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In recent years much of S.M.A. Corporation research has been focused on the isolation, purification, and commercial preparation for clinical use of other important vitamins, particularly the B vitamins. As was the case with SMAco Carotene (Pro-Vitamin A), these vitamins will be made available only when they may be offered in such concentrated form that it is practical to give at least a theoretical human dosage that shall result in a clinical response if a deficiency of that particular vitamin exists.

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May 1938

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Are the bricks with which we build."
—Longfellow.
I

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conditions referred to toxic absorption from the intestinal canal, the consistent use of Soricin for a reasonable period of time brings relief in a high percentage of cases.

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**MEDICAL CALENDAR**

May 17—Dr. Paul White, Cardiologist, Massachusetts General Hospital.

June 21—Interns' Competition with Case Presentations.

**MAY RADIO TALKS**

May 6—Saving Our Mothers — Dr. J. P. Harvey

May 13—White Collar Hazards — Dr. P. H. Kennedy

May 20—Famous Doctors of the Past — Dr. L. S. Dethcrman

May 27—Infections of the Hands — Dr. J. L. Fisher

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CLAUDE B. NORRIS, M. D.

PRESIDENT'S PAGE

From reading an article entitled, "Are We Wise?", re-printed elsewhere in this Bulletin, I get my cue for this month.

Indeed, it is easy to be pessimistic. Things are in such a muddle. Medicine is no exception. There are problems badly needing to be solved. Organized medicine, from the A. M. A. down, has better get a move on. A start is made in the proposed national, county by county, survey. This must be done promptly, and must be done right.

But it won't do, Gentlemen of the A. M. A., to say to localities, after you get this information, as you have in essence said before: "We offer no suggestions, no specific leadership; you in the counties may do nothing, or if you choose to do something, you hand you here-with the ten 'principles' within which you must operate." After you obtain this information you would do well to work out various "plans", this one suitable to this group of counties, others suitable to other groups of counties. Then you do well, Gentlemen, if you'd set up a field force for operating these plans, as you did in connection with grading of the medical schools and as you and the A. C. S. are doing in keeping hospitals up to standard.

Pessimism is easy, but optimism is well justified with us. Nothing could be more inspiring than the wonderful unity and harmony of our Society. It is deeply satisfying to see such fine work as our Committees are doing.

We believe, as a principle, that any action by any group, if it importantly affects the practice of medicine, becomes thereby a proper subject for the Society to consider, and it becomes the duty of the Society to deal with it. That principle was recognized by the hospitals in formulating their prepayment plans. Real progress is a-making.

Then Postgraduate Day! Words of ordinary praise are not enough to give to our Chairmen and their Committees who worked out and delivered to us one of the most distinguished events of all our Society's splendid history. Elsewhere you will find the Committees listed in full—they deserve your gratitude. To Drs. Noll, Allsup, Birch, Kline, Louis Deitchman, and Brown, as Chairmen of Committees, all honor and appreciation. But we recognize equally gratefully the line work of their valiant men.

Last but not least: Drs. Lohrey, Hattan, Kiefer, and Barthel—sacrificing their comfort and energies for us, and for those whom we serve—what words will tell them how grateful we are? And what brilliance of performance! Their reward must be the deep spiritual satisfaction of having done great and lasting good for the benefit of their fellow men.

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The distribution of the Bulletin is as follows:

<table>
<thead>
<tr>
<th>Members of the Society</th>
<th>Non-Members and Doctors in Youngstown and surrounding towns in Ohio</th>
<th>New Castle</th>
<th>Pittsburgh</th>
<th>Sharon</th>
<th>Toledo</th>
<th>Warren</th>
<th>Medical Societies</th>
<th>Total</th>
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<tr>
<td>241</td>
<td>951</td>
<td>38</td>
<td>16</td>
<td>18</td>
<td>11</td>
<td>56</td>
<td>27</td>
<td>980</td>
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</tbody>
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Please remember that this is the Mahoning County Medical Society Bulletin, your Bulletin, that is going out each month, carrying with it the news of what your society is doing. With your help we can continue to improve the Bulletin, and make it a worthwhile magazine. Without your help this cannot be done. A thousand doctors can't be wrong. Help them to receive a more worthwhile publication by cooperating with your staff.

JAMES D. BROWN, M. D.
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Non-Members and Doctors in Youngstown and surrounding towns in Ohio 151
Akron 31
Canton 31
Cincinnati 31
Cleveland 44
Columbus 22
Dayton 16
New Castle 16
Sharon 11
Toledo 20
Warren 20
Medical Societies 27 different cities in Pennsylvania 65
Doctors in the following states: Kentucky, Oklahoma, West Va., Massachusetts, Washington, Arkansas, Georgia, New York, Illinois, Canada, Alabama, Virginia, Maryland, Iowa, Mass., Indiana 246
Total 980

As you will recall as published in the last Bulletin, we had gone to the trouble of sending cards to several hundred on our mailing list, asking them if they wanted the Bulletin continued. Because of the extent to which these cards were returned to us, and with the notations expressing their desire to continue on the list, the Editorial Staff feels that it is only justly due these men that they receive a copy every month. In going over the list of cards we find that these men have been supporting Postgraduate day year after year.

Because of the wide distribution of the Bulletin and the large number of Doctors that are receiving it, we feel the Bulletin must improve with each monthly issue.

In order to make this improvement possible we must have the cooperation from the members of the Society, especially in regard to writing articles and supplying us with information that will be of interest to everyone.

Please remember that this is the Mahoning County Medical Society Bulletin, your Bulletin, that is going out each month, carrying with it the news of what your Society is doing. With your help we can continue to improve the Bulletin, and make it a worthwhile magazine. Without your help this cannot be done. A thousand doctors can't be wrong. Help them to receive a more worthwhile publication by cooperating with your staff.

JAMES D. BROWN, M. D.
What's in a Name

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REGIONAL ILEITIS
By GORDON G. NELSON, M. D.

The literature is quite replete with involved, beginning abruptly at the ileocecal valve where it is found in its maximum intensity, tapering off gradually as it ascends the ileum orally for 20 to 30 cm. Since this paper was published, however, it has been found that there are a few additional facts, chief of which is that the condition may involve any part of the small intestine and even extend over the ileocecum and ascending colon. In the two years following the publication of the original article, Crohn and his associates reported 28 more cases, so we see that the condition is far from rare.

