescription?"

LAERI APOTHECARY

Home Savings & Loan Bldg.—2nd Floor Telephone 79636

patient. The lesion grows not only into the lumen of the gut but around it into the surrounding tissues. If it is found in the sigmoid or rectum, it may cause blocked blood supply and the patient may complain of hemorrhoids. Dr. Reynolds suggested that the development of hemorrhoids should always be investigated from the standpoint of possible tumor in the distal part of the intestinal tract. When tumor is found in the sigmoid colon, if it is scirrhous in type, there may be little bleeding but constipation may gradually develop with a final episode of obstruction which may first be intermittent and then become absolute. A fecal mass may occlude the narrowed lumen. The symptoms from lower intestinal obstruction may be largely referred to the right side of the abdomen due to backing up of gas and fecal material in the colon. Some of these patients may become anemic. Dr. Reynolds suggested that any lower abdominal intestinal complaint should be investigated immediately from the standpoint of possible tumor. He suggested first to do a rectal examination, then if necessary, a proctoscopic examination and third and last, an x-ray study if it is indicated and the others are negative. He said this is cheaper for the patient, much quicker and far more desirable. He cautioned against the use of barium in the presence of narrowing or obstruction in the colon for fear that the inspissated barium may cause acute obstruction.

He reported the study of fifty consecutive cases of intestinal obstruction caused by tumors. Most of these cases had symptoms seven months or more before the diagnosis was made. When obstruction is evident, the first thing to do in therapy is to relieve the obstruction. After this has been done, then the treatment of the carcinoma follows at a later operation. In some cases the obstruction may develop very gradually but if the obstruction develops rapidly, the stretching of the lumen of the gut may cause occlusion to the circulation and gangrene can develop very rapidly. When this occurs, it is due to the pressure within the lumen exceeding the pressure in the vascular channels. When ischemia develops, perforation may follow rapidly with death in near 100 percent. When obstruction occurs, the colon may be entirely filled with fecal material proximal to the lesion. If there is more time, due to slowly developing obstruction, then thorough preparation of the patient will give better operative results. He again cautioned against the use of barium, especially administered orally, for fear of complicating and making the obstruction worse.

Rather than using barium from above, much can be learned by a flat plate of the abdomen by the evidence of gas in the intestine proximal to the obstruction. If acute obstruction occurs, dilation may develop very rapidly. These are emergency situations which cannot wait till morning for operative interference.

The procedure in the first operation is to relieve the obstruction. Colostomy should be far enough proximal to the obstructing lesion to facilitate the secondary operation by allowing plenty of intestine with which to work. He also cautioned that it is necessary to be very sure of the diagnosis and tumor site at the time of the first operation. The colostomy should bring out a loop of the colon and avoid putting any sutures in the wall as these may ulcerate through and contaminate the peritoneal cavity. He cautioned against the use of tubes in the lumen of the colostomy as these may cause ulceration in the mucosa and even perforation through the wall.

Health Department Bulletin

REPORT FOR APRIL, 1948

	1948	Male	Female	1947	Male	Female
Deaths Recorded	174	107	67	172	97	75
Births Recorded	480	240	240	520	272	248

CONTAGIOUS DISEASES:

	April 1948		April 1947	
	Cases	Deaths	Cases	Deaths
Chicken Pox	127	0	94	0
Measles	257	0	28	0
Scarlet Fever	6	0	9	0
Whooping Cough	9	0	6	0
Mumps	5	0	7	0
Syphilis	51	0	32	0
Gonorrhoea	12	0	1	0
Tuberculosis	1	0	0	0

VENEREAL DISEASES:

	Male	Female
New Cases	18	15
Syphilis	12	8
Gonorrhoea	6	7
Total Patients	33	
Total visits to clinic (Patients)	581	

W. J. TIMS, M. D.

Commissioner of Health

June Meeting

TUESDAY, JUNE 15, 1948—8:30 P. M.

Mezzanine, Second Floor—Hotel Pick-Ohio

SPEAKER: HOWARD W. HAGGARD, M. D.

Director of Laboratory of Applied Physiology, Yale University.

President, National Committee for the Education on Alcoholism, Graduate of Phillips Exeter Academy, Yale University 1914, Yale School of Medicine, 1917, and served as Captain in the Chemical Warfare Service, U. S. Army, 1917-18.

SUBJECT: "The Physician and the Alcoholic"

The Ladies Auxiliary to The Mahoning County Medical Society and their friends are invited to be our guests.

The second stage operation cannot follow safely in less than three weeks after the obstruction is relieved. Dr. Reynolds also cautioned that patience is necessary to establish a good working colostomy. They may not function immediately after the operation, but given a few hours of time, they will usually function.

Important considerations in surgery of the colon include: (1) adequate fluid intake, (2) adequate nourishment, (3) adequate protein, (4) blood and plasma as indicated, (5) the sulfa drugs and (6) a good surgical technique.

