

Bulletin

of the
**Mahoning
County
Medical
Society**



"The best inspirer of hope is the best physician"
Coleridge

January 1934

Volume Four

Number One

SUPERSEDING ANTISEPTICS and (ATHARTICS) in INTESTINAL TOXEMIAS

The futility of attempting to treat intestinal putrefaction with strong antiseptics and violent purgatives is well known.

Antiseptics strong enough to kill bacteria in the intestine are also likely to kill the normal symbiotic bacteria and also to have some effect on the mucosa.

Laxatives, cathartics and purgatives, likewise, are apt to be only temporary in effect.

Treatment of these low grade intestinal infections with KARICIN is a safe and rational procedure, because it combines adsorption of putrefactive bacteria and their products, detoxification and passive elimination in an efficient and effective formula.

KARICIN consists of colloidal kaolin, Soricin (purified sodium ricinoleate) and mineral oil in a fine emulsion. None of the ingredients is absorbed through the bowel, and no irritation is caused in their passage.

KARICIN neutralizes and eliminates pathogenic bacteria and their toxic products without interfering with the normal flora.

*Sample and literature
on request*

W. I. PARKS
Representing The
WM. S. MERRELL CO.
Cincinnati, U. S. A.



DON'T do anything RASH

Just Because the New Editor is a Dermatologist!

THE • DATE ON • THE • PAN



may be necessary with some articles, but INDIAN CREEK FARM MILK IS DELIVERED TO YOUR DOOR IN QUART BOTTLES

for 10c

There is NO DATE on the bottle — The milk is CLEAN AND FRESH EVERY DAY.

“NEITHER ZOO—NOR AN AQUARIUM”

You can't get a half-NELSON on a ZOO, for there is no ZOO;—so we SKIPP to the AQUARIUM,—and as there is not an AQUARIUM, no FISHER-man is needed. You have a nice BULLETIN,—we cannot improve it,—but—TAMARKIN! So the DEITCHMAN says, AUF WIEDER-SEHEN!

INDIAN CREEK FARM

The Home of Youngstown's Better Milk

Wishes you A HAPPY and PROSPEROUS NEW YEAR!

Phones: Canfield 75 F 11 — Youngstown 2-2344

Tippecanoe Road, Canfield, Ohio

Florence L. Heberding



PROTECT HIM

During Winter Months

Cod-Liver-Oil

Promotes Resistance

EGGOL

An egg-emulsion of pure Cod liver-oil eliminates the objection of administration.

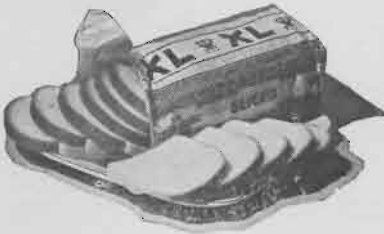
It is so pleasant to take

Prescribe it.

In 12 oz. Bottles

WHITE'S DRUG STORES

RELIABLE PRESCRIPTION DRUGGISTS



NEW YEAR GREETINGS

Joy and Good Luck, (the supremest of Wealth),
Be Your's Throughout One, Nine, Three, Four,
And may all Your Days be "Golden with Health",
And Contentment its Peace on you pour;
But to get all you Wish and escape all you Dread
Is more likely when nourished with BIXLER'S BREAD.

BIXLER'S DELICIOUSLY DIFFERENT BREAD

BEST FOR GROWING YOUTH AND TO EXTEND THE PRIME OF LIFE

PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN

"We will specify Mead's Capsules
of Viosterol in Halibut Liver Oil 250 D
when Mead puts them on the market"

— many physicians told us.

so now—by request we offer CAPSULES

MEAD'S VIOSTEROL IN HALIBUT LIVER OIL 250 D.
Each 3-minim capsule supplies not less than 5,500 U.S.P.
Vitamin A units and 570 Steenbock Vitamin D units.

WHEN recommending Mead's Capsules, the physician is now assured of the same high grade product which is marketed by Mead in liquid form, and he also knows that Mead's Capsules are not advertised to the public.

Furthermore, the physician who prefers his patients to have these capsules with a prescription label and without a trade name will be interested in the special Mead dispensing package containing 4 plain unlabelled boxes of 25 capsules each, to which the druggist's own label can be affixed. This obviates the need for the druggist either to paste his prescription label over a trade package or to re-handle the capsules in transferring them to his own capsule container which may or may not be of suitable size, shape, and capacity.



"The fish's name is
HALIBUT"—
Specify **MEAD'S**

THE NEAT TIN BOX

contains 25 Mead Capsules and assures maximum protection in all climates and seasons to both capsules and clothing. No additional charge for this convenient fine package. Specify MEAD'S—not advertised to the public.

MEAD JOHNSON & COMPANY, Evansville, Indiana, U.S.A.

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



*As
Winter
proceeds*

... the physician is called upon to contend with innumerable cases of

ACUTE RESPIRATORY DISEASES

In the management of

SIMPLE COLD • INFLUENZA • BRONCHITIS

and in chest conditions, as pneumonia, Antiphlogistine is an effective and suitable method of treatment.

The physiological action of Antiphlogistine on inflammatory areas is that of hyperaemia, which acts as a decongestant, an analgesic and corrective agent, promoting elimination of the toxic products and an improvement in the clinical picture.

ANTIPHLOGISTINE

Sample and literature on request

THE DENVER CHEMICAL MANUFACTURING COMPANY

163 Varick Street, New York

THE
UNION NATIONAL
BANK

Youngstown, Ohio

Ample resources and capital ...
capable and conservative man-
agement . . . unusually complete
facilities.

Member Federal
Reserve System

Depository For U. S. Government Funds

SEE
THE NEW MILLER
FORM FITTING
TRUSS

A new truss superior to anything
that has been manufactured. Ex-
tremely comfortable, efficient and
radically different from all other
makes in construction. It will hold
98 per cent of all ruptures, regard-
less of occupation.

WE FIT
PTOSIS, SACRO ILIAC, AB-
DOMINAL, KIDNEY AND
MATERNITY BELTS.

The Lyons-Laeri Co.

PHYSICIANS AND SURGEONS
SUPPLIES

26 Fifth Ave. Phone 4-0131
Youngstown, Ohio

1934
May you enjoy
Health
Happiness
and
Prosperity

Central Square
Garage

Phone 3-5167 Wick & Commerce
24 Hr. Service Youngstown, Ohio

PROFESSIONAL LIABILITY INSURANCE

Broadest and most comprehensive contract offered by any insurance company.

Judge W. P. Barnum defense council.
Local claim service.

Phone For Sample Policy

Liability limits of \$10,000/\$30,000.

Physicians annual premium	\$20.00
Specialists in Major Surgery	\$25.00
Specialists in X-ray Treatment	\$40.00

Substantial saving on three year contract
Increased limits at small additional cost

THE JOHN P. FRANCIS, AGENCY
1403 Central Tower Building
Youngstown, Ohio
Phone 6-4269

You are under no obligation when you accept this invitation to try the

FLOATING RIDE
on **JUMBOS**



Try General JUMBOS this week at our expense. Drive them anywhere — give them a real test. It's a thrill worth your time . . . and you learn the truth about the ultra-low-pressure "Tire of the Future"—why JUMBOS are rapidly replacing present balloon type tires.

JUMBOS are ready for 153 models. They are easy to buy . . . and pay for themselves in reduced car upkeep. But first—give them a thorough trial. No obligation. It's our way of demonstrating the safest, easiest riding tires ever built. Drive in . . . Today.

SAFETY TIRE CO.

(North Side) 114 E. Front St. (South Side)
1000 Wick Ave. Dial 4-4597 2505 Market St.

THE PRESIDENT'S PAGE

We are facing a new year,—1934. What it will bring us in the way of success as individuals and as a Society, we have no way of surmising. We can only hope, sincerely, that the best of everything will be ours, and that the Society will have a more prosperous year than has been possible in the past. If all of us,—your officers and you—will do our parts and cooperate to the furthest extent of our ability, there is no reason why we can not make this a banner year in the history of the Society.

In this Bulletin you will find a list of your officers and committees for the year. The committee members have been appointed with the hope that they will not find it inconvenient to serve the Society in a degree greater than is expected of other active members.

Murmurs of prosperity are once more audible. To make a metaphor, we wonder if he (prosperity) will again knock at the physician's door, and in what form he will appear. Will he be dressed as in former years, or will he wear the garb of health insurance, or the guise of definite social Medicine? These things are to be thought about for there is real cause to consider that they will be of importance in our activities before many months have passed.

There never was a time when unity of action was so imperative, for it is likely that we shall have to ask for what we want, from this time on. I am afraid that for us there will be no manna from Heaven. Keeping in mind always our responsibility, both to the community and to ourselves, I pledge to the Society my very best efforts.

JAS. B. NELSON.

SECRETARY'S REPORT

On December 15th, 1933, following the last lecture of the course on Hematology at the Y. M. C. A., a special meeting of the Society was held in regard to the plan proposed by the Medical Advisory Committee and the relief director, Mr. R. A. Noble.

The chairman, Dr. Wm. M. Skipp, explained in detail the workings of this committee, and stated that they would like to have their proposed plan put into effect. This plan has been proposed to Mr. R. A. Noble, but to the present time they had no indication that he was willing to cooperate.