In discussing the pathologic anatomy of the disease, Crohn says that the terminal ileum is found thickened, soggy and edematous, and the serosa is a blotchy red. The serosity of the terminal ileum is greatly thickened and even extends up onto the bowel wall for some distance. There are numerous large glands in the mesentery. The condition is not static, and the description above given applies to the bowel of one who has been ill for probably one year. Even with the intestine in this condition, spontaneous resolution of the disease has occurred. The normal intestinal folds are distorted and broken up by the destructive process together with the edema, giving a bullous structure to the mucosal aspect of the intestine. These are often small forest ulcerations.
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REGIONAL ILEITIS

by GORDON G. MELON, M.D.

The literature is quite replete with a relatively new clinical entity known as regional ileitis. During the last five to six years especially, there have been reported quite a few cases, many of which have been diagnosed before operation. Crohn, Grünberg and Oppenheim in 1932 published a complete description of the condition and reported 14 cases. This article is a classic and should be read by every practicing physician. Luck, in the April number of the S. G. & O. this year, reviews the literature and finds that a total of 497 cases of regional ileitis have been reported. It is unquestionably true that the disease recurred before, and when found was placed in the category of the benign granulomas. As far back as 1828, John Abercombie of Edinburgh described a granulomatous lesion of the small intestine. The disease was not recognized as a separate entity and was diagnosed as inflammatory bowel disease.

In Crohn's original article it is stated that the disease is characterized clinically by fever, diarrhea, and cramping and occasionally obstruction of the involved intestine. He also says that the terminal ileum alone is involved, beginning abruptly at the ileocecal valve where it is found in its maximum intensity, tapering off gradually as it ascends the ileum and appendix colon. In the two cases following the publication of the original article, Crohn and his associates reported 28 more cases, so we see that the condition is far from rare.

In discussing the pathologic anatomy of the disease, Crohn says that the terminal ileum is round thickened, spongy and edematous, and the serosa is a bluish red. The mucous membrane of the terminal ileum is greatly thickened and even extends up onto the bowel wall for some distance. There are numerous large glands in the mucosa. The condition is not static, and the description above gives an applied to the bowel of one who has been ill for probably one year. Even with the intestine in this condition, spontaneous resolution of the disease has occurred. The normal intestinal folds are distorted and broken up by the destructive process together with the edema, giving a bulbous structure to the mucosal aspect of the intestine. There are often small linear ulcerations.
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VITAMIN B,
(THIAMINE CHLORIDE)

FOR THE BENEFIT OF YOUR PATIENTS

The youngest patient was
nine years and the oldest sixty-two.
Among the clinical features should
be noted that the disease is pre-
dominant among young adult males.

Rosenblatt had a case in a boy four
and one-half years old. In the Mayo
clinic series, the youngest patient was
nine years and the oldest sixty-two.

The disease in its acute form often
manifests itself in a manner similar to
the onset of acute appendicitis. On
the other hand it is usually chronic,
characterized by loss of weight,
progressive anemia, fever, attacks of
diarrhea, and abdominal pain. It is
differentiated from colitis by remember-
ing that the diarrhea is not as
marked as in the latter, and there is
very little if any mucous or blood in
the stools. There are no per-anal
fistulas or abscesses, and no rectal
stromata. There is in most cases of
the chronic type, a definite mass in
the right iliac fossa.

VITAMIN B,
(THIAMINE CHLORIDE)

Histologically, there are varying
degrees of acute, subacute, and chronic
inflammations. The mucosa is usually
absent and submucosal tissues are
replaced by vascular granulation tissue
characterized by an infiltration of
lymphocytes, plasma cells, large mono-
cytes and polymorphonuclear eosin-
philis. The most involved layer seems
to be the submucosa, although all the
layers are involved as is the mesentery.
Occasional giant cells are found, and this suggests tuberculosis as a possible causative agent.

They are not found in chronic ulcerative
colitis. They are thought by
some to be due to the reaction against
foreign material.

The etiology of the condition is
obscure. Tuberculosis, syphilis, ac-
nemia and lymphosarcoma have been
quite thoroughly ruled out as
causative factors. Laboratory animals
have never shown any reaction to in-
jection of cultures made from lymph
nodes and mesenteric ileum. Wassermann reactions are negative. Many observers feel that the appendix has
no part in the causation of the disease.

There are a few, however, who are
of the opinion that the appendix may
be a primary factor because of the
presence of these patients and the
fact that about half of them have had
appendectomies. In about half of the
latter, abnormalities of the terminal
ileum were noted at the time of oper-
ation. In those cases, however, in
which there had been no previous
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May

The etiology of the condition

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They are thought by

Tuberculosis, syphilis, actinomycosis and lymphogranuloma have been quite thoroughly ruled out as causative factors. Laboratory animals have never shown any reaction to injection of cultures made from lymph nodes and mucosal ulcerations. Wassermann reactions are negative. Many observers feel that the appendix has no part in the causation of the disease. There are a few, however, who are of the opinion that the appendix may be a primary factor because of the youth of most of the patients and the fact that about half of them have had appendectomies. In about half of the latter, abnormalities of the terminal ileum were noted at the time of operation. In those cases, however, in which there had been no previous appendectomy, the museum of the appendix was not involved, although the outer coats of the organ were inflamed due to the pressure of contiguous disease.