Important axioms for intestinal obstruction: (1) a colostomy, (2) loop colostomy, if possible, (3) sulfa drugs, (4) sound surgery. Dr. Reynolds called attention to the fact that sulfa drugs do not replace sound surgical technique. The cause of peritonitis is leakage rather than soilage in the operative areas. Therefore, care should always be taken to avoid the use of sutures in the gut. It is necessary to protect the loop area until it has sealed off at the peritoneum opening.

Dr. Reynolds called attention to the fact that attempt to relieve the obstruction by decompression from above is harmful and ineffective. A colostomy should be done at the earliest possible moment after the diagnosis is established. Hours of delay may mean a fatal outcome. In conclusion, Dr. Reynolds called attention to the fact that intestinal obstruction may mimic acute appendicitis and differential diagnosis must be made; second, the surgical treatment must be, first, to deal with the obstruction and then the second stage, removal of the tumor area.

Before closing the review, I should like to express my own conviction that the group from the University of Illinois, College of Medicine, gave us a splendid day of well-preared, well-delivered lectures which were most enjoyable and beneficial to all of us who attended.

HORACE K. GIFFEN, M. D.

USES AND MISUSES OF THE SEX HORMONES

WILLARD O. THOMPSON, M. D.

Dr. Thompson began his talk with an outline of the known things that sex hormones will do. In the male they will (1) develop genitalia (2) affect the growth and function of the prostate (3) promote masculine hair distribution and develop a masculine voice (4) produce a heavy masculine skeleton and develop musculature and (5) effect emotional changes. In the female, sex hormones will (1) develop genitalia (2) influence the growth and function of the uterus (3) develop breasts and feminine hair distribution (4) develop feminine type of skeleton and of fat distribution and (5) effect emotional changes.

Treatment with sex hormones is of two types, stimulation, that is by gonadotropism and substitution. Stimulation therapy is of no avail in primary hypogonadism as well as in chromophobe adenoma of the pituitary. This results in multiple hypo-glandular effect. There is no pituitary gonadotropic product available which can be given and produce good results. However, chorionic gonadotrophins are effective in the male. They are without value

"Modern Convalescent Home"

Healthaven

655 WICK AVENUE
Youngstown 2, Ohio
Telephone 4-3803

Detailed information available upon request

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

Wear a Cool Panama-

The new Knox open weave Panamas are the lightest weight, most comfortable hats ever made.

Natural or Tan shades from **\$6.00** up.

• •

THE SCOTT CO.

32 N. PHELPS ST.

in the female. If treatment with gonadotrophins is without effect, the only recourse is to use multiple substitution. There were many "before and after" slides then shown, demonstrating the effectiveness of gonadotrophin in various types of male hypogonadism.

The speaker then outlined uses, doubtful uses and abuses of male sex hormones and stated that the best product was testosterone propionate. The uses were (1) Eunichism (2) Primary eunichoidism (3) undescended tests which had not responded to stimulation therapy (4) Froelich's syndrome with undescended tests (5) pituitary devorfism (6) male climactic (7) impotence from glandular causes (8) Cushing's syndrome (9) Addison's disease (10) carcinoma of the breast with metastasis. In the doubtful class he placed (1) angina pectoris (2) menorrhagia and metrorrhagia (3) carcinoma of the ovary (4) carcinoma of the breast. As abuses he listed (1) sterility (2) benign prostatic hypertrophy (3) carcinoma of the prostate (4) Froelich's syndrome with descended tests. The speaker did not outline uses and abuses of the female sex hormones.

He repeatedly stressed the importance of early treatment in most of these conditions and showed how much better results can be obtained in patients who are thoroughly treated at an early age. An example was the treating of undescended tests by the age of three.

Some of the pitfalls one may encounter were mentioned. Examples were mentioned such as folly of attempting to induce menstruation in congenital absence of the uterus, or in treating hermaphrodites. One should also beware of the possibilities of precocious puberty or of abnormally late puberty, with no demonstrating pathology. Pictures were shown demonstrating results obtained in early and late treatment of some of the conditions discussed. Growth curves were shown demonstrating the approach toward normal growth obtained in treating some types of dwarfism.

R. R. MILLER, M. D.

UNCLE DUDLEY

While we are trying to alter the way of thinking of the country that scourged the world through Wilhelm, Hitler, Goering and Ribbentrop, we are not to forget that it had previously given us Leibnitz, Goethe, Kant, Mendelssohn, Virchow, Koch, Erlich and Roentgen. Delicate operations are not performed by clumsy fingers, nor can they be directed by minds limited to a single purpose.

★ ★ ★

Wisdom and age are words that sound well together; but don't be deceived by the euphony. Age is given a free passage on the ship of time; but wisdom always has to work its way.

★ ★ ★

We think of the new Palomar 200 inch lens as a means of going farther out into space for more information. It really will function as a camera for recording and increasing our knowledge of what is near and all around us. Is there anything out there, a part of which is not here? Increase of knowledge is but the recognition of different aspects of what has been apprehended. Our limitations are psychic rather than physical.