The plan was, in short, the taking over of the management of the distribution of the funds that were available for the care of the indigent sick of this County. Many questions were answered, and letters were read that had been received from various sources, some of which have already been published in the December Bulletin. Finally, a resolution condemning the

present set up was adopted by the Society. The plan was also adopted, deleting from it all mention of fees. Since this meeting a satisfactory arrangement has been accepted by the County Relief Director.

The Annual meeting was held at the Youngstown Club, December 19th, 1933. About 110 were present, one of the largest turnouts for an annual meeting in a number of years. The following officers were elected: President, Dr. J. B. Nelson, President-Elect, Dr. J. L. Fisher, Vice-President, Dr. P. J. Fuzy, Secretary, Dr. Wm. M. Skipp, Treasurer, Dr. Louis Deitchman, Delegates, Dr. L. G. Coe and Dr. Sidney McCurdy, Alternate Delegates, Dr. Joe Rosenfeld and Dr. W. K. Stewart, Censor, Dr. J. P. Harvey. The reports of the various standing committees were accepted. The reports had been published in the December Bulletin.

As no Council meeting was held in December, there is no report to be made for this body.

Pay Your Dues PROMPTLY

MIGHTY SWEET

A bottle of muddy water from Solly Adams' mansion led to the recent Vindicator page one story about oxygen and Meander water. It also led to another tale, which is hereby published for the first time.

One of the newspaper men picked up the rusty solution, carried it to a doctor's office, set it on the doctor's desk, said nothing. The nurse took it into the laboratory. The doctor breezed in shortly. "There's a specimen in the laboratory," said the nurse. The newspaper man still said nothing, except to answer questions about what he had been eating.

Tests for sugar and albumin had proved negative, the nurse said. The

doctor repeated the albumin test, still wasn't satisfied, because the specimen was too muddy to show a good test. So he centrifuged a sample, ran another test—breaking a test tube in the process. Still a negative for albumin.

The newspaper man broke his silence. "Sure there isn't any sugar in it, doctor?" "No, no sugar." "Well, if there was," the writer persisted, "it would be sweet, wouldn't it?" "Yes, it would."

Whereupon the writer picked up the bottle and took a hearty swig. The nurse fainted, but the doctor chased the newspaper man all the way down the hall.

"Remember," his last word, "there'll be a lab fee on your bill!"

MEDICAL ADVISORY COMMITTEE

The following letter was received from Mr. R. A. Noble in regard to the management of the relief office that has been set up at 215

Dollar Bank Bldg.

Dear Sir:

In reply to your letter of December 9th wish to advise the following:—

First: Doctors furnishing drugs for the patient instead of by prescription, should bill the relief office for cost of drugs furnished the patient but as per our State Examiner's request, we must have a purchase order issued at the time of treatment to cover exact cost.

Second: There is no Allied Council—it is the Youngstown Relief Office. As per our agreement on the set-up for two nurses on my payroll and you to furnish one M. D. to be on duty at the City Relief. This is a splendid arrangement and the separate office is all ready for you. The purchase orders for medical service will be written by your staff on forms furnished by Relief Office—duplicates and records must be kept as set up for all relief expenditures in the Relief Office.

All questions of the sick applying for medical aid must be cleared through the Relief Office.

The City Relief Office will not question your authority to issue medical orders except as stated above (to clear cases through our files). All cases must be on relief before order is issued.

You may recommend nurses for the positions but I must hold the only authority to do the hiring as I am alone responsible to the State and County for personnel.

I shall have to study the Federal Compensation Rules and Regulations before giving ruling on your third question. Your cooperation as an Association has been fine. However, we still receive bills for hundreds of dollars not backed by an order—some for hospitalization.

I also, as well as your association, am interested in the indigent sick and will give you any assistance possible.

Yours very truly,

R. A. Noble, Relief Director.

The above mentioned relief office is being conducted under the management of the Mahoning County Medical Society, with Miss Ann Tegler and Miss Elizabeth Connelly in charge. These two nurses are sincere in their work and are capable. An individual now applying for relief is treated courteously and every effort is made to be sure the patient is receiving proper and adequate medical attention. This office is open every day from 8:30 to 6:30, except Sundays and Holidays.

Individuals that were formerly on the relief list but are now receiving employment through the C. W. A. are being reinvestigated and if it is found they are unable to take care of medical needs they will be put back on the relief list.

Individuals that are not on any relief are investigated and if found worthy are put on the relief list for medical aid.

In regard to drugs furnished by the doctors, refer to the above letter by Mr. R. A. Noble, relief director.

Emergency permits will be furnished for one visit according to the Rules and Regulations only. After the first emergency visit, before a second visit can be made a permit has to be obtained for the first visit and the second one. We cannot issue a permit for more than one emergency visit to one patient.

Patients needing hospitalization (according to state ruling) have to obtain their permit from the subdivision wherein they reside, and so far no fee is allowed for the surgeon if the patient is hospitalized.

All complaints are to be reported to Dr. Wm. M. Skipp, phone number 4-2996. Please do not make complaints to the girls in the relief office.

FUTURE PROGRAMS

Dr. Beard, Chairman of the Program Committee, is letting no grass grow under his feet. His Committee met Tuesday night, January 9th. Special Committees for the Annual Banquet and Post-Graduate Day were selected, and the wheels were started turning for a great educational year.

NEPHRITIS IN CHILDREN

By B. W. SCHAFFNER, M. D.

Any effective plan of treatment of the Nephritic must be based upon a complete picture of the pathology involved. Given a set of symptoms, we inquire what part or parts of the kidney are involved, whether the glomeruli or the tubules, or both. The problem may be largely solved (a) by recalling the specific function of each of these structures; and (b) by considering certain symptoms. The glomeruli are clusters of capillary coils, terminals of the renal artery, projecting into the expanded ends of the uriniferous tubules. They excrete nitrogenous waste. The uriniferous tubules are minute canals, consisting of a basement membrane, lined with epithelium. They absorb certain salts and excrete water. Damage to them results in edema, a condition occurring in tubular nephritis.

It is not always a simple matter, however, to determine the full extent of involvement. Very likely a purely glomerular nephritis, or a purely tubular nephritis, is present only during the early stage. Severe injury to the glomerulus results in damage to the dependent epithelium; and, further, if a tubule is destroyed the function of its attached glomerulus will likely be impaired. Finally, disease of both these structures will probably cause proliferative and reparative processes in the interstitial tissues.

Conversely, if the interstitial tissue is primarily affected, the adjacent parenchymatous structures will hardly escape. Nevertheless, as a basis for treatment, it is logical to classify kidney diseases in children into the three types proposed by Davison and Salinger. Pure types seldom occur, but we can soon determine whether end-products of protein metabolism are being retained (uremia), or whether water and salt retention (edema), is the chief concern. Hematuria and edema are the two symptoms that make possible the classification, which is as follows:

Hematuria, with or without edema: glomerular nephritis.

No hematuria, with edema: tubular nephritis.

No edema: interstitial nephritis. (seldom in children)

To sum up, hematuria, with or without edema, means glomerular nephritis. Consistent absence of red blood cells points to tubular or interstitial nephritis; edema to tubular insufficiency. A nephritic, hematuria and edema being absent, has an interstitial nephritis.

At the onset all nephritis in children is acute. Therefore, division of these cases into acute and chronic, except for prognosis, is unimportant. Also, it is illogical to designate a type simply as parenchymatous, since both the glomeruli and the tubules are parenchymatous tissue. Much confusion arises because so many authorities attempt new or modified classifications. The essential thing to know is what part of the kidney is most involved.

Treatment

The patient's condition permitting, the first step is removal of the cause. To facilitate regeneration the damaged kidney should rest. Nephritis in childhood, is a frequent sequel to tonsillitis, respiratory infections, and in some instances to scarlet fever. Even in the presence of albuminuria, the patient being in a fair condition, tonsillectomy may be done under general anesthetic. Edema being present, or if absent, if the salt solution disappearance-time indicates that it is impending, tonsillectomy should be postponed. The same holds, also, if the urine is scanty, or if there is high blood urea or non-protein nitrogen. Tubular nephritis may result from infection of the nasal sinuses. These sinuses are drained as soon as discovered.

Protein intake is important only in the glomerular type. Here it should not exceed 1.5 Gm. per kilo. body weight, per 24 hours. Salt should be restricted, but a salt-free diet is not always necessary. Water is given freely in glomerular nephritis with much hemorrhage, and barring anuria and edema. Edema calls for restriction of water. The patient should be in bed and kept warm. Avoid routine purgation and hot packs. They are too taxing and

should be limited to cases showing signs of uremia.

For marked edema, pilocarpine subcutaneously, cardiac disease being absent, is a most potent remedy, causing diaphoresis which usually lasts 2 or 3 hours. According to Hare, it removes the strain on the kidneys, eliminates the uremic poisoning, and decreases the inflammation by lowering blood pressure. For edema, digitalis, diuretin, calcium chloride, ammonium chloride, and theocin are safe, convenient, and often effective. The mercurial, "salyrgan", is a good diuretic, but is contraindicated in glomerular nephritis. Digitalis is indicated in cardiac failure. In sufficient dosage, it, as a rule, reduces edema, although not in all cases. When it fails, ammonium chloride, 1.0 Gm. a day for a child of 5 years, has proved helpful. The explanation is that chlorine ions, liberated through the conversion of ammonia into urea, bring about change in the water-logged tissues, displacing water and sodium chloride, thus eliminating the edema.