Among the clinical features should be noted that the disease is predominant among young adult males. Rosenthal had a case in a boy four and one-half years old. In the Mayo clinic series, the youngest patient was nine years and the oldest sixty-two. The disease in its acute form often manifests itself in a manner similar to the onset of acute appendicitis. On the other hand it is usually chronic, and characterized by loss of weight, progressive anemia, fever, attacks of diarrhea, and abdominal pain. It is differentiated from colitis by remission of the diarrhea, and there is very little if any mucous or blood in the stools. There are no peri-anal fistulas or abscesses, and no rectal tenesmus. There is in most cases of the chronic type, a definite mass in the right iliac fossa.
The clinical course of the disease is divided by Crohn into four phases: (1) acute intra-abdominal disease with peritoneal irritation, (2) symptoms of ulcerative enteritis, (3) symptoms of chronic obstruction of the small intestine, and (4) persistent and intractable fistulas in the right lower quadrant following previous drainage forelper or abdominal abscess. In the first group it is impossible to distinguish these cases preoperatively from acute appendicitis, except that the symptoms develop more slowly than in appendicitis. There are generalized pain, pain and tenderness in the right lower quadrant, and fever to 102°F. The white count is increased. A mass is usually palpable now even without actual abscess formation. At operation the ileum is greatly thickened, red and edematous, with marked edema of the surrounding structures and slight exudate of the ideal wall. The mucosaty is quite thick and contains many large glands. This is called by some a "hot ileum" and should not be resected at this stage but allowed to subsist for several weeks and treated menstruase as a gastritis. In these cases where an abscess has been encountered, there is thick gumous pus without odor. Strange as it may seem, some of these acute cases go on to complete resolution without resection, but this outcome cannot be predicted.

In the second phase there are symptoms of ulcerative enteritis and the patient complain of colicky pain in the lower abdomen or around the umbilicus. There is some looseness of the stools (three to four a day). The stool is usually of a liquid or mushy consistency and contains pus, mucus and visible or occult blood. There is never any gross hemorrhage. There is constant low grade fever. As the disease progresses there develops a marked secondary anemia. Considerable loss of weight and strength occurs, and the condition passes into the chronic phase. It is said that this is the phase most commonly found. The symptoms are those of a partial obstruction of the small bowel. Violent cramps, and attacks of vomiting and constipation are present. During this phase of the condition, fistulous communications with the colon or sigmoid may give signs and symptoms of colitis, and mask the true nature of the disease. The fourth stage is that of persistent fistulas. These are found after drainage of abscesses which were supposedly appendiceal in origin. The fistulas failed to heal even after two or three attempts at closure, and it was found at the time of closure in these cases by operation, that the appendix was not involved. It is also well known that ordinary fistulas following the drainage of appendiceal abscesses always heal spontaneously, or are easily closed by operation. It can be assumed then that intractable fistulas that have resisted simple closure, are, in the absence of tuberculosis, to be considered in cases of regional ileitis. An unusual feature of the fistulas is that some of them develop months after the original drainage operation where the wound has healed perfectly.

The role played by the roentgenologist is very important in the diagnosis of regional enteritis. The barium enema usually gives definite findings. According to Kantor these changes in the ileum are: (1) a filling defect just proximal to the region, (2) abnormalities in contour of the last filled loop of the ileum, (3) dilatation of the ileum loops just proximal to the lesion, (4) the string sign which represents the actual lesion. Weber calls this the "wound cord" appearance.

The treatment of the disease is surgical. Although cases of spontaneous resolution and cure have followed medical care, Felon feels that surgical treatment is very unsatisfactory, and that the ideal therapy is based upon the prevention of fistulas and abscesses. The treatment should aim at complete extirpation of the diseased area. This may be carried out in
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Formerly Chief Physician, State Hospital for Insane, Norristown, Pa.

THE MIDDUNING COUNTY MEDICAL SOCIETY

The clinical course of the disease is divided by Crohn into four phases: (1) acute intra-abdominal disease with peritonitis obstruction, (2) symptoms of ulcerative enteritis, (3) symptoms of chronic obstruction of the small intestine and (4) persistent and intractable fistulas in the right lower quadrant following previous drainage for ulcer or abdominal abscess. In the first phase it is impossible to distinguish these cases preoperatively from acute appendicitis, except that the symptoms develop more slowly than in appendicitis. There are generalized chills, pain and tenderness in the right lower quadrant, and fever up to 102°F. The white count is increased. A mass is usually palpable even without actual abscess formation. At operation the ileum is greatly thickened, red and bloody, with marked adhesions of the surrounding structures and slight exudate of the ileal wall. The mesentery is quite thick and contains many large glands. This is called by some a “hot ileum” and should not be resected at this stage but allowed to subside for several weeks and treated meantime as a peritonitis. In these cases where an abscess has been suspected, there is thick grayish pus without odor. Strange as it may seem, some of these acute cases go on to complete resolution without resection, but this outcome cannot be predicted.

In the second phase there are symptoms of ulcerative enteritis and the patients complain of colicky pain in the lower abdomen or around the umbilicus. There is some looseness of the bowels (three to five movements a day). The stool is usually of a liquid or mushy consistency and contains pus, mucous and visible or occult blood. There is never any gross hemorrhage. There is constant low grade fever. As the disease progresses there develops a weakened secondary anemia. Considerable loss of weight and strength occurs, and the condition passes into the chronic phase. It is said that this is the phase most commonly found. The symptoms are those of a partial obstruction of the small bowel. Violent cramps, and attacks of vomiting and constipation are prominent. During this phase of the condition, fistulous communications with the colon or sigmoid may give signs and symptoms of colitis, and mask the true nature of the disease. The fourth stage is that of persistent fistulas. These are found after drainage of abscesses which were supposedly appendical in origin. The fistulas failed to heal even after two or three attempts at closure, and it was found at the time of closure in those cases by operation, that the appendix was not involved. It is also well known that ordinary fistulas following the drainage of appendical abscesses always heal spontaneously, or are easily closed by operation. It can be assumed that intractable fistulas that have resisted simple closure, are, in the absence of tuberculosi, to be considered as cases of regional ileitis.

An unusual feature of the fistulas is that some of them develop months after the original drainage operation where the wound has healed perfectly. The role played by the roentgenologist is very important in the diagnosis of regional enteritis. The barium enema shows only negative results. The horizon view usually gives definite findings. According to Kantor these changes in the ileum are: (1) a filling defect just proximal to the lesion, (2) abnormality in contour of the last filled loop of the ileum, (3) dilatation of the free loops just proximal to the lesion, and (4) the string sign which represents the actual lesion. Weber calls this the “twisted cord” appearance.