*McGregor "Clan Scott" Gabardine
Sport Shirts*

\$6.95

- Brilliantly Colored
- Superbly Styled
- Washable
- Rayon Gabardine
- Cool Comfortable
- Convertible Collar
- Long Sleeves
- For Year 'Round Wear

STROUSS' MEN'S SPORTSWEAR — STREET FLOOR

STROUSS-HIRSHBERG'S

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

CUPRI-FERRIC COMPOUND

ALCOHOL 12%

Each fluid dram contains:

Iron Peptanized 4 gr.	Strychnine Phosphate 1-500 gr.
Manganese Peptonized 1 gr.	Strontium Arsenite . . 1-125 gr.
Copper Acetate 1.250 gr.	

Copper accentuates the hematinic effort of Iron in the Blood.
Applicable to Anaemia, Chlorosis and various blood disorders,
A valuable stimulant Tonic.

DOSAGE: A teaspoonful to a tablespoonful at or before meal
time.

On prescription at all drug stores.

BIOLOGICALS PROPERLY REFRIGERATED

Manufacturing Pharmacists — Medical and Surgical Supplies

LYONS PHYSICIANS SUPPLY CO.

26 Fifth Ave.

Phone 40131

Youngstown, Ohio

COUNCIL MEETING

MAY 10th, 1948

The regularly monthly Council Meeting of the Mahoning County Medical Society was held at the office of the Society, 125 W. Commerce St., Monday, May 10th, 1948. The following doctors were present: John Noll, J. N. McCann, W. M. Skipp, C. A. Gustafson, I. C. Smith, E. J. Wenaas, G. M. McKelvey, J. K. Herald, R. E. Odom, E. J. Reilly, V. L. Goodwin, comprising a quorum of the council. Also present was Dr. L. H. Getty, Chairman, Indigent Relief Committee.

Dr. Skipp, Chairman of the Legislative Committee, called attention to a legislative bulletin from the Ohio State Medical Association in which they suggested that we protest the passage of H. R. 6274, being considered by the House Armed Services Committee, which would empower the President, at the request of the Armed Forces, to make special calls for members of the Medical, Dental and Veterinary Professions and that persons so called would be liable for induction for a period not to exceed 24 months of military service. Dr. Skipp reported he had written a letter of protest to the Honorable Michael J. Kirwan, the Honorable Robert A. Taft, the Honorable George Bender and the Honorable John W. Bricker.

Dr. L. H. Getty reported on the second organization meeting of the Planning and Coordinating Organization for Health, Welfare and Recreation Services held May 3rd. Council advised Dr. Getty to arrange a meeting with the committee, Dr. H. E. Hathhorn, Chairman, Dr. Getty and Dr. Reilly, together with Dr. Noll, Dr. McCann and Mr. Leedy and report back to council.

V. L. GOODWIN, M. D.
Secretary

ST. ELIZABETH'S HOSPITAL PLANS EX-INTERNE'S REUNION

The Ex-Interne's Association of St. Elizabeth's Hospital will hold its first annual reunion since the late war on Thursday, June 17th, 1948. Dr. Richard Clifford is chairman of the committee which has planned a full day of activity for local and out of town members of the Association. His committee includes Drs. J. K. Herald, M. J. Kocialek, Sam Tamarkin, P. J. McOwen, B. I. Firestone and S. W. Ondash.

Dr. Charles F. Geschickter, Professor of Pathology, Georgetown University, will highlight the Scientific Session to be held at 10:00 a. m. at the Nurses' Home of St. Elizabeth's Hospital. He will speak on "Breast Tumors."

Luncheon will be at St. Elizabeth's Hospital. Golf will be played at the Mahoning Country Club and prizes will be given to leaders in the various brackets. A banquet at the Mahoning Country Club will feature the evening session which will also be attended by Dr. Geschickter.

SANATORIUM MEETING DATE CHANGED

Due to the A.M.A. Convention the regular monthly meeting of the Mahoning County Sanatorium scheduled for June 22, 1948, will be held on Tuesday, June 29, 1948, 8:30 p. m. at the Nurse's Home of St. Elizabeth's Hospital.

Dr. Milton M. Yarmy will be the speaker and his subject will be "Diabetes."

TRUSSES

PROPERLY FITTED

ELASTIC HOSIERY, PTOSIS, SACRO-ILIAC,
MATERNITY, ABDOMINAL, GALL BLADDER
AND POST-OPERATIVE BELTS

Private Fitting Rooms



SICK ROOM SUPPLIES

CRUTCHES, BED PANS, BEDSIDE TRAYS, URINALS,
SURGICAL DRESSINGS, HOSPITAL BEDS, ETC.
AT REDUCED PRICES



LYONS PHYSICIANS SUPPLY CO.