In grave uremic poisoning, with convulsions and suppression of urine, morphine hypodermically and bromides and chloral per rectum are indicated, along with active diaphoresis and hot rectal irrigations of normal saline every 4 hours, to relieve suppression. Subcutaneous injections of 5 per cent. glucose, and 2 to 5 units of insulin to each 250 cc's of fluid should be repeated as often as the tissues will absorb it.

Purely tubular nephritis is much less common than the glomerular type. In this type, often referred to as nephrosis, marked edema and extreme pallor are found. These patients generally are not acutely ill nor do they have uremia, but the process runs a chronic course with frequent exacerbations. Some authorities assign the cause to a staphylococcus infection of the sinuses, in contrast to the streptococcal origin of glomerular nephritis. In edema of this type evidence is lacking that a protein diet is harmful. Rather, patients seem to do better with full amounts of protein, which Marriott estimates as 3 Gms. per kilogram, each 24 hours. Here "salyrgan", alone or with ammonium chloride, or digitalis, often gives excellent results. But it should not be given in the presence of diarrhea, marked anemia, or high temperature. It is administered intramuscularly or intravenously in doses of 0.5 cc twice a week.

Prognosis

Acute nephritis runs its course and leaves the child generally without damage, provided proper intervention has occurred early. Every nephritic patient, however, should be observed for at least six months, because a small percentage of cases, even when carefully supervised, will go on into one of the chronic forms of the disease.

(Paper read at staff meeting, St. Elizabeth's Hospital, November 24th., 1933).

REALIZATION

At the beginning of his work last year, President J. P. Harvey listed 7 objectives for the Society, as follows:

1. Education of Profession. Lectures. Demonstrations. Clinics.
2. Education of the public. Through Public Health and Public Policy.
3. Service to the Profession — Public Health Committee. Library Committee. Etc.
4. Social Functions.
5. Build up the Society and make its influence felt in the community.

6. Continue efforts for central office. Lay the ground work for better times.

7. Take some action in the cost of medical care report.

Whether Dr. Harvey feels satisfied with the results or not, it is obvious that his Administration contributed greatly towards their realization. The difficult year just closed will be long remembered as one of vigorous advance upon the part of the Mahoning County Medical Society.



THE MAHONING COUNTY MEDICAL SOCIETY BULLETIN

OFFICERS OF THE SOCIETY

JAMES B. NELSON, M. D., President WM. M. SKIPP, M. D., Secretary
 PAUL J. FUZY, M. D., Vice Pres. LOUIS S. DEITCHMAN, M. D., Treasurer
 JAMES L. FISHER, M. D., President-Elect.

EDITORIAL COMMITTEE

CLAUDE B. NORRIS, M. D., Editor

Associate Editors

J. B. BIRCH, M. D.	A. W. THOMAS, M. D.
J. G. BRODY, M. D.	R. E. WHELAN, M. D.
C. H. CAMPBELL, M. D.	<i>Special Correspondents</i>
MORRIS DEITCHMAN, M. D.	J. PAUL HARVEY, M. D.
SIDNEY MCCURDY, M. D.	JOHN NOLL, M. D.
H. E. PATRICK, M. D.	SAUL J. TAMARKIN, M. D.

Business Management

SAMUEL TAMARKIN, M. D., Manager
 JOHN NOLL, M. D., Assistant Manager

Published Monthly at 243 Lincoln Avenue, Youngstown, Ohio.

Annual Subscription \$2.00

EN AVANT

To follow Dr. James Fisher and Dr. Louis Deitchman as Editor of the Bulletin is not easy. But President Nelson requested this service of me, and from a sense of duty I consented to give it. The Society has to do directly with our means of a livelihood; and through it we express ourselves collectively to the Community. Therefore, it seems reasonable that every member is morally obliged to contribute to the extent of his ability.

Important problems confront us. Some of them we can not ignore. They will be dealt with either by us or for us. To solve them constructively, for our own good, as well as for the best welfare of the public, will require careful thinking, and cautious, but courageous, action. And above everything else, we must continue our education.

Service to the Society is the one and only excuse for the existence of the Bulletin. Your contribution is not merely passively welcome; it is actively wanted. Sometimes the Ed-

itor may not agree with your views. In fact, nobody may have your opinion on this or that, except yourself. But, if it is Professionally important, and if you have painstakingly thought it through, it deserves space in the Bulletin, if the space can be made available. Much thought will naturally resolve about subjects which the times happen to emphasize. Just now it is economics. But ours is a shield of many sides. Scientific papers, the results of your experience and special interest, are really of more importance. Our every effort should be directed towards a finer good-will for one another and our increased efficiency as doctors.

Finally, it is most important that we, every one of us, get back of the business managers, Drs. Tamarkin and Noll. We must make it profitable to our advertisers to patronize the Bulletin.

In the spirit of helpfulness, fellowship, and confidence, let us go FORWARD. CBN.

DEPRESSION TRUTHS AND FALLACIES

Merely the symptoms of our financial disease are often given as the causes of the present disorder, and the true etiology is either overlooked or refused recognition. All our activities are operating under a code of morals which combine to form a good or bad ethic. Our personal ethics determine those of our group activities, no matter what we may be engaged in. Good actions are governed by good morals, the location of which is a happy medium between egoism and altruism. Where egoism becomes too greatly developed, some portion of the body politic must suffer. Overdeveloped altruism, on the contrary, can cause our basic structure to crumble. We recognize that the capitalist and businessman have addled, for the time being, the goose that laid their golden egg, but we fail to see that the supreme egoism of this group, untempered by altruism, has produced this pitiful condition.

Mr. Harriman, President of the United States Chamber of Commerce, in the New York Times of December 3rd, 1933, says, as he writes of business changes: "The moralist might regard them (business changes) as an important step toward setting up of ethical business standards, but to graft social and ethical buds on an economic stem is a somewhat doubtful undertaking." I believe this is vicious thinking because morals are first and economics are secondary. Again he says: "In the economic scale of things, profit is the highest good, not in the narrow sense of cash in the drawer, but in the sense of adequate compensation for the service rendered." Very true, but a beneficent ethic demands an equitable distribution of such profit. It does not allow the bulk of rewards to go to a few stock-holders and officers, as has lately been so well brought out by senatorial investigations, but distributes it in accordance with the service rendered by all, employer and consumer-employee.

We cannot recognize longer as valid the excuse, "It is Business". Sound ethics demand the right of fair play, good sportsmanship. An

employee asks an employer: "How much does the company have to make before we workers can get a raise?" There can be no satisfactory answer as long as egoism reigns and rotten ethics endure.

The value of ethics was well described in a recent editorial in the Saturday Evening Post: "No fair minded American expects an investment to be 100% perfect in all kinds of financial weather, but he does expect the professional ethics of all investment bankers to be on a par with those of physicians." What business man or banker cares to employ the services of a physician who conducts his vocation for profit only? What layman will seek the aid of a surgeon if he knows that his diagnosis is influenced by his fee? The honesty of the medical ethic has been slowly ground out after its ingredients, egoism and altruism, were properly proportioned and mixed.

We need not blame the industrial leader for our present plight, for he has had his ethics debauched by the desire of all stockholders, by you and me, for profit. Superintendents, assistants, and foremen, to protect their bread and butter must carry out the order to produce at cheaper costs and increased profits, too often at the expense of good morals.

Good business ethics have been crucified on the cross of greed and profit. The N. R. A. can set us free by education, persuasion and compulsion, and it can re-create decent business conduct. The temper of the people is such, I believe, that if those in power do not accept our new rules for business conduct, they, the people, will specify and enforce a code of ethics suitable to themselves. We must not let the reason for failure of the N. R. A. be simply that the N. R. A. was never tried.

S. McC.

Our Society, in all its activities, has only these two ends in view; Justice for its members; and comfort and health for those who are sick. For these no sacrifice is too great.

IN MEMORIAM

HARRY LYNN BEERS, M. D.

1873-1933



DR. H. L. BEERS

The Mahoning County Medical Society pays tribute to the memory of one of its departed members, Dr. Harry Lynn Beers.

Dr. Beers was born May the 26th., 1873, in Nossville, Huntingdon County, Pennsylvania. His early education was obtained in the public schools, and later he attended Dickinson College, where he prepared to become a teacher.

After following the profession of teaching in his own state for several years, Dr. Beers entered the Medical Department of the University of Michigan, where he was graduated in 1909. He then opened his office in Youngstown for the practice of his Profession, and the following year became a member of the Mahoning County Medical Society. He was loyal to the ideals of Medicine and gave his support both to the State Medical Society and to the American Medical Association.

In July 1932, Dr. Beers suffered a heart attack from which he never recovered. He had improved sufficiently last March to enable him to go to Florida, and later to Ashville, N. C., where he spent several months with his son, Dr. David L. Beers. He returned to Youngstown feeling better, but in October he was again confined to his bed, where for some two months he lingered, until the end came, December the 5th., 1933.

Dr. Beers was a member of Sulgrave Masonic Lodge in Youngstown, and, also, he was a member of the Memorial Presbyterian Church.

The Society will miss Dr. Beers, and we extend our sincerest sympathy to his bereaved family.