The treatment of the disease is surgical although cases of spontaneous resolution and cure have followed medical care. Felton feels that surgical treatment is very unsatisfactory, and that the ideal therapy is based upon the prevention of facultory divarication. The treatment should aim at complete extirpation of the diseased area. This may be carried out in
A white American male aged 30 years old, he had his appendix removed 17 months ago. At the time his stools contained mucus but no blood. He has lost about 30 pounds in weight since the onset of his present illness. The past history is essentially negative except that following his last operation for removal of the appendix, he developed postoperative atelectasis which required bronchoscopy. Physical examination shows a mass in the right lower abdomen with a sensation of heaviness in this area. This was especially noticeable if he stood on his feet or walked any distance. Several months later he noticed a dull aching pain in the right lower abdomen. This was especially noticeable occasionally. The nausea and vomiting came 5 or 6 hours after meals. The patient made an uneventful recovery and has gained weight and feels fine in every way. The photograph shows the gross specimen. The pathologists report that sections showed chronic ulceration, fibrosis and focal suppuration. There were no giant cells found.

A case of regional ileitis has been presented and a brief review of the literature is given. I am indebted to Dr. A. E. Bunt, who has given his permission to report this case.

Bibliography


Appreciation Expressed

Words of appreciation were expressed by the Ohio Nurse Anesthetists Association to Dr. A. E. Bunt and F. W. McNamara for their interesting papers Co-Operative Anesthesia by Dr. Bunt and Anaesthesia Shock by Dr. McNamara. All members and guests of the Association agreed it was the best meeting ever held.

Alice E. Bunt, President.

May

The activities of the division have to do with epidemiology, immunology, morbidity statistics, prevention of blindness, control of venereal diseases and control of tuberculosis.

The division is called upon by local health authorities during epidemics and also in determining the origin of sporadic cases, in differential diagnosis, in interpreting quarantine regulations and for assistance in diphteria immunization campaigns.

It assists health commissioners in Schick testing, tuberculin testing and in vaccination; it receives and tabulates morbidity reports and issues a semi-monthly bulletin giving this information to all local health commissioners and to health departments of other states; it keeps the U. S. Public Health Service informed of health conditions in Ohio by means of reports by letter and by telegram.

It prepares material on the various communicable diseases to be printed for public information and distributes many thousands of these pamphlets.

Through its Bureau for the Control of Venereal Diseases and Prevention of Blindness an active program is being carried on in the Nation-wide campaign against syphilis and its Bureau of Tuberculosis is assisting local departments not only in tuberculin testing but also, in diagnostic chest-clinics. In these clinics, conducted by tuberculosis specialists, the patients are always referred back to the family physician. Many early cases found in these clinics, have been hospitalized and restored to health.

New Committee men

Dr. Myron H. Steinberg has been assigned to the Editorial Committee. Dr. Samuel K. Zoss is added to the Law Education Committee and to the Program Committee.
single or multiple operations, depending on the condition of the patient. Simple short-circuiting operations without resection of the main relieved the symptoms in about 50% of the patients on whom it was performed, in a series reported by Mayer and Ross. Here advocates resolution with disin­fection.

The following is a report of a case. A white American male was admitted to the hospital with the complaint of swelling in the right lower abdomen associated with chronic constipation over a period of five and one-half years. In 1932, at which time he was 80 years old, he had his appendix removed. He was improved for several months, and then noticed a dull ach­ing pain in the right lower abdomen with a sensation of heaviness in this area. This was especially noticeable if he stood on his feet or walked any distance. Several months later he noticed the swelling and fullness, and he also became constipated and vomiting occasionally. The tumor and vomiting came on 4 or 5 hours after meals. For the past two years he had had intermittent attacks of diarrhea at which time his stools contained muco­pus but no blood. He has lost about twenty pounds in weight since the onset of his present illness. The past history is essentially negative except that following his last operation for removal of the appendix, he developed postoperative ileus which required bronchoscopy. Physical examination shows a mass in the right lower abdomen, and it is tender. There is no rigidity. On rectal examination, a mass is felt just at the tip of the examining finger. The hemoglobin was 70% and the red blood cells numbered 3,579,000. The white blood cells were 8,550 with a differential count of 62% polyn, 33% lymphocytes and 5% eosinophiles. At operation, performed under cyclopro­pane anesthesia, the terminal ileum for a distance of about two feet presented a boggy or oaty appearance and it was quite heavy. The mesen­tery contained many large glands and it was very thick and extended well up to the lateral walls of the bowel. The cecum and lower portion of the ascending colon was also involved in the inflammatory process. The entire disease area was resected and an ileo­transverse colostomy was done bringing the side of the ileum to the side of the colon. An enterostomy tube was then inserted into the proximal colon. The patient made an uneventful recovery and has gained weight and feels fine in every way. The photo­graph shows the gross speciricn. The pathologist report stated that the sections showed chronic ulceration, fi­brosis and local suppuration. There were no giant cells found.

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REGULAR MEETING

and

TESTIMONIAL DINNER

MAHONING COUNTY MEDICAL SOCIETY

Honors Dr. Harmon E. Blott on his 50th Anniversary in the Practice of Medicine
do his fellow Honorary Members

SCIENTIFIC PROGRAM

by

Dr. Paul White, Cardiologist

Tuesday Evening, May 17th, 6:30 P. M.

YOUNGSTOWN CLUB

SPEAKER AT OUR NEXT MEETING

Dr. White was born in 1886, graduated from Harvard College in 1908 and from Harvard Medical School in 1911. He interned on the Medical Service at the Massachusetts General Hospital, and was medical resident until 1914. He studied abroad with Sir Thomas Lewis for a year in 1914 and then returned as Cardiac Resident at the Massachusetts General Hospital. He has continued on the staff of the Massachusetts General Hospital, his title now being Physician, and on the teaching staff of the Harvard Medical School. He is now living in France. During this time he served at Base Hospital No. 6 in France. He has written a book, "Heart Disease," published by the Macmillan Company (now in its second edition) and a small book, "Heart Disease in General Practice," published by the National Medical Book Company, besides many articles in various medical journals on the clinical aspects of heart disease.