SICK ROOM AND SURGICAL SUPPLIES

26 Fifth Ave.

Youngstown, Ohio

Phone 40131

● PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN ●

CROSS DRUGS

YOUNGSTOWN OWNED
AND OPERATED



6 E. Federal Street
In the Stambaugh Bldg.

1 West Federal Street
In Central Tower

Five Pharmacists to Serve You



We Invite You to Visit
Our Prescription
Departments

NOW'S THE TIME FOR

RENNER PREMIUM BEER AND ALE

Renner's comes first for summer thirst. Make it your first call wherever you go, wherever you are.

Phone 4-4467



The
Renner Brewing Co.

Youngstown, Ohio

THE MEDICAL CRIER

A Page of Sidelights, News and Views in the Medical Field

Every doctor who served with the armed forces during the late conflict knows that the military establishments were greatly over-supplied with medical officers. Every doctor who served on the home front knows that the civil population was greatly under supplied. Those of us in the Navy, Army, Coast Guard or Public Health Service know how much time was spent serving on Boards, doing physical examinations on men who had just been examined, making reports in triplicate or just sitting around.

At the beginning of the war, the procurement of medical officers by the various branches of the armed service was on a highly competitive basis. Each one was out to get what it could regardless of the needs of the others or of the civil population. By means of patriotic appeal, cajolery and threats, they were able to sign up nearly all the physically qualified doctors of military age. The rest were left to take care of the sick at home, do the industrial medicine and surgery, and man the Civilian Defense. The result was that the people suffered greatly from the lack of medical care, and the doctors went through four nightmare years of ringing phones, crowded offices and air raid drills.

Now there is before the Senate Committee on Armed Services a bill to provide for the common defense by increasing the strength of the armed forces of the United States and for a universal military training program. One of the sections of this bill makes special provisions for the drafting of physicians up to the age of 45 years. Such a law as this if passed, would be distinctly class legislation. It is highly discriminatory and coercive. It is unconstitutional. It is a slap in the face to a profession which responded so well in the last emergency that the Army and Navy were oversupplied.

Ever since the War Between the States, this country has been fortunate in keeping the ravages of war far from its shores. The folks at home have wished their fighting men to have the best of everything when they "go off to war." It is extremely likely that the next one will be different and that much of it will come home to us. This implies a large number of casualties among the civil population. In such a situation it is highly important that some civilian group have strong representation when plans are made to apportion medical personnel and supplies. If such planning is left to the admirals and generals the same one-sided arrangement will result as happened last time. Of course we want our fighting men to have the best but let us not have doctors wasted, because they cannot be manufactured like airplanes.

In 1947, the American Medical Association created the Council on National Emergency Medical Service to make a study of the country's needs in case of national emergency (war). The Council is now busy working on the survey and the scope of their effort is so broad it cannot be detailed here. Their report can be found in the A.M.A. Journal of May 8, 1948. They favor representation of all the health agencies, hospitals, nurses and medical colleges on the Board which will advise the President regarding the coordination of military, industrial and civilian mobilization. They are strongly opposed to a draft of doctors. They believe that the services of physicians



**Your POSTNATAL
and POSTOPERATIVE
PATIENTS . . .**

They will receive prompt and sympathetic attention from our competent Camp-trained fitters whom you may depend upon to follow your instructions implicitly.

CAMP ANATOMICAL SUPPORTS also available for prenatal, pendulous abdomen, viscerop-tosis, nephrop-tosis, orthopedic conditions, hernia and mammary gland.

Authorized  *Service*

LESTER'S PRESCRIPTION PHARMACY
246 W. Federal St. Phone 32811
Next to Warner Theatre

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

SAVE 15%
On All
Cash and Carry Items

★

Blair stores are conveniently located at—Glenwood and Princeton, 4224 Market Street, 8 N. Phelps Street, Elm at Tod Lane, and Belmont at Foster.

★

BLAIR'S
Responsible Cleaners and Furriers

Lincoln Laboratories, Inc.

DECATUR, ILL.
Laboratory Park

W. J. JADOT
Representative

must be carefully conserved and judiciously allocated in time of war to insure adequate medical, health and sanitary care for all Americans, whether in or out of uniform.

To me that seems fair. We should use all the influence we possess to have that discriminatory section of the bill stricken out. Let us not have the situation repeated where the young doctors will be sitting in camps growing sour and stale while the older ones at home are killing themselves with work.

J. F. L.

CYNICAL SAM

A pessimist is an ignoramus who doesn't know when to be optimistic; an optimist is an ignoramus who doesn't know when to be pessimistic. An ignoramus is a fellow who doesn't know the difference between them. Do you?

★ ★ ★

You might find what kind of a fellow a man is by using a little subtle flattery; but you are taking the chance that he will read you first.

★ ★ ★

We do not pretend to know why skirts have begun to be lengthened; but we wonder if grandmother has learned that the public isn't interested in what she has to display. The hopelessness of an artificial suffusion on a wrinkled cheek hasn't yet become apparent to her.