B. W. Schaffner, M. D.

268 Lincoln Ave.

MEDICAL GLEANINGS

Dr. C. C. Reed is confined to the North Side Hospital following an operation for the removal of his gall bladder. A hasty recovery is our wish to the doctor.

Dr. W. H. Bunn is walking with a cane since having his tonsils removed the early part of the month. We did not know a tonsillectomy affected one's leg like that. Oh! he had one of his legs operated at the same time.

Dr. Geo. Y. Davis addressed the

South Side Women's Club, December 2nd, 1933, on "Preventable Diseases".

Dr. Joe Hall is reported quite ill at the North Side Unit of City Hospital.

Dr. C. B. Norris addressed the Trumbull County Medical Society, December 21st, 1933, on "Syphilis".

Dr. R. B. Poling has recently been elected a member of "The American Association for the Study of Neoplastic Diseases". Dr. Poling

has just spent several days in the surgical laboratory of Johns Hopkins, studying the latest advances in research on tumors.

MODERN COWS

Now Florence Heberding tells us that All her cows have "knee action". Truly modern cows. No wonder then that Indian Creek Farm Milk sales are soaring.

Sept., 1933 issues of the Bulletin are scarce. If any one has a copy they do not need, communicate with the Bulletin Office, 3-6110.

THE BIXLER PARTY

Frank Carr and his staff of the Bixler Baking Co. were royal hosts Dec. 12th,—and talk about clean, pure bread—they have it! We saw it made! Thanks, Mr. Carr!

THE TUGWELL-COPELAND BILL

For 27 years The Federal Food and Drug Administration has been trying to get support to improve the Pure Food and Drugs Act, passed at that time. The proposed Tugwell Bill will correct many of the faults of the old law.

That it will meet well organized opposition is to be expected. Manufacturers of Patent Medicines, through their organizations, are bending every effort to see that their advertising media make a strong campaign against the Act. The United Medicine Manufacturers, one of these organizations, passed a resolution as far back as the 9th., of September, "To secure the co-operation of newspapers in spreading favorable publicity, particularly the papers now carrying advertising for members of the association." The retail chain drug store, the patent medicine manufacturer, the wholesale druggist, newspapers and periodicals, and probably the radio, will all be utilized to create an unfavorable impression of this Bill.

It is high time that the Medical Profession as a whole bestir itself. We should get behind this most important measure. It is shameful that we are permitting this battle to be waged, without anything more than one editorial in the A. M. A. Journal, to signify that we are the least bit concerned.

The Tugwell Bill has these major objectives, not covered in the old Food and Drugs legislation:

1. The prevention of false advertising. At present there is only control of labeling; but no control of extravagant claims made over the radio and in the newspapers and periodicals.

2. The inclusion of cosmetics.

This industry has become a two billion dollar business, almost entirely since the passage of the original Act. One need but remember the cases of Thallium, Lead, and Arsenic poisoning to understand how important it is that these should be included.

3. To prevent the establishment of Physiological tolerance for adulteratives without evidence of toxicity. At present it is only necessary that it be stated that a certain adulterative is being used.

4. To include all foods in the present law, instead of only canned foods.

5. The power to require Federal permits in industries not otherwise covered by this law.

6. The control of drug products now sold on the basis of therapeutic claims which are contrary to general Medical opinion. The present law requires that fraudulent intent be proved, as well as that statements made are false. That intent to defraud is very difficult to prove is attested by the recent Banbar case, which was lost, after years of careful preparation, because of this technicality.

7. Intelligible labeling in such manner that the purchaser should be made aware of the contents of the preparation.

That the newspapers are already fighting the battle of the advertiser was strongly suggested by a carefully worded editorial in one of the local newspapers, recently. To put The Tugwell Bill on the same basis as the prohibition amendment, an infringement of individual liberty, is a very clever blind. To claim that it is intended to prevent people

(Turn to Page 20)

THE MAHONING COUNTY
MEDICAL SOCIETY

— Presents —

Dr. Morris Fishbein

Editor of The Journal of The American
Medical Association, and of Hygeia

“CHANGES IN THE NATURE OF
MEDICAL PRACTICE”

At The

ANNUAL BANQUET

Thursday, February 1st., — 6:30 P. M.

YOUNGSTOWN CLUB

Music

Instruction

Entertainment

*ALL members of the Medical and Dental Professions
Are Cordially Invited. Visitors from neighboring counties
and cities will be most welcome. Social Facilities of the Club
Will Be Available After the Meeting.*

\$2.00 Per Plate

Make Your Reservations With
DR. H. J. BEARD, Dollar Bank Building

MORRIS FISHBEIN

Perhaps the name of no other living physician is so nearly a "household word" as is that of the subject of this sketch. His career is perfect proof that in this great Country of ours, constant, patient, well-directed, cheerful effort finds ungrudging reward.

Dr. Fishbein's coming to us on February 1st., is sure to attract to that meeting not merely all the members of our own Society. Alert medical men from all around, even to Cleveland, Pittsburgh, Canton, Akron, and the western Pennsylvania Counties, will be here in large numbers to hear him.

And why? Is it solely because of what he will have to say? That explains it only in part. The deeper reasons are the personality of the man himself, and the desire innate in us all to see, to hear, to speak to, a man who does things. There is no question as to the importance to each of us of what Dr. Fishbein will say. In these days of stress and change, the Profession recognizes that much that is precious of our traditions and experience is in jeopardy. And this student and trusted leader will bring us authentic information and a comprehensive viewpoint on matters vital to our welfare.

Dr. Fishbein has been and still is a busy man. Read this from Dr. Olin West:

"Dr. Morris Fishbein was born in St. Louis and graduated in 1912 at Rush Medical College in Chicago. He is married and has three children. In 1912 Dr. Fishbein was a Fellow in Pathology at Rush Medical College and in 1913 became Assistant to the Editor of *The Journal of the American Medical Association*. He was made Editor of the *Journal* upon the retirement of Dr. Simmons in 1924. For some years he has served as Editor of *Hygeia*. At one time he was Associate Professor of Clinical Medicine at Rush Medical College and at the present time he is giving a course of lectures on medical history in the Medical Department of the University of Illinois. He is a member and Fellow of the American Medical Association and is a member of the Chicago Medical Society, of the Illinois State Medical Society, of the Institute of Medicine of Chicago, of the Chicago Pathological Society and of other medical organizations. He is a member of the Alpha Omega Alpha Medical Fraternity.

"Dr. Fishbein has been a frequent contributor to a number of scientific publications as well as to a number of lay publications, including some of the most outstanding magazines published in this country. Among these have been *American Mercury*, *Forum*, *Yale Review*, and *Outlook*. He is the author of a number of books, including *Medical Follies*, *Mirrors of Medicine*, *The New Medical Follies*, *The Human Body and Its Care*, and *Shattering Health Superstitions*, and is co-author with Dr. George H. Simmons of the *Art and Practice of Medical Writing*.

"Dr. Fishbein has been in great demand as a speaker and has appeared before many audiences in all parts of the United States."

Happy is the man who, before senility creeps upon him, realizes some of his cherished aspirations! At the relatively early age of 44 years, Dr. Fishbein is a distinguished figure in American Medicine.

COMING MEETINGS

of

THE MAHONING COUNTY
MEDICAL SOCIETY

FEBRUARY

DR. IRVIN ABELL

Clinical Professor of Surgery, School of Medicine,
University of Louisville.

TUESDAY, FEBRUARY 20th, — 8:30 P. M.

YOUNGSTOWN CLUB

(This is the regular meeting of the Society,—the Annual Banquet to be held February 1st., being the postponed **January** meeting.)

MARCH

DR. WM. E. LOWER

Professor of Genito-Urinary Surgery, Medical School of
Western Reserve University, and Director of
Cleveland Clinic.

TUESDAY, MARCH 20th, — 8:30 P. M.

YOUNGSTOWN CLUB

ANNUAL POST GRADUATE DAY

McGILL UNIVERSITY GROUP

Dr. J. C. Meakins
Dr. Wilder Penfield

Dr. John R. Fraser
Dr. J. B. Collip

(Definite date to be announced in February issue. However, it will be one of the last few days of April or the first few days of May.)

Officers Elected and Committees Appointed for 1934

OFFICERS

Dr. J. B. Nelson,
President
Dr. J. L. Fisher,
President-Elect
Dr. P. J. Fuzy,
Vice President
Dr. Wm. M. Skipp,
Secretary
Dr. L. S. Deitchman,
Treasurer

Dr. P. L. Boyle
Dr. J. D. Brown
Dr. E. W. Cliffe
Dr. M. P. Jones
Dr. J. E. L. Keyes
Dr. P. R. McConnell
Dr. F. F. Monroe
Dr. M. D. Neidus
Dr. J. M. Ranz
Dr. John Shaffer

Dr. P. B. H. Smith
Dr. Clarence Stefanski
Dr. A. C. Tidd
Dr. C. F. Yauman

*Housing and Library
Committee*
Dr. E. E. Kirkwood,
Chairman

Dr. L. H. Getty
Dr. Andrew Miglets
Dr. W. E. Ranz

Central Office Committee

Dr. R. B. Poling, Chr.
Dr. A. E. Brant
Dr. W. H. Evans
Dr. F. F. Piercy
Dr. I. C. Smith

Legislative Committee
Dr. O. J. Walker, Chr.
Dr. F. W. McNamara
Dr. R. H. Middleton

Delegates

Dr. L. G. Coe
Dr. Sidney McCurdy

Alternate Delegates

Dr. Joe Rosenfeld
Dr. W. K. Stewart

Economics Committee

Dr. W. K. Stewart,
Chairman

Public Health Committee

Dr. H. E. McClenahan,
Chairman

Censor

Dr. J. P. Harvey

Dr. Sidney McCurdy

Dr. J. U. Buchanan

COMMITTEES

Editorial Committee

Dr. Claude B. Norris,
Editor

*Public Relations
Committee*

Dr. Paul J. Fuzy, Chr.
Dr. F. J. Bierkamp
Dr. P. H. Leimbach
Dr. J. L. Scarnecchia
Dr. Wm. M. Skipp
Dr. A. W. Thomas

Auditing Committee

Dr. H. L. Zeve, Chr.
Dr. A. E. Frye
Dr. A. C. Montani

Dr. Samuel Tamarkin,
Adv. Mgr.