Dr. Blott is one member of our Medical Society who has achieved a feat that few of us younger men will be able to duplicate. He has completed this year, 50 years in the practice of medicine. The Society has bestowed honorary membership upon him and will hold a Testimonial Dinner in his honor at a regular meeting, May 17th. Dr. Blott at this dinner will sit at the head of the table with Dr. Cibson, R. L. Whelan, J. F. Lindsay, H. E. Welch, and Thomas J. Arundel, all of whom are honorary members.

Dr. Blott was born at North Jackson in April, 1866. He read medicine with Dr. Salmon and later attended Western Reserve, where he was graduated in 1888, with a degree of M.D. He opened an office shortly thereafter in Brier Hill and during the summer of 1887, he moved his office to the downtown section, where he is still to be seen daily, attending faithfully to his office hours.

Dr. Blott had a medical service of which it was said that for many years at Youngstown Hospital he was "well and faithfully." Harmon E. Blott, the president of the Mahoning County Medical Society salutes you, and how is reverent to you for an achievement that is unique—fifty years of practice and still going strong.
REGULAR MEETING

and

TESTIMONIAL DINNER

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Dr. Blatt was born at North Jackson in April, 1865. He read medicine with Dr. Stafford, and later attended Western Reserve, where he was graduated in 1888, with a degree of M.D. He opened an office shortly afterward in Brier Hill, and during the summer—married. In 1907, he moved his office to the downtown section, where he is still to be seen daily, attending faithfully to his old hours.

Dr. Blatt had a medical office of which he was chief for many years at Youngstown Hospital. He served well and faithfully. Harmon E. Blatt, the senior of the Mahoning County Medical Society salute you, and now in reverent as you for an achievement so worthy—fifty years of practice and still going strong.
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May
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We Deliver

OTHERS SAY—

Are We Mice?

Pessimism is the easiest thing in the world to achieve. Any old fool can reach enviable excellence as a pessimist in just no time. In fact, to be a first class pessimist requires even less brain power than to be a columnist or an economist.

But to be a doctor takes plenty of vitamin A, B, C, D, and G (inhibition, brains, courage, devotion, and guts). If any old fool could make the Profession of Medicine you wouldn't be in it. Then why join up with a droopy gang of goats?

True enough, there's plenty of temptation to do it, what with all the poverty and politics, patriotism, popularity, and publicity, both public and private. Nobody sees any fun in working like the devil for years, months, and years, to provide jobs for hordes of bureaucratic loafers, to support dirty louts who won't work, and to supply gravy for grafters.

We have built for the good of the public a great army of servants, each individual of which is dedicated to the job of relieving the suffering and saving lives. Each member has within him a triple distilled yearning to be approved by his fellows for his conformity to the highest standards of ethics and professional skill and learning.

Our Postgraduate Days, our monthly meetings, our Autumn series, our membership in and attendance at a dozen district, State, and National Societies, our attendance at teaching centers, our stacks of books and journals to read and re-read, we accept voluntarily as life-long responsibilities.

All laws, State and National, requiring decency and excellence of our members our Profession has sponsored and most of them it has originated. In truth, the whole program of professional improvement has arisen within the profession and has been achieved by it. It isn't exactly pleasant to be harassed by propagandists who would snatch control from us and substitute methods which both experience and common sense demonstrate to be a futile way of solving medical problems. They forget that we who know them best have naturally vitally interested in their solution, are the only group from whom any wise solution can come, and are doing all we can to work out a solution.

Oh, of course, there are within our own ranks a few, possibly one percent, who are no good anyway you take them. We know them and hate them, and the people often fall for temptation to do it, what with all the poverty and politics, patriotism, popularity, and publicity, both public and private. Nobody sees any fun in working like the devil for years, months, and years, to provide jobs for hordes of bureaucratic loafers, to support dirty louts who won't work, and to supply gravy for grafters.

But to be an optimist under the circumstances, while tough, is not impossible. That doesn't mean Pollyanna stuff. It means perspective. We are still on the job. We have no corner on stupidity, high purpose, brains, nor zeal for the welfare of our fellows. Others—thousands, millions—are as good as we are. That's something. The churches were crowded Easter Sunday. Fairs of
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YOUNGTOWN, OHIO

180 BULLETIN THE MAHONING COUNTY MEDICAL SOCIETY

HIRSHBERG'S CAMP supports not only for general wear, but also in prescription apparel. Our corsetieres are trained in the fitting of CAMP supports not only for general wear, but also in prescription cases.

This seed of the wicked shall be cut off; the righteous shall inherit the land, for there is a happy end to their works.

In the light of all this a fellow might as well fight it out, think it out, work it out, and, with Browning: "Trust God, we all, me be afraid."

Music Hath Charms

Arnold H. (The author of this lovely bit of writing once peddled in Youngstown! —Editor.)

Many evenings, when your writer was a six-year-old chump, he went to bed without saying: "Good-night" to his Daddy because the latter, a physician-musician, was away on a confinement case.

But at 2 or 3 o'clock on the following morning that little lad would be awakened by the strain of soft music purring out from the gentle touch of the physician-musician upon the rich old cabinet-organ in our parlor. Yes, and the little chap would tiptoe down the stairs to see the pater sitting there on the bench, a bit stopped, with dim lights and half-dosed ights, toying with Handel's Largo or something from his favorite Eckard Grieg. Just sitting there, relaxing, after some arduous and trying experience and gaining, from the instrument which he helped, a pliability which could have been supplied by nothing else. Tobacco, narcotics, liquor—none of these could have done what the love of music and the "concert of sweet sounds" so well accomplished for that tired man.

My memory brings back those songs of early youth, and who can say that they were not beautiful? In
"But the wicked shall inherit the land, and shall delight themselves in the abundance of peace... The wicked have drawn the sword, and have bent the bow; but they shall fall into their own snare. The seed of the wicked shall be broken, and their stem shall wax not forth. But the meek shall inherit the earth; and the poor and needy shall dwell therein."

"The seed of the wicked shall be broken, and their stem shall wax not forth. But the meek shall inherit the earth; and the poor and needy shall dwell therein."
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Song; The Rosary; Blue Danube;
The Sweetest Story Ever Told. So
many of those old melodies which
recall scenes of young love or of
adolescent affairs. Priceless, those
associations!