PEPTIC ULCER AND PREGNANCY

It has been believed for many years that during pregnancy peptic ulcer rarely appears, rarely flares up, and often heals. Gastric acidity tends to be decreased during pregnancy, but theories of mechanical and humoral factors producing this decrease are vague. Four cases of ulcer occurring during pregnancy are presented. It is felt that obstetricians should carefully evaluate possible peptic ulcer in patients presenting symptoms of persistent heartburn, epigastric distress, etc.—Bralow, S. P.; Scheinberg, S.; and Nicheles, H.; American Journal of Digestive Diseases—May, 1948.

J. D. M.

COMPLICATIONS OF ALKALOSIS

The current use of gastric suction and sodium lactate solutions may lead to a condition of alkalosis which may be accompanied by changes in personality, delirium, stupor, or convulsions and by renal insufficiency which tends to persist. Removal of the causes of the alkalosis will lead to gradual or fairly prompt recovery of the abnormal mental state. A more rapid correction may be accomplished by the parenteral administration of autoclaved 2 percent solution of ammonium chloride in distilled water. The usual procedure was the intravenous administration of a liter of the solution over a period of two or three hours.—W. J. Grace; Willard P. Barr—American Journal of Medicine—March, 1948.

J. D. M.

**Trichonal
Antiseptic Acid
Foaming Tablets**

for
**Rapid and Sustained
Benefit
in
Trichomoniasis**

Contain: Lactoquinoline, Kaolin and
Dextrose in a foaming base.

BUFFINGTON'S INC.

Pharmaceutical Chemists
WORCESTER 8, MASSACHUSETTS

**Waiting Room Chairs
Desks and Filing
Equipment**

•
**OFFICE
FURNITURE**



JAMES & WEAVER

"Office Outfitters"

4-4427

W. Wood

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

***The Lincoln Avenue
Alcoholic Clinic***

145 LINCOLN AVENUE

Owned and Operated by

**The Youngstown Committee for
Education on Alcoholism**

A Non-Profit Corporation

Phone 32693

THE DOG PROBLEM

In reference to the recent renewed interest in the local situation concerning rabies and stray dogs, it is unfortunate that a considerable amount of mis-interpretation and misconception has arisen relative to the use of the anti-rabic vaccine and the need for control. The occurrence of a number of instances of untoward reaction is no condemnation of the vaccine. It must be realized that with almost any potent vaccine some form of unpleasant side-effect may occur. Much more to the point is that the mortality from rabies is 100%, no case of recovery from rabies ever having been recorded in any instance in which the symptoms of the disease once became apparent. As a matter of fact, most authorities state that following exposure to a known rabid animal, the vaccine should be given irrespective of the development of paralytic complications. With the incidence of complications from the use of anti-rabic vaccine so low (generally less than 1%) and with the mortality from rabies so complete, there is no choice but to use the vaccine.

If one is to avoid either of the above unpleasant sequellæ, the only obvious method of controlling the disease is to eliminate the cause. It is apparent that dogs cannot be totally eliminated as such, and the only effective means left is to prevent the animals from contracting the disease and spreading it to others. The fact that the animal is well cared for and kept at home does not in any way eliminate the possibility that it may contract the disease from other stray animals.

The mere passing of a law requiring compulsory licensing and requiring vaccination of the animal prior to obtaining a license will not better the situation. It is only by forceful and effective administration of such a law that the required results will be obtained. It is apparent that objections to the local means for controlling this disease must come from individuals who have little regard for matters of individual or public health or who have no conception or little knowledge of the hazard to life in the face of an uncontrolled and mounting incidence of rabid animals. In this light such objections must be completely disregarded. The outcome of the present activities concerning this problem will be an interesting indication of the sincerity of our local administration, at least in terms of public welfare.

OSCAR A. TURNER, M. D.

HOWARD W. HAGGARD, M. D.

"Alcoholism as a Medical Problem" has been a reality for years. It has become more so lately since it has been accepted as a problem by society.

Much medical research on alcoholism has been done at Yale University School of Medicine. Dr. Howard W. Haggard is well qualified to speak to us on this problem. He is the Director of Laboratory of Applied Psychology of Yale University School of Medicine. He is also Chairman of the Board of the National Committee for the Education on Alcoholism.

The ladies of the Auxiliary of the Mahoning County Medical Society will be our guests on this occasion. The meeting will be held in the Ball Room of the Pick Ohio Hotel, Tuesday June 15, 1948, at 8:30 P. M.

MORRIS S. ROSENBLUM, M. D.,

Chairman, Publicity Committee.

**SUPERIOR
VITAMIN A
ABSORPTION
VIFORT^R**

Water-dispersible polyvitamin drops

Each 0.6 cc. (as marked on dropper) provides the following vitamins in a clear aqueous dispersion: A 5000 U.S.P. units, D 1200 U.S.P. units, C 60 mg., B1 1.8 mg., B2 0.4 mg., niacinamide 3 mg., B6 0.3 mg., calcium pantothenate 1.2 mg. Supplied in 15 and 30 cc. dropper bottles.

Vitamin A from Vifort is better absorbed and utilized than vitamin A from fish liver oil. Clinical superiority has been evidenced in normal children and in patients with impaired absorption.