Dr. John Noll,
Asst. Adv. Mgr.

Dr. R. E. Whelan
Dr. C. H. Campbell
Dr. J. G. Brody

Dr. H. E. Patrick
Dr. Morris Deitchman

Dr. Sidney McCurdy
Dr. A. W. Thomas

Dr. Saul Tamarkin
Dr. J. B. Birch

Dr. J. P. Harvey

Publicity Committee

Dr. J. L. Fisher, Chr.
Dr. Louis Deitchman
Dr. W. X. Taylor

Correspondent

Dr. B. W. Schaffner

Program Committee

Dr. H. J. Beard, Chr.
Dr. M. H. Bachman
Dr. W. H. Bennett

Membership Committee

Dr. J. P. Harvey, Chr.
Dr. S. W. Hartzell
Dr. J. E. Hardman
Dr. B. B. McElhaney
Dr. W. W. Ryall

Speakers Bureau

Dr. Wm. M. Skipp

*Medical Defense—Legal
and Medical Co-oper-
ative Committee*

Dr. R. E. Whelan,
Chairman
Dr. E. W. Coe
Dr. J. A. Sherbondy
Dr. J. S. Zimmerman

Communicable Diseases, Dec., 1933

	City	County	M-H
Chickenpox	64	85	
Diphtheria	2		
Scarlet Fever	37	7	
Whooping Cough	35	20	
Smallpox	1		
Pneumonia	3	2	
Tuberculosis	11	2	
La Grippe	6		
Syphilis	6		2
Gon. & Tularemia		2	
Strep. mening.			1
Op. Neonat.	1		

**Visit of Dr. Harlow Brooks
Is Postponed**

We have just received notice from Dr. Brooks that his engagement with us for March conflicts with his duties to the Pan American Medical Association, of which he is Vice President. We regret that this has occurred, but he promises to come to us later. We shall look forward to having him.

The Tugwell-Copeland Bill (Cont.)
 from purchasing some home remedy, is an effective stall designed to discredit the Bill.

Although this is an Administration measure, there is great likelihood that it will be defeated unless every effort is made in its behalf. The Medical Profession, and the manufacturers of high quality foods and drugs, must organize to defeat the strong lobby that is quietly and effectively at work. Our County Society should pass a resolution to be forwarded to our Congressman. Each member should become a missionary to educate his intelligent clientele. Those who can should see that influential lay groups shall be informed of the value of this Act, and enlist their support. M. D.

BREETUS

Breetus takes this opportunity to introduce to you the new Bulletin Business Manager, Sam Tamarkin. From the way Sam has gone at his work, he bids fair to eclipse previous years and we look for a better Bulletin all around. We congratulate the Bulletin on his appointment.

❀ ❀ ❀

A. G. Henry: Thanks for the letter in re—the business management. We appreciate your interest in our organization and our Bulletin. The letter was read by the retiring president and incoming president. Your recommendations have been adopted. This new pilot—J. B. Nelson, is a leader. We asked him if he knew the difference between a red onion and a white one, and he said, "The red one is red and the white one is white." So you see he knows his onions.

❀ ❀ ❀

Life Savers No. 1—Do not tell M. P. Jones you think the Bulletin is punk!

❀ ❀ ❀

We wonder why Frank Lyons had a baby on the scale in his December ad. He sells scales but not babies. Incidentally, The Lyons-Laeri Company appeared in the first issue of the Bulletin with a Full Page Ad and has been in every month since. How come we can't see so well these days?

(Continued on Page 32)

PATRONIZE OUR ADVERTISERS AND MENTION THE BULLETIN

**SYRUP
 EPHEDRINE
 COMPOUND**

A most efficient formula for treatment of Pertussis, Asthma and deep seated Bronchial affections.

Each fluid dram contains:

Phenobarbital	1-8 Gr.
Ephedrin Hydrochloride	1-16 Gr.
Guaiacol Sulfonate (tasteless)	2 Grs.
Cresote Sulfonate (tasteless)	2 Grs.
Drosera	3 1/2 Grs.
Thyme	7 Grs.

Lyonalogy—'This preparation will help you 'cough'.'

The Lyons-Laeri Co.

Manufacturing Pharmacists
 26 Fifth Ave. Phone 4-0131
 Youngstown, Ohio

Blair's

Responsible Drycleaning

prolongs the life of your garments.

**SCIENTIFIC METHODS
 SANITARY CONDITIONS
 COURTEOUS SERVICE**

EARL M. BLAIR,

Inc.

2607 Glenwood Ave.
 PHONE 4-4228



EMBRYOLOGY IN THE TALMUD

By **CARL L. MANELLO**

Rabbi of Temple Emanu-El

People who know of the Talmud from hearsay, cherish the erroneous opinion that all scientific observations recorded in the Talmud must be permeated with a spirit of antiquity foreign to the modern scientist. Especially do they think this opinion holds true in regard to the study of anatomy and embryology, since the Talmud was compiled in the year 499 Christian Era, at which time these branches of science were in their infancy. A careful study of the Talmud, however, will convince one that not only did the Rabbis of the Talmud base their anatomical knowledge upon dissections of the human body, but that a number of their conclusions in this field of study are greatly in accord with modern scientific observations and discoveries.

It is a rather surprising fact that although the existence of the human ovum was not discovered until the beginning of the nineteenth century,

by Baer, an allusion to this fact may be found in the words of the Talmud that, "when fertilization takes place, the embryo comes into existence only when a white drop meets the semen." The Talmud further declares that, "The unborn offspring in the mother's womb can be compared to a nut lying in a flask of water." (Nidah page 31a).

The embryo, according to the Talmud, consists of three parts: the father contributes the white parts, from which are derived the bones, the tendons, the nails, the brain matter, and the whites of the eye. The mother contributes the colored parts: the skin, the flesh, the hair, and the colored parts of the eye, and God contributes the spirit, the soul, facial expression, vision, hearing, speech, walking, and understanding. From these contributions in the embryo, the Talmud says the adult organism develops.

The appearance of a developed
(Turn the Page)

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:

W. W. RICHARDSON, M. D., Medical Director

Formerly Chief Physician, State Hospital for Insane, Norristown, Pennsylvania

embryo is described in the Talmud as follows: "Abba Shaul (a Rabbi who lived in the first century C. E.) states that its size is that of a small pea; the two eyes are like the eyes of a fly (like two dots), the nostrils are like two specks, and the mouth is like a hair, the hands and feet can not be distinguished." (Nidah page 25a) This seems to be the description of a forty day embryo, for we are told in the Talmud that a fully developed embryo has an altogether different appearance, the description of which is given with great accuracy. Rabbi Simlae (a Rabbi of the 3rd century C. E.) says, "The child in the mother's womb can be likened to a folded book; his two hands are upon the temples, the two elbows are upon the knees, his head lies between the knees, his mouth is closed, the naval is open. The embryo eats everything that the mother eats. As soon as the child is born that which was closed opens, and that which was open closes, otherwise the health of the child is endangered." In many respects this agrees with the facts as described by modern embryologists. To have such knowledge it was indeed necessary for Rabbi Simlae to see the position of the foetus in utero, probably gained from dissections conducted for the purpose of obtaining these facts.

Of great interest, although not in

accord with modern science, is the Talmudic explanation of labor pains. According to the Talmud, "The first three months the child lies in the lowest chamber (lowest part of the uterus); during the middle three months the child occupies the central part, and the last three months the child resides in the uppermost chamber. When the time comes for the child to leave the mother it turns around (from the upper part to the lower) and emerges. This is the cause of the labor pains." This was indeed something of a mystery which was then very hard to determine; nevertheless, the Talmud does not resort to superstition, but endeavors to present a scientific explanation.

From the few facts mentioned, and the few passages quoted from the Talmud, it can readily be seen that the Rabbis of the Talmud were far from being empirics. Observed facts played an important rôle. Only in limited instances, when scientific research failed, were they forced to theorize, and even then they tried to substantiate their theories. And who knows, whether some of our modern theories rest on a more secure foundation than those of fifteen centuries ago!

Note—The Talmud is a compilation of Jewish civil and canonical law, consisting of the combined Mishna, or text, and Gemara, or commentary.