In jazz and swing music many of
us old-timers see little of merit. Per­
haps it's because we are aging. Per­
haps the gay blades of today will look
back at these present tunes as we do
at those of our youth. But with the
apparent noisy, meaningless assem­
bling of notes and chords and phrases
and with disregard of all rules of
music-writing and with the loud
blare of brass and beating of tom-toms
as seems to be the trend of today's
orchestras, it would appear that we
are reverting to the jungle and to the
cannibal version of the "Big Apple."

Not must we forget the majestic
old hymns. Let us think only of their
composition virtue without regard to
the sentiment expressed in the words
we sing. Who can deny that he is
moved by such symphony?

It was my rare good fortune to see
the Highlanders marching into the
battle line in 1918. Kilted "Ladies
from Hell" strutting their stuff down
that Belgian road and with pipers
blasting out a challenge to the enemy!
It has been said that one military
leader took an orchestra down into
the very trenches and that the exam­
ple of these unarmed musicians and
the occasional melody which could be
heard between shell~
was an inspira­
tion which turned the tide of battlC'.
Ve have heard of ship's bands ap­
pearing on dC'ck and playing as the
vessel sank. I t has been mv own ex­
'primce to enter the lobby ;If a build­

1938
Music has soothed men; it has
driven them to acts of passion; it has
encouraged them to feats of valor;
it has led them to God.

Sometimes the blare of the radio
distracts us but if we choose carefully
we can find a hundred excellent pro­
grams coming over the air waves.
How strange and destitute would be
a world without music and without
song.—Ohio Poultrymen News.

Preventable!

Article III
Consider the empty desks of twen­
ty-four school classrooms and you will
better appreciate the number of Ohio
children under 15 years of age who
died from accidents during 1937.

Someone has said that accidents do
not "happen" but that there is a
cause for each and a careful analysis
will prove the truth of this quotation.

Much suffering and death can be pre­
vented if we give more thought to it.

The following information has
been revealed by the Division of
Vital Statistics:

Consider the empty desks of twen­
ty-four school classrooms and you will
better appreciate the number of Ohio
children under 15 years of age who
 died from accidents during 1937.

Tabulated below is the number of
deaths due to fatal accidents among
children under 15 years of age, listed
by cause and age group for the year
1937.

TOTAL FATAL ACCIDENTS
IN HOME

Place of Accident—

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<td>Years</td>
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<td>236</td>
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</table>

OHIO'S DEPARTMENT OF HEALTH
In jazz and swing music, many of us old-timers see little of merit. Perhaps it's because we are aging. Perhaps the gay blades of today will look back at these present tunes as we do at those of our youth. But with the apparent noise, meaningless assembling of notes and chords and phrases and with disregard of all rules of music-writing and with the loud blare of trills and buzzing of tom-toms as seems to be the trend of today's orchestras, it would appear that we are reverting to the jungle and to the cannibal version of the "Big Apple."

Not must we forget the majestic old hymns. Let us think only of their composition virtue without regard to the sentiment expressed in the words we sing. Who can deny that he is moved by such symphony!

It was my rare good fortune to see the Highlanders matching into the battle line in 1918. Killed "Ladies from Hell" strutting their stuff down that Belgian road and with pipes blasting out a challenge to the enemy! It has been said that one military leader took an orchestra down into the very trenches and that the example of these unarmed musicians and the occasional melody which could be heard between shells was an inspiration which turned the tide of battle. We have heard of ship's bands aboard a vessel sunk. It has been said that one of these unarmed musicians encouraged them to feats of valor; it has led them to God.

Sometimes the blare of the radio distracts us but if we choose carefully we can find a hundred excellent programs coming over the air waves. How strange and destitute would be a world without music and without song.—Ohio Penitentiary News.

Preventable

ACCIDENTS

Tabulated below is the number of children under 15 years of age, listed by cause and age group for the year 1938.

<table>
<thead>
<tr>
<th>Place of Accident</th>
<th>Age</th>
<th>Sex</th>
<th>No.</th>
<th>Total Fatal Accidents</th>
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</thead>
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<tr>
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<td></td>
<td></td>
<td>26 36</td>
</tr>
<tr>
<td>Poisoned in home</td>
<td></td>
<td></td>
<td>19  0  19</td>
<td></td>
</tr>
<tr>
<td>Absorption of poison</td>
<td>2  1  3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confined and other</td>
<td>87 49 132</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mechanical suffocation</td>
<td>47 1 48</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burns in home</td>
<td>15 11 26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other accidents in home</td>
<td>0  0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Fatal Accidents</td>
<td>174 62 236</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
COLLISION WITH PEDESTRIAN

111 11 17

COLLISION WITH RAILROAD

1 10 11

COLLISION WITH HOES DROVE

1 1 1

COLLISION WITH STATION CAR

0 1 4

COLLISION WITH FIXED OBJECT

0 5 8

Other fatal accidents with automobile

9 28 38

Total Fatal Accidents

68 192 260

TOTAL PUBLIC FATAL

ACCIDENTS

(Not associated with Motor Vehicle)

14 13 14

Bike-

2 0 1

All other vehicles-

1 5 6

Accidents with train transportation

0 2 2

Accidents with air transportation

0 2 2

Confusion and Burns

—in home

2 2 5

Drinking

50 65 85

Falls—not in home

4 16 20

Other fatal public accidents

41 39 70

Total Public Fatal Accidents

72 192 224

GRAND total in each age group

134 466 720

Ohio Health News

PUBLIC HEALTH COMMITTEE

The Public Health Committee met shortly after, with Mrs. Marshall and Mrs. Carnegle, who represented the Parent-Teachers' Associations. The discussion dealt (a) with our part in the work of the summer camps of children who will enter school in the autumn; and (b) with our assistance and cooperation in home education through the Schools and the Parent-Teachers' Associations.

Dr. Scafield, chairman, assured the Parent-Teachers' Association that we shall be happy to help in any way we can. Effort is now being directed to working out a plan of approach to the problems.