ENDO PRODUCTS, INC.
84-40 101st St.
Richmond Hill 18, New York

FOR YOUR
Printing Needs
CALL 33112

The
**Youngstown Printing
Company**
787 Wick Ave.

**H. H. TREUDLEY & CO.
INC.**

123 E. COMMERCE STREET
OFFICE SUPPLIES
ACCOUNT BOOKS
STEEL AND WOOD OFFICE
FURNITURE
For prompt Service
Call 4-4479



High Potency *plus* Stability

Principal B Vitamins
Stable Soluble Powder

The golden powder avidly accepts aqueous diluent, instantly forms full potency vitamin solution ready to inject in whatever dosage the physician's judgment demands.

Each 10 cc multiple-dose vial of BREONEX*-L (Soluble) Powder contains:

Thiamine Hydrochloride	150 mg.
Riboflavin	50 mg.
Pyridoxine	25 mg.
Calcium Pantothenate	25 mg.
Nicotinamide	500 mg.

10 cc of Aqueous Diluent accompanies each vial. The concentration desired per cc may be obtained by varying the amount of diluent used.



Breonex-L
(SOLUBLE)

Dry Breonex-L May Be Stored
Indefinitely Without Refrigeration

George A. Breon & Company
KANSAS CITY, MO.
NEW YORK ATLANTA SAN FRANCISCO SEATTLE

*Trademark of George A. Breon & Co.

DIFFERENTIAL DIAGNOSIS OF CORONARY INFARCTION*

J. P. HARVEY, M. D.

Differential diagnosis of coronary heart disease may be most confusing at times as other diseases stimulate, infarct or insufficiency frequently. The three most common symptoms of coronary diseases namely pain, dyspnoea and palpitation together or singly may direct attention to lungs, stomach, gall bladder or other organs, and diseases of other organs may focus in such a direction that it may simulate coronary. Pain may be absent in the slowly occluded coronary artery disease due to collateral circulation in one case. In another sudden occlusion of a large artery or branch with inadequate collateral circulation may produce terrible pain, shock, and death. Between these two extremes may be found cases with exaggerated nervousness or neuro circulatory asthenia in a particularly sensitive individual out of all proportion to heart damage. In the older patient pain is often less pronounced and it may be difficult for them to distinguish between substernal oppression and dyspnoea. Pain may consist of slight, moderate, or severe; high, mild or low substernal oppression, transient on exertion, that is, angina or there may be extreme substernal and epigastric oppression lasting for hours and sometimes followed by collapse due to coronary thrombosis. Slight to moderate precordial aching commonly is due to associated neuro circulatory asthenia. Pain of coronary thrombosis is never like that found in other conditions except when it is atypical and so low in position that it simulates gastro intestinal or gall bladder origin, dissecting aneurism or pulmonary embolism.

Thrombosis is more likely than not to be attended by severe, exhausting, crushing pain, often radiating to either or both arms, head, neck or back. There are however exceptions without pain at all and in such cases dyspnoea is predominate. White reports 56 consecutive cases posted of occlusion in which pain was predominate in all but two.

Dyspnoea may vary from slight breathlessness on exertion to awful struggling respiration of marked cardiac asthma depending on the severity and suddenness of failure which causes pulmonary engorgement. Sighing respiration is never cardiac in origin. Palpitation frequently noted is due to arrhythmias or tachycardia. Prostration or collapse sometimes of high degree is a frequent early symptom of acute coronary occlusion, due to a state of vaso motor shock or peripheral vascular failure which in itself may be fatal. In a few cases prostration like dyspnoea may replace pain as a chief symptom especially in the very old.

If one is differentiating any heart disease from other conditions the relative importances of procedures is as follows:

- History 50% in importance
- Examination 30% in importance
- Electrocardiogram 10% in importance
- Roentgenogram 5% in importance
- Miscellaneous tests 5% in importance such as,
 - Vital Capacity
 - Venous pressure
 - Circulation time
 - Cardiac catheterization in congenital defects, etc.

*Staff meeting Mar. 2, 1948, Youngstown Hospital.

THORNTON'S

QUALITY LAUNDRY

DRY CLEANING AND FUR STORAGE

234 Belmont Avenue

Telephone 40155

JAMES A. McPHERSON

Presenting

E. R. SQUIBB & SONS

"A Name You Can Trust"

• PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN •

SPENCER INDIVIDUALLY DESIGNED SUPPORTS

FOR ABDOMEN, BACK AND BREASTS

Doctors Prescriptions accurately filled at Spencer Support Shop

Helen Mantle Foster

605 Mahoning Bank Bldg.

Phone 70604

Lozenges SULFATHIAZOLE 2-1/2 GR. ZEMMER

Sulfathiazole	2-1/2 gr.
Benzocaine	1/10 gr.
Oil Wintergreen	q. s.

An effective, pleasant tasting lozenge for the relief of mouth and throat infections. The suggested dosage is one lozenge to be dissolved slowly in the mouth every two hours between meals.

Supplied in bottles of 100, 500 and 1000.