EXCHANGES

"Times do change, but never has the intimate relationship of patient and physician been seriously altered by feudal, monarchistic or democratic systems of government."—Bulletin DesMoines Academy of Medicine.

"If we render a true professional service in this great social experiment, the proper place of the medical profession in other social experiments now in the offing is assured. Our leadership and our individual participation are on trial as

never before."—Pittsburgh Medical Bulletin.

"The great progress of medicine in this country in the past century would have been impossible without a sympathetic and intelligent press. Sanitation, both municipal and personal, had to be sold to the public. *** I have no doubt that the American press will soon recognize this as one of its responsibilities with the result that thousands of lives will be saved."—Detroit Medical News.

ACUTE LYMPHATIC LEUKEMIA and NUCLEOTIDE THERAPY

By ROBT. B. POLING, M. D.

Case Report

Leukemia has been a known clinical entity since it was recognized by Hughes Bennet in 1848. His description was followed by Virchow's report in the same year. Since then, many workers have observed the course of the disease in its various aspects.

Because it does not always affect patients in the same manner, I here present a case that shows some clinical peculiarities as well as an apparent temporary response to therapy.

Patient: J. M.

Case History

Male, age 50 years, laborer. Patient noticed that his gums were oozing a little blood, about July 28, 1932. On August 1st, his throat became sore. He had gradually felt worse. On August 2nd, he visited a dentist for aid because of these symptoms. The dentist referred him to a physician. He entered the hospital the next day.

The chief complaint was sore throat, bleeding from the mouth, and weakness.

Family and past history were of no significance. His father was dead, cause of death unknown; his mother was living and well. There was no familial history of tuberculosis or cancer. The patient had never been sick before. He had measles when a child and gonorrhoea many years ago.

Physical examination revealed a very sick patient. Facial pallor was quite marked, and suggested severe toxemia and exhaustion. The buccal, palatal and pharyngeal mucosae were oozing blood and showed considerable congestion. The mucosa of the throat presented broad flat ulcers and was coated with a purulent exudate. Pyorrhoea alveolaris was marked. The pulse was 120; the temperature, 102.6. All other organs seemed normal.

Blood examination revealed: white cells, 1,014; reds, 3,000,000; hemoglobin, 61%; lymphocytes, 100%; neutrophiles, none; platelets, mark-

edly reduced; bleeding time, 7 minutes; clotting time, 2½ minutes; culture, negative. Smears and cultures from the mouth and throat showed Vincent's angina, streptococcus, and staphylococcus. Sedimentation test showed a drop of 40 mm. (Cutler).

A subsequent blood examination exhibited a continuation of marked leukopenia, with white cells, 1,300; reds, 2,400,000; hemoglobin, 61%; neutrophiles, 27%; lymphocytes, 68%; monocytes, 5%.

At this time it was thought that we were dealing with agranulocytic angina. Supporting this diagnosis were marked leukopenia, a low percentage of neutrophiles and a high of lymphocytes, and a fairly good red cell count. However, the platelets were very low and these do not conform to agranulocytosis. Subsequent blood tests revealed that the hemoglobin estimation and red count were becoming gradually lower. These facts were against a diagnosis of agranulocytosis.

Nevertheless, treatment was instituted for agranulocytic angina on August 7th. Pentose nucleotide K96 was used, 0.35 Gms. being given the first day and 1.05 Gms. the second day. Thereafter, two ampules of 0.7 Gms. each were given intramuscularly daily until twelve ampules were used.

The leucocyte count remained fairly stationary, but with some oscillation, until twelve days after treatment was begun, when it took a definite rise, being 2,350 leucocytes per cubic millimeter. At this time the differential count showed 82% neutrophiles and 18% lymphocytes. The red cell count and hemoglobin were, also, beginning to increase.

Under Pentose nucleotide K96 the patient was making definite improvement. Bleeding from the mucous membranes ceased; the ulcers healed; temperature returned to normal; the pharynx and soft palate became clean and smooth. The appetite improved, and the pa-

(Turn the Page)

tient felt much better. Nothing but pyorrhea alveolaris remained. He left the hospital August 19, 1932.

Treatments and laboratory work were continued at the office. Intramuscular injections of Pentose nucleotide were given almost daily. On August 22, 1932, the leucocyte count was 3,930; neutrophiles, 63%; lymphocytes, 37%; reds, 2,540,000; hemoglobin, 41%; sedimentation test was 35 mm.

Subsequent counts showed a definite increase in red cells and in leucocytes, and there was improvement in sedimentation rate. On September 7, 1932 there were: leucocytes, 10,300; neutrophiles, 80%; lymphocytes, 50%; reds, 3,300,000; hemoglobin, 70%. The patient had an extreme sense of well being and wished to return to work.

Treatments were continued until September 13, 1932. At that time 30 intramuscular injections had been used. Blood count on this date showed: leucocytes, 29,550; neutrophiles, 56%; myelocytes, 2%; basket-cells, 2%; lymphocytes, 40%. Sedimentation rate 18 mm. This indicates definite systemic improvement.

The high leucocyte count now renewed our confusion, that much elevation being unexpected in agranulocytic angina. After one week without treatment, the clinical and laboratory picture took on an entirely different aspect. The patient complained of swollen Post-and Preauricular and Mandibular glands. They were very large.

On September 21, 1932, the blood showed: leucocytes, 75,600; neutrophiles, 7%; lymphocytes, 95%; reds, 3,800,000; hemoglobin, 64%. The patient did not feel so well as recently. The temperature was normal.

On September 23, 1932, the blood count showed: leucocytes, 93,880; neutrophiles, 3%; myelocytes, 1%; lymphocytes, 96%. Temperature was 99.2; weight, 146 pounds; pulse, 66. In addition to the previously enlarged glands, those in left groin were involved.

The patient returned to the hospital, and x-ray therapy was begun on September 26, 1932. However, the enlarged glands had be-

gun to diminish before beginning x-ray therapy. Blood count then was leucocytes, 69,600; neutrophiles, 11%; lymphocytes, 75%; monocytes, 1%; basketcells, 1%; lymphoblasts, 2%. The oxydase test showed the count to be correct for lymphocytes. Although the adenopathy was lessened, on this date the patient noticed that he began to bleed a small amount from the mucosa of the mouth. He complained also of marked weakness of the eyes for the past few days. His temperature was 98; pulse, 70.

On September 21, 1932, the diagnosis of the case was definitely changed to acute lymphatic leukemia. The clinical course assumed an abrupt decline. The hemorrhage from the mucous membranes gradually grew worse. The shift of the lymphocytes to the left was daily increasingly more pronounced. There was no increase in the neutrophiles after September 21, 1932. The declining clinical and laboratory aspects continued unchecked. Nucleotide therapy, in all, 36 injections, 0.7 Gm. each, produced no response.

The patient was rehospitalized October 6th, 1932, weakened, rapidly declining, and hemorrhaging severely from the buccal mucosa. On October 7th the blood count showed leucocytes, 29,200; neutrophiles, 2%; small lymphocytes, 4%; lymphoblasts, 2%; myeloblasts, 4%; stem cell, 1%; reds, 3,020,000; hemoglobin, 56%.

Patient expired October 10, 1932. An autopsy was not secured.

Comment

We are dealing with a case of acute lymphatic leukemia which began in the aleukemic phase of the disease process. The patient gave the impression of one suffering severely from an acute infection. The marked leucopenia and the rapid sedimentation rate were laboratory procedures that indicated a severe illness. The age of the patient is extraordinary for cases of acute lymphatic leukemia. Most cases of this disease occur in younger persons.

The apparent response to the nucleotide therapy is of interest. It indicates that remnants of leucopoie-

tic tissue in the bone marrow may be present and capable of stimulation. The response to therapy, or the remission as the case may be, was indicated by the increased percentage of neutrophils and the improvement in sedimentation rate,

as well as the better clinical condition of the patient. Nevertheless, after a fairly high degree of clinical improvement the patient began to decline rapidly and relentlessly. It was impossible to secure another response to therapy.

Laboratory Report

Date	W. B. C.	R. B. C.	Hb	Neut.	Lymphs.	Monos	Sed. Test (Cutler)
1932							
8- 2	1,014	3,000,000	61%	.....	100%	.....	.....
8- 3	1,400	3,590,000	61%	27%	.....	.....	40 mm.
8- 9	1,300	2,270,000	50%	21%	79%	.....	.....
8-10	1,600	2,700,000	45%	44%	56%	.....	Plus 40 mm.
8-13	1,600	2,200,000	35%	60%	40%	.....	Plus 40 mm.
8-15	1,700	1,800,000	.....	66%	34%	.....	.....
8-19	2,350	2,230,000	52%	82%	18%	.....	.....
8-22	3,950	2,540,000	41%	63%	37%	.....	35 mm.
8-29	4,700	3,830,000	60%	50%	50%	.....	28 mm.
9- 7	10,300	3,300,000	70%	50%	50%	.....	15 mm.
9-13	27,550	3,570,000	71%	58%	38%	4%	18 mm.
9-21	75,600	3,800,000	64%	7%	93%	.....	21 mm.
9-23	93,800	3,800,000	64%	3%	96%	1%	.....
9-25	69,600	4,100,000	75%	11%	77%	1%	.....
9-27	40,750	.....	.....	11%	88%	1%	.....
10-1	.....	.....	.....	3%	94%	3%	.....
10-3	59,900	3,500,000	61%	.....	.....	.....	.....
10-7	29,200	3,020,000	56%	3%	94%	3%	.....