At another meeting, the Public Health Committee met jointly with the Public Health Committee of the Chamber of Commerce. Plans were discussed for establishing under the leadership of the Society a city-wide, continuous program for making our city and county a more beautiful and healthful place in which to live. The effort each year will probably be launched and the direction given at a day of conference on our problems, ending with a dinner and an address by a nationally known leader. This will be for the community much what our Postgraduate Day is for the physicians. Further announcements about this will be forthcoming soon.

NEWS ITEMS

by A. L. T.

Doctors Bachman, Baker, Heberding and Saul Tamarkin attended the recent meeting of the Cleveland Radiological Society in Cleveland. They are all members. Dr. Heberding was elected president for the coming year.

Dr. Joseph Baruch of Pittsburgh gave an interesting and instructive talk on Diathermy to the Staff of St. Elizabeth's Hospital at its regular monthly meeting in April. He stressed the high carbohydrate and low fat diet and showed by numerous examples and statistics the rationale and efficacy of this diet.

Dr. and Mrs. McConnell have returned from a wedding trip to Florida. Mrs. McConnell was Betty Samuel of Youngstown.

Dr. Poling made a nice recovery from his recent operation. He is convalescent and expects to be back on the job soon.

Dr. H. E. Chalker has returned from Chicago where he took a two weeks' special course in Surgery at Cook County Hospital.

Mayor

Youngstown College Library

A few years ago there was no such thing as a Youngstown College. Today its enrollment exceeds 1600 ambitious young men and women. The cost of attendance is about $225.00 per year. The poor young-ster with grit and brains has a chance. The curriculum is adapted to the needs of culture as well as vocation; it develops a well-rounded life. It does good work. The successful alumni prove that.

Youngstown College is a great community asset. It comes to all of us none for something to make its work still more effective: A better Library.

Let us show this organization called "Friends of Youngstown Library" that we are "Friends of Youngstown" by supporting this library as simply one important element of the many which go to make our community a mighty good place in which to live.

In Memoriam

James Arnt Walker, M. D.

1888—1938

Died April 5

In Memoriam

Wesley Courtenay Redd, M. D.

1889—1938

Died April 16

Dr. Patrick Represents Us

On Tuesday evening, April 10th, at the regular meeting of the Society, Dr. Patrick was elected to represent the Society on the Board of Trustees of the Associated Hospital Service, Incorporated.

The Board of Trustees will be composed of the following:

Representing St. Elizabeth's Hospital: Dr. Chas. D. Hauser; Youngstown Hospital: Dr. Wm. K. Alspoe; Mahoning County Medical Society: Dr. H. E. Patrick; the Hospital management for St. Elizabeth's: Mar. Jas. Hyland and Mr. Hugh Wickham; Youngstown Hospital: Mr. Al Cook and Mr. W. W. Stewart; representing business groups: Mr. Walter Bender and Mr. Frank W. Menesty.

This project begins under sound management. It offers to our members, as a group, hospitalization so inexpensive as to make it seem imperative for us not to avail ourselves of it.

1938
THE MAHONING COUNTY MEDICAL SOCIETY

In Memoriam

James Arnutt Walker, M.D.
1898—1938
Died April 5

In Memoriam

Wesley Curritulius REDD, M.D.
1883—1936
Died April 16

Dr. Patrick represents us

On Tuesday evening, April 19th, at the regular meeting of the society, Dr. Patrick was elected to represent the society on the Board of Trustees of the Associated Hospital Service, incorporated.

The Board of Trustees will be composed of the following: Rep. St. Elizabeth’s Hospital, Dr. Wm. J. Allsop; Mahoning County Medical Society, Dr. H. E. Patrick, the hospital management; for St. Elizabeth’s, Dr. Wm. K. Allop; Youngstown Hospital, Dr. H. E. Patrick; Youngstown College, Mr. W. R. Moyer, cut of this district.

The Board of Trustees will be composed of the following: Representing St. Elizabeth’s Hospital, Dr. Wm. J. Allsop; Mahoning County Medical Society, Dr. H. E. Patrick; the hospital management; for St. Elizabeth’s, Mr. Wm. K. Allop; Youngstown Hospital, Dr. H. E. Patrick; Youngstown College, Mr. W. R. Moyer.

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Let us show this organization called “Friends of Youngstown Library” that we are “Friends of Youngstown,” by supporting this library as simply an important element of the many which go to make our community a mighty good place in which to live.
The meeting was called to order at 9:00 p. m., April 19, 1938, by the President. Meeting was held at the Youngstown Club. There were about fifty members present. The President explained that this was the regular meeting night, but as the Postgraduate Day came at the latter end of the month, he hoped this could be a business meeting to dispense with some of the business affairs that would be brought to the attention of the Society as a whole.

The minutes of the last meeting were read and approved; there were no additions or corrections.

The applications of the following doctors were read: Dr. Wm. E. Major, transferring from an associate membership to regular membership; Dr. Ralph W. Bost, 1505 Market Street; Dr. A. J. Lano, 111 W. Commerce Street. These applications were turned to the censor for investigation.

The President then requested a report from the Council of the District, who reported on the activities of the county society; would not donate to this association, called the Golfers Association of the Sixth Council District. Ten cents per capita is to be turned over from the treasury of each county society for prizes for the golf matches.

It was moved and seconded that pen cents per capita be drawn from the treasury and forwarded to the Golf Committee of the Sixth Council District, for golf prizes in the Sixth Council District Golf Tournament. Motion passed.

The President then explained that one of our members has practiced medicine in our vicinity for fifty years and he felt that this was an outstanding attainment and that the Society should honor such an individual. This individual being Dr. H. E. Blott. Dr. Fury then moved that Dr. Blott be made an honorary member of the Mahoning County Medical Society for outstanding service to the community. Seconded by Dr. S. J. Shalter. Motion passed.

A testimonial dinner was then discussed by Dr. Fury; to be given for Dr. Blott. The Co-Chairman of the Entertainment Committee, Dr. L. G. Coe, said arrangements had not definitely been made but a testimonial dinner would be held in conjunction with the May meeting of the County Society, decided by the Society.

It was moved that the entertainment committee be instructed to hold a dinner in honor of Dr. Blott at the May meeting of the Mahoning County Medical Society. Motion seconded and passed.

The President then explained that the Veneral Clinic had been operating for six months and he felt there should be some report from the Health Department in regard to its operation.