THE ZEMMER COMPANY

Chemists to the Medical Profession
PITTSBURGH 13, PA.

Chronic coronary disease is often difficult to discover and in the stage of congestion failure with arrhythmia may be difficult to distinguish from rheumatic heart disease or thyrotoxic effects. The age of the patient, history of angina pectoris, the usual absence of much cardiac enlargement, the finding of tortuosity of the aorta by x-ray and of voltage of QRS waves, the basal metabolic rate or appearance of myxedema may aid here.

Acute coronary infarction, gall stone colic and perforated peptic ulcer are sometimes confused. Each may have pain, fever, leucocytosis and gastro intestinal symptoms as vomiting. Here the electrocardiogram may show no changes early after the event and one must rely on the past history of previous intestinal disturbance in the one and possible previous history of prodromal signs of heart disease as sternal pain and previous angina. Cardiac examination may show poor sounds, dilatation, friction rub, T wave changes, interventricular or auriculoventricular block. The heart rate and sounds may not change notable for some hours after the pain and may be most confusing. Abdominal examination may be of aid when there is localized tenderness or spasm of muscles, jaundice or bleeding from G. I. tract. Again thrombosis is most frequent in the older group or middle age while acute abdominal diseases more frequently (not always) are seen in a younger group and middle aged women.

Three other conditions likely to be confused with coronary occlusion are: Acute Pericarditis, Dissecting Aneurism, and Pulmonary embolism. In acute pericarditis one is dealing in most cases with young individuals. The precordial pain is felt preponderately on respiration and little if the breath is held. This is due to the pleuro pericarditis. X-ray may show effusion here. The electrocardiogram shows transient elevation of the ST segments of inversion of the T waves of all leads, unlike infarction and takes usually several days to develop changes. The continued pain, fever, leukosytosis, elevated sedimentation rate may be present in both conditions. Friction rub appears about the third day if at all in infarcts and later in pericarditis. In pericarditis the fever is higher and the pain usually disappears in coronary disease when the rub appears.

Dissecting aneurism has a very abrupt onset of most severe pain not working up to a crescendo as in most coronary cases. Pain is referred almost invariable to the back and often down to the legs. There may be obstruction of the circulation in the branches of the aorta especially the iliac and femoral arteries. There is almost constant hypertention and a relatively normal electrocardiogram. The patient feels like he is paralyzed in the legs, arm, or the like.

If massive thrombosis there follows sudden severe dyspnoea thoracic pain distress and cyanosis followed by unconsciousness and death.

In moderate thrombi of lungs there is sudden thoracic pain with dyspnoea, cough and hemoptysis of varying amounts early but more often in a day or two.

There may be signs of decreased expansion and diminished vocal fremitics. The percussion note is dull, and a friction rub may be heard. The respirations are increased, the pulse rate rapid and the fever rising for two or three days.

**Prescription
Medicinals
for the
Medical
Profession**

Ralph Cullinan
Phone 93585

Representing

MERRELL
1828

THE WM. S. MERRELL COMPANY
CINCINNATI, U. S. A.

**We Solicit Your
Car Worries
24 Hour Service**

Safe Parking
Washing—Polishing
Lubricating
Oil Change

**CENTRAL SQUARE
GARAGE**

24 Hour Service

Wick & Commerce Phone 35167

PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN

**BOWMAN'S
QUALITY
PHARMACEUTICALS**

We have a complete stock of
Pharmaceuticals for the
medical profession

**Surgical Instruments
Biologicals
Office Furniture**

**THE BOWMAN BROS.
DRUG COMPANY**

CANTON OHIO AKRON

Beil-Rempes Drugs, Inc.

Youngstown Owned and Operated

31 Central Square
Tod House

Our whole attention is devoted to
serving the medical profession and
filling out prescriptions. Hundreds
of physicians and families feel an
added confidence when they have a
prescription filled at Beil & Rempes.

They know that this assures the best
in quality and the utmost in care.

**We Invite You to Visit Our
Prescription Department**

CORONARY INFARCT

1. Pain—Vice like at times referred.
2. Dyspnoea
3. Shock
4. Palpitation
5. History—may aid
6. Leucocytosis
7. Pulse rate rapid
gallup rhythm in some
8. Blood pressure falls
9. Temperature
10. Cough—none unless pulmonary edema
11. Pericardial friction rub in some about 3rd day
12. Cardiograms—may aid
13. Kynography may aid.