CORRESPONDENCE

Excerpts from letters received:

I wish to thank the Society for the beautiful flowers which I received when I was a patient at the North Side Unit of the Youngstown Hospital.

In anticipation of having my tonsils removed, which I had carried for nearly seventy years, I appreciated very much the thoughtfulness, especially as it represented to me the good will and wishes for a speedy recovery, from each individual member of the society.

Sincerely yours,
 Dr. H. E. Blott.

On your feet you may think yourself hardboiled and don't give a damn, but when they have you on your back, remembrances such as yours do count.

Thank you.
 Yours very sincerely,
 Dr. D. W. Goldcamp.

It won't be many months until we will be on our way back to

Ohio. We will all be very glad to return.

The Bulletin informs me the Society is very active and you must have had a very interesting year.

With best holiday wishes to yourself and all the boys.

Sincerely,
 Dr. V. Neel.

I very much enjoyed my visit to Youngstown and hope you will visit us here.

Yours sincerely,
 Dr. Wilburt C. Davison.

May I express my very deep appreciation for your very kind hospitality which I enjoyed on my most recent series of lectures in Youngstown. The group at Youngstown are very stimulating and it is a great pleasure to have had this contact with them. You may believe me when I say that I am very grateful, indeed, for the opportunity to address this group.

Very sincerely yours,
 Dr. Bruce K. Wiseman.
 (Turn the Page)

Editor of the Bulletin,
Sir:—

Here is a letter which I received from one of your readers. You may publish this new slant on the Tugwell bill, if you care.

Theophrastus Bombastus.

Dear Theophrastus:—

I see by the December issue of the Bulletin that your editor is for the Tugwell bill. I understand that it has something to do with the Food and Drug act, but can't see why your editor should take a stand opposite to the newspapers. Is there any reason why we should interfere with venerable institutions such as the patent medicine industry, advertising interests and etc? -

I dont know much about this bill, but I have read somewhere, maybe it was in one of the new Sunday funnies, that this man Tugwell is a rabid radicle and a paid agent of the Soviet government. In fact, I have it on good authority that when the Russian invoice Litvinoff was here, he hob-nobbed with this fellow and called him Kamerad Tugwell. There is even talk that they were caught together eating herring and drinking vodka. Well, the way I see it, this here Tugwell, a professor of something, wants to collectivize (speaking of collectivizing, how do you find collections? Mine are rotten) the patent medicine and drug business and ruin the radio and advertising games, just like prohibition ruined the liquor business.

Personally, I think that the radio business is going to the dogs, anyway. You used to get some real medical dope over the air and at the same time hear good classical music, like excerpts from the operas "Show Boat", "The McKaddo", "Victor Herbert" and etc. Now you turn on a program like the Castoria hour, and what do you get? Some fiddler by the name of Spalding plays a lot of egg-sotic pieces or something like that.

As for drug advertising, that is lost art. Think of the real stuff we used to get in magazines like the Police gazette! The ads for remedies for lost manhood and piles alone used to cover a page. There was advertising with a punch! And, boy, what an art department! Now some of the mollycoddle magazines

won't even accept patent medicine ads.

By the way, can you tell me what happened to this fellow Copeland, which used to talk on the Nujol hour? He was such an enthusiastic speaker and talked so convincingly that I have been using it a lot, mostly in acute abdomen cases. If I am not mistaken, he advised it.

Say, it would be one on me if he is the same fellow which is mixed up in this Tugwell bill. Come to think of it, they even call it the Copeland bill. I hear that this Copeland was an M. D. once. If that is true then it seems a bit inconsistent of him to fight radio advertising of nostroms and at the same time ballyhoo a patent cathartic. He must be pretty slick anyway. I wonder if he gets paid for these broadcasts? I can't say much for him as an entertainer, though. Well, it would seem that if he is a doctor, he must have forgotten his table of incompatibles, and as Will Rogers might say, a senator's toga hides many a bowleg.

Now, about this bill, why should we interfere with a legitimate game? Say a clever man invents a new patent medicine like Peruna or Lydia Pinkham's Compound; he spends good money for coloring and flavoring it, puts it up in an attractive package, spends a fortune on advertising, gives it a catchy name, which is easier to remember than your old pharmacopeia or national formula, isn't he entitled to a good profit? No, sir, I am for unhampered business with plenty of rugged individualism. There is altogether too much palaver about the protection and the rights of the buyer, and the fellow that has something to sell has been made the goat. I believe in the old Russian saying *CAVIAR EMPTOR*, if the customer likes to be gypped, it is his own funeral. Give the enterprising business man a break too. As the frenchman says, *LASSIE FAIR*, which in plain American means, "business is business".

I just happened to think that we may be able to get some inside dope on the subject from our banquet speaker, what's his name? Oh yes, Morris Fishbone. I think he is the Seniro censor of the A. M. A.

Journal and the author of "Tonics and Sedatives." I hope I can scrape up enough dough to attend it. I have salted away a dollar in scrip money and a couple of E. R. A. slips for this special occasion.

Well, Theophrastus, I must close but before I do so I want to tell you that this man Breetus in the Bulletin is a clever fellow, but he ought to change his name, because it is plaguerized. For a long time I have tried to remember where he got it, then suddenly it popped into my head that he stole it from a well known poem, I think one of Eddie Guest's leerics; it goes like this:

"Breetus there a man with soul so dead". So I suggest that he change his name.

Yours for ragged individualism,
C. C. PILL, M. D.

Union Medical Association Meeting

The Union Medical Association, of the 6th Counsellor's District, holds its 227th Session, at Massillon, in McKinley Hall of the State Hospital, beginning at 10 o'clock, the morning of January 10th.

The meeting may have become "history" before you read this, but none the less, your attention is called to it. The President, our own Dr. Earl Brant, has arranged an interesting group of subjects for discussion.

THE PROGRAM

Morning

1. Hallucinations and Diagnosis, Dr. Arthur Gilliam, State Hospital.
 2. Tumors in Bones, Dr. P. C. Langon, Akron, Ohio.
- Members will be guests of the Hospital at the Noon Day Luncheon.

Afternoon

1. Business, Annual Meeting, Election of Officers.
2. Some Considerations in the Treatment of Neurosyphilis, Dr. John D. O'Brien, Canton, O.
3. Nine Years Experience with Malaria in the Treatment of General Paralysis, Dr. Arthur G. Hyde, Supt. State Hospital.

Dr. C. L. Cummer, President State Medical Association, will be present with a special message.

Knox Hats Have Style

for style, of course, is still and always will be the top note in Knox Hats. There's a snap in the brim and a knack in the lines that nobody seems to get quite as perfectly as Knox does . . . because Knox knows how to fit hat lines to face lines.

THE SCOTT CO.

19 NORTH PHELPS ST.

POST-GRADUATE DAY

This year "Post-Graduate Day" places a real responsibility upon the Society as a whole. Nevertheless, the work is a privilege.

For 6 or 8 years we have been hosts to some 300 visiting physicians, plus our own membership of about 200.

Beyond question, these doctors have felt that the day with us was well spent. This year we are sure to have a much larger attendance. The McGill Group is planning especially for the General Practitioner.

It is our job to see that our visiting neighbors and friends are given a really royal welcome!

**BEL-DEL
PHARMACY**

Cor. Delaware & Belmont Ave.

Phone 4-3701

Thomas Hewitt, Prop.

**The Jones Surgical
Supply Co.**

of

Cleveland, O.

Represented by

JIMMIE JONES

Phone 7-9383 Youngstown, O.

**FOR EMERGENCY
STARTING**

Texaco Fire Chief Gas

LOUIS E. GEUSS

Fifth and Madison
Phone 4-0653

Complete Willard Battery
Service

**INVALID
COACH**

7-8987

"Call Thompson"

Clifford L. Thompson

538 W. Glenaven

Youngstown, Ohio

Funerals

Flowers

For All Occasions

PAUL SCHMIDT

FLORIST

3121 Market St.
Youngstown, O. Phone 2-4212

Kalak

TRADE MARK REG. U.S. PAT. OFF.

**CARBONATED
ALKALINE WATER**

**NOT A LAXATIVE
UNIFORM STRENGTH-PURITY**

KALAK WATER CO. OF NEW YORK, INC.
6 Church Street New York City

Dependable Products For the Medical Profession

We manufacture a complete line of medicinal products of the very highest standard which we offer direct to members of the medical profession. Every product is ready for immediate use, easily dispensed. We guarantee them true to labels and of reliable potency—our catalogue free on request.

THE ZEMMER CO.

Chemists to the Medical Profession

3943-5-7 Sennott St. Pittsburgh, Pa.
Oakland Station

WHAT EVERY WOMAN DOESN'T KNOW —HOW TO GIVE COD LIVER OIL

Some authorities recommend that cod liver oil be given in the morning and at bed time so as to assure an appetite for the oil, while others prefer to give it after meals in order not to retard gastric secretions. If the mother will place the very young baby on her lap and hold the child's mouth open by gently pressing the cheeks together between her thumb and fingers while she administers the oil, all of it will be taken. The infant soon becomes accustomed to taking the oil without having its mouth held open. Mead's Newfoundland Cod Liver Oil, of minimum acidity and prepared from fresh healthy livers, is well tolerated by infants and children and is palatable without flavoring.

If given cold, cod liver oil has little taste, for the cold tends to paralyze momentarily the gustatory nerves. As any "taste" is largely a metallic one from the silver or silverplated spoon (particularly if the plating is worn), a glass spoon has an advantage.

Mead's 10 D Cod Liver Oil is made from Mead's Newfoundland Cod Liver Oil. In cases of fat intolerance the former has an advantage since it can be given in 1-3 to ½ the usual cod liver oil dosage.—Adv.

Are You Represented On Our R_x File?

BROWN'S DRUG STORE

Oak & Landsdowne Phone 4-0952

"On the East Side—
It's Brown's"

F. A. MORRIS PHARMACIST

Phone 103 Canfield, Ohio



We fill R_s as you write them. We will be glad to favor you at any time.

IDORA PHARMACY

2636 Glenwood Ave.

Phone 2-1513

McCREADY DRUG CO.

T. P. McCREADY, Prop.

1625 Mahoning Avenue

PHONE 7-5239

409 W. Madison Ave.

PHONE 4-3615

DOCTOR!

Did you know that Wheeler's Tripure Distilled Water is made from spring water, and is aerated by forcing the air into the live steam. Phone us, 3-6710 for a trial case.

THE WHEELER MINERAL SPRINGS CO.

107-113 North Hine St.
Youngstown, Ohio
Phone 3-6710

you prescribe . . .

and considerable thought goes into the selection and combination of drugs.

A. J. Laeri

The Apothecary

Home Savings & Loan Bldg.

Compounds and Does
It Well

Delivery Service

Phone 7-3116

S. Q. LAYPIUS OBSERVES

The Literary Digest, in discussing Republican leaders, shows photos of three prominent possibilities,—George H. Moses, David A. Reed and Walter E. Edge. There may be something prophetic in this. Wasn't Moses found at the Edge of the Reeds?

⌘ ⌘ ⌘

The first meeting of Germany's new Reichstag was concluded in 7½ minutes. We note, in this connection, that for the first time the Reichstag had no women members.

⌘ ⌘ ⌘

Ohio Liquor Commission rules that "minors cannot handle liquor". Neither can some adults I could name.

⌘ ⌘ ⌘

This C. W. A. Certainly Worries Aesculapians.

⌘ ⌘ ⌘

Purchasers of liquor must supply their names and addresses. It

might be well also to ascertain their choice of undertaker.

⌘ ⌘ ⌘

The Ohio Edison Co. has ordered 42 carloads of poles. Sounds like an immigrant train.

⌘ ⌘ ⌘

Man and woman, 5000 miles apart, marry by telephone, proving that distance lends enchantment. But gee, that's not even companionate!

⌘ ⌘ ⌘

Powerful microscopic lenses for spectacles are announced. Perhaps we will now be able to identify N. R. A. chisellers.

⌘ ⌘ ⌘

This new bank code is not complete. There is no charge for the ink used in writing counter-checks.

⌘ ⌘ ⌘

Newspaper headline states, "Rotarians toast children at dinner held in their honor". Marshmallows would have been in better taste.

While some printers live without seeing a doctor; no modern doctor would think of surviving without seeing a printer.

May we be of service to you?

The United Printing Co.

We have just received an advance copy of "The Bloodless Phlebotomist" Vol. VIII No. 1, which is being mailed to every physician in the United States.

This little journal published by the Denver Chemical Manufacturing Company of New York is replete with interesting articles written by physicians who are located in many different countries and while the purpose of the publication is to acquaint its medical readers with Antiphlogistine, the physicians will find a number of items and illustrations which will excite their curiosity and interest—altogether, the little journal is well worth reading and we note that 1,260,000 copies are printed in nine languages and distributed to every doctor in the world with a known address, excepting in the countries of Russia, Lithuania and Bulgaria.

If you do not receive a copy write to the Denver Chemical Manufacturing Company, New York, who will place your name on their list. The journal will be supplied you free of all charges. Adv.

Distributors for Mahoning and Columbiana Counties.

BUDWEISER

BOTTLE BEER

and

ANHEUSER-BUSCH

DRAUGHT BEER

We have been making
QUALITY GINGER ALES

For **57** Years

Doctor, just phone in your order; we will be glad to serve you.

**The J. F. GIERING
BOTTLING CO.**

554 Hilker St.

Est. 1876

Phone 6-2212 Youngstown, Ohio

BREETUS (Cont.)

To the Program Committee:— We impart the knowledge that the Mead Johnson representative is anxious to show some of his moving picture films on tonsillectomy, etc.—at or after any of our meetings. Mead Johnson & Company, have been regular contributors to our Bulletin since March 1931. They deserve recognition. A. L. Rose is a dandy fellow to correspond with.

✦ ✦ ✦

Dear Theophrastus:

In answer to your letter of December, we wish to correct your mistaken impression, — that Bill Skipp has to sleep in the garage to get away from the phone calls about the "Relief Setback". He does **not** sleep in the garage! He would if he could, but he can't get away from the phones long enough.

It may be that when the new President, J. B.—starts to work, he will take steps to see that Bill gets time for "forty winks".

J. B. told us that, in his opinion, President Roosevelt intended that the indigent, who was sick or had a hernia that kept him out of a job, should receive good medical care and that his hernia should be cured by operation so he **could** get a job,— instead of tearing up curb stones with C. W. A. funds. This J. B. is a logical cuss. We like him.

Have you had the opportunity yet, to remove a gall-bladder on the kitchen table?

That first "fifty cent slip" you sent me, was used as you said— it's no better than catalogues.

Seriously now,—if these men who have an M. D. after their name could only see that an Executive Secretary in a Central Office could do more for them than they can imagine, they would look into it. Urologists do.

Yours in confusion,
BREETUS.

Keep a permanent file of your Bulletins!

What's your Tally?



E. V. Green & Co.
Green's Toggery Shop
15 Spring Common, Youngstown, O.

"Pigment is necessary for the synthesis of hemoglobin," says Dr. I. Newton Kugel-mass in his recent book, "Feeding in Infancy and Childhood". "Pigments are chemically related to carotin, a hydrocarbon, and hence are termed carotinoids. They have their origin in plants and occur in the body only as they are present in the food. They are particularly associated with Vitamin A-bearing foods. Pigment cannot be synthesized in the body but has to be taken ingested with food."

For those who do not obtain enough carotene (carotin) from their diet, physicians may now prescribe Caritol, a stable solution each gram of which contains 3000 gamma of carotene, the palatable, fruit and vegetable form of Vitamin A. Caritol is offered by S. M. A Corporation in drop and capsule form, and is available at most prescription pharmacies. Adv.

NO FISHY TASTE *because* they contain the **PALATABLE** **FRUIT AND VEGETABLE FORM OF VITAMIN A**

CARITOL, for A, alone—



Caritol is a 0.3% solution of Carotene ($C_{40}H_{56}$), the palatable fruit and vegetable form of vitamin A, and therefore represents the form in which most vitamin A is naturally consumed by the human body.

Helps Build Resistance and Promotes Growth

Caritol, by virtue of its vitamin A activity, promotes growth and, as indicated by experimental studies, may be an aid toward the establishment of resistance of the body to infections in general. It may be prescribed alone or with other vitamin products. There is no fishy taste or bad after-taste. The cost is reasonable, too. Caritol is available in 15 c.c. and 50 c.c. dropper-top bottles and in capsules packed 25 and 50 to the box.

**CAPSULES
OR DROPS
INSTEAD OF
TEASPOONS**

**EASY DOSE
NO FISHY TASTE
NO AFTER TASTE**

CARITOL-with-Vitamin D



Caritol-with-Vitamin D is the most palatable combination of vitamins A and D on the market because it contains the fruit and vegetable form of vitamin A, carotene, and a tasteless vitamin D prepared for therapeutic use by methods (Zucker process) developed at Columbia University. It is naturally palatable, not artificially flavored.

For A and D, together in Palatable Form

Caritol-with-Vitamin D is, therefore, especially recommended for patients who need both vitamins A and D, but object to the fishy taste of fish liver oils and their concentrates.

There is no fishy taste or bad after-taste, and the cost is reasonable. Available at prescription pharmacies in 5 c.c. and 50 c.c. dropper-top bottles and in 25-capsule boxes.

Prescribe these naturally palatable vitamin products — they cost no more.

Taste the carotene products yourself. Write for samples. We also offer *Smaco Cod Liver Oil fortified with carotene and vitamin D* for those physicians who prefer to prescribe cod liver oil. It is three times as potent in both vitamins A and D. Therefore one teaspoon is equivalent to three teaspoons of good grade cod liver oil. Improved flavor and minimum cost to patient. For vitamin D alone (for the prevention or cure of rickets), we offer *Smaco Vitamin D*, a highly potent extract of the antirachitic principle of cod liver oil prepared by methods (Zucker process) developed at Columbia University. Ten drops equivalent in vitamin D potency to three teaspoons of good grade cod liver oil.



S.M.A. CORPORATION

CLEVELAND, OHIO

"World's Largest Producer of Carotene"

HELP YOUR
SOCIETY

OUR FUNDS ARE LOW



WE NEED MONEY FOR
PROGRAMS



PAY YOUR
DUES
PROMPTLY