PULMONARY INFARCT

1. Pain—localized and associated with pleurisy, not referred.
2. Dyspnoea
3. Shock—if large embolus
4. Respiratory distress most frequent
5. History—may aid if there is previous or coexisting condition
6. Leucocytosis—higher
7. Pulse rate rapid
8. Blood pressure falls
9. Temperature higher usually
10. Cough—with speck of blood or bloody sputum later.
11. Pleural friction rub in some 1-2-3 days later
12. Cardiograms—different
13. X-ray shows a high diaphragm is negative immediately, but in 24 hrs. shows infarct.
14. Pulmonary embolism may cause coronary thrombosis from a fall of blood pressure and stasis in coronary vessels. (Blumgart)

Fatigue syndrome N. C. A. are all terms describing a condition seen in civilian life, but rising to prominence in times of war. Symptoms are largely cardio-vascular-extreme lassitude and fatigue, dyspnoea on slight exertion, consciousness of heart's action, palpitation, precordial discomfort, and sub mamary ache. In addition, vasomotor and psychological abnormalities are often present. Undue sweating of axilla and hands, tachycardia and lowered blood pressure on standing. Upright fainting attacks and postural dizziness are common.

A history of a hyper sensitive introspective person who has avoided possible situations involving friction, physical or mental exposure and stress may solve the problem. One must keep in mind that N. C. A. may co-exist at times and be super-imposed on organic heart disease.

A list of other diseases may confuse the picture here such as:

Pneumonia with left sider pain. Acute pneumothorax—can be differentiated by x-ray of the chest. Mediastinal emphysema is rare but may be associated with tension pneumothorax with or without trauma. It may be associated with pneumonia, acute infections, asthma, TB, and pulmonary irritants. Emphysema in the mediastinum is assured in with pain in the chest with characteristic crunching, bubbling, or clicking sound synchronous with heart sounds. Pain is first noted in the upper or mid chest then substernal and may radiate to the back shoulder or arm. The pain is made worse by breathing and results in very shallow respirations. It may be aggravated by swallowing or turning the head.

Pleurisy; Carcinoma or bronchus or lung; Aortitis-syphilitic may simulate coronary disease. Cerebral accidents—In cerebral sclerosis the aged may have fainting spells with a fall of blood pressure and this level may remain low and simulate myocardial disease.

Annual Meeting

The Medical-Dental Bureau, Inc.

Tuesday, June 29, 1948

YOUNGSTOWN COUNTRY CLUB

★ ★ ★

Election of Officers

(DINNER ON THE HOUSE)

Good Food -- Prizes

BE SURE TO BE ON HAND TO VOTE

Pancreatitis is usually originated with severe pain referred to shoulder in some and may be differentiated from heart disease by the blood amylase and a normal tracing. Diaphragmatic hernias may confuse one where there is a small pinched off segment of stomach which by some trigger mechanism sets off acute epigastric pain and vomiting at unpredicted intervals. Meniers syndrome in which some patients may vomit, have severe sweats and collapse. Gall stones with a distended gall bladder may give some cardiographic changes—difficult to interpret. (Sprague) Acute gastritis—severe gastritis may show a patient in collapse with vomiting, a fall in blood pressure and other signs suggesting cardiac disease. (Herrick) Diverticulitis or spastic colitis may cause upper abdominal pain of severe nature and confusing distribution. Carcinoma of the stomach with distention, pain and then symptoms may be a disturbing complex. Herpes Zoster may give unilateral pain on left or right chest for days before the skin lesions appear.

Orthopedic cases often simulate coronary disease: Arthritis of manubrium or costo-chondral junctions; Radicular syndromes with nerve root pain referred around the ribs; Left infra mammary syndromes; Left pectoral syndrome; Metastatic spine; Scalenic anticus syndrome; Left pectoral syndrome; Metastatic spine; Bursitis of shoulders and spine; Arthritis of spine; Posture and fatigue may cause referred pain around chest.

Esophagus disorders such as Ulcer and Cardiospasm—may be difficult to diagnose. Tobacco; Malingering; Tabetic crisis; Epigastric hernia; aortic regurge in rheumatic heart disease and cardiac Neurosis—all may complicate the picture. Fibrillation of the diaphragm may occur and morphine does not stop it.

AUGUST 19, 1948

The Corydon Palmer Dental Society and the Mahoning County Medical Society will hold a golf meet and dinner at the Youngstown Country Club on Thursday, August 19th.

There will be prizes for best golfers, and there is another leg to be won on the Lyon's cup. If you don't play golf, come out anyway, and have a good time. The social chairman will have full details in the next issue of the Bulletin.

NEWS ITEMS

Drs. Murrill Szucs and Craig Wales attended the 32nd Annual Meeting of the Federation of American Society for Experimental Biology, held from March 15 to 19 in Atlantic City, New Jersey.

Dr. W. M. Skipp has been elected, for the fourth time, by the Ohio State Medical Association as delegate to the American Medical Association.

ANNOUNCEMENTS

Dr. and Mrs. Stephen W. Ondash announce the birth of their second child, Stephanie Adair, at St. Elizabeth's Hospital on April 6, 1948.

Dr. and Mrs. T. Kernan Golden announce the birth of a daughter, Catherine, St. Elizabeth's Hospital on May 10, 1948.

Dr. and Mrs. Robert M. Kiskaddon announce the birth of a boy, James Claypool, at North Unit on May 16, 1948.

I WANT MORE PABLUM!



COPYRIGHT, 1945, MEAD JOHNSON & CO.
EVANSVILLE, INDIANA, U.S.A.