Dr. Rea said that on May 2, 1938, the Veneral Clinic would be in operation six months. No patient was admitted to the Clinic who could pay; no patient was admitted who was on relief or any of the subsidies of the Government. The Clinic was operated on Tuesday and Friday of each week. He thanked the men who had cooperated to the fullest, and all the specialists who had been called and donated their services without question.

The President then explained that Postgraduate Day was "going over with a bang" and already over 100 out-of-town reservations had been received.

The President explained that one of the purposes of this meeting was the discussion, and if possible the approval of a Pre-Payment Plan for the Hospital of Mahoning County.

Dr. Allison, Chairman of the Hospital Committee, explained in detail the workings of this plan.
The meeting was called to order at 9:00 p.m. April 19, 1938, by the President. Meeting was held at the Youngstown Club. There were about fifty members present. The President explained that this was the regular meeting night, but as the Postgraduate Day came at the latter end of the month, he hoped this could be a business meeting to dispense with some of the business affairs that would be brought to the attention of the Society as a whole.

The minutes of the last meeting were read and approved; there were no additions or correction.

The applications of the following doctors were read: Dr. Wm. E. Hozier, transferring from an associate membership to regular membership; Dr. Ralph W. Bode, 1350 Merck Street; Dr. A. J. Lowe, 411 W. Commerce Street. These applications were turned to the census for investigation.

The President then requested a report from the Council of the District, who reported on the activities of a golf association and asked if the country society would not donate to this association, called the Golfers Association of the Sixth Councilor District. Ten cents per capita is to be turned over from the treasury of each county society for prizes for the golf matches.

It was moved and seconded that ten cents per capita be drawn from the treasury and forwarded to the Golf Committee of the Sixth Councilor District, for golf prizes in the Sixth Councilor District Golf Tournament. Motion passed.

The President then explained that one of our members has practiced medicine in our vicinity for fifty years and he felt that this was an outstanding achievement and that the Society should honor such an individual. This individual being Dr. H. E. Blatt. Dr. Fary then moved that Dr. Blatt be made an honorary member of the Mahoning County Medical Society for outstanding service to the community. Seconded by Dr. Bedee. Motion passed.

A testimonial dinner was then discussed by Dr. Fary, to be given by Dr. Bhatt. The Co-Chairman of the Entertainment Committee, Dr. L. C., said arrangements had not definitely been made but a testimonial dinner would be held in conjunction with the May meeting of the County Society, if ordered by the Society.

It was moved that the entertain­ment committee be instructed to hold a dinner in honor of Dr. Bhatt at the May meeting of the Mahoning County Medical Society. Motion seconded and passed.

The President then explained that the Venerable Clinic had been operating for six months and he felt there should be some report from the Health Department in regard to its operation.

Dr. Ryall said that on May 2, 1938, the Venerable Clinic would be in operation six months. No patient was admitted to the Clinic who could pay; no patient was admitted who was on relief or any of the subsidiaries of the Government. The Clinic was operated on Tuesday and Friday of each week. He thanked the men who had cooperated to the fullest and all the specialties who had been called and donated their services without question.

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The President explained that one of the purposes of this meeting was the discussion, and if possible the approval, of a Pre-Payment Plan for the hospitals of Mahoning County.

Dr. Albom, Chairman of the Hospital Committee, explained in detail the workings of this plan, reading...
most of the constitution and by-laws with the contract in full. There were some explanations to be made and many questions were asked about certain phases of the contract. Dr. Allsop either explained in detail or said that he would have to have a better understanding and would take the matter up with the Board.

It was moved and seconded that the plan as given by Dr. Allsop for Pre-Payment Hospitalization be approved by the Mahoning County Medical Society. Motion passed. Vote was 46 aye and 1 nay.

Tellers: Dr. J. C. Hall, Dr. J. Rosen, Dr. Andrew Miletis, Dr. G. A. Parilla.

As Dr. Allsop had already explained, there was a member to represent the Mahoning County Medical Society on the Board of Directors of this Pre-Payment Plan Association. Therefore, a ballot was taken and the two highest nominees were Dr. Patrick and Dr. McNamara.

On the election ballot, Dr. H. E. Patrick was elected.

Meeting was adjourned at 11:15 P.M.

BOYS GO TO TOWN

The following committees deserve the Society's deep gratitude for their efficient work in putting over an unusually successful Postgraduate Day:

Postgraduate Day: James B. Birch, Chairman
Alfred J. Brandt
Joseph E. Nagle
Charles S. Wainock
Louis S. Ditchman
J. F. Monroe
John R. Buchanan

As Dr. Allsop had already explained, there was a member to represent the Mahoning County Medical Society on the Board of Directors of this Pre-Payment Plan Association. Therefore, a ballot was taken and the two highest nominees were Dr. Patrick and Dr. McNamara.

On the election ballot, Dr. H. E. Patrick was elected.

Meeting was adjourned at 11:15 P.M.

WM. M. SPIPP, Pro-Tem.

Dr. Evans' Committee Rings Bell

After several meetings with Judge Herman B. Kaufman, Sick Room Supplies
F. A. MORRIS and Congestion

Representative of the County Commissioner of Health, recommended by Dr. Patton; a dentist to be recommended by the President of the Mahoning County Medical Society, recommended by the President of the Society.

The work of this Advisory Committee will consist of those matters having to do with the medical care of those who benefit under the "A. D. C." Law.

It is most pleasing to find such a fine spirit of cooperation as that shown by Judge Beckenbach and Mrs. Wendling. This is the relationship with our public officials which will lead to better public service.
TENTH COUNCILLOR DISTRICT MEETING of the MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA TO BE HELD AT BRODHEAD HOTEL, BEAVER FALLS, PA.

Thursday, May the 12th, 1938
10:00 O'Clock A. M. (D. S. T.)

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BUCHMAN'S ARCH SUPPORTS 9-11 Bus Arcade

Dr. Evans' Committee Rings Bell After several meetings with Judge Herman B. Kaufman and his Administration of Aid to Dependent Children, Mrs. Wendling, Dr. Evans and the Sub-Committee on Public Relations have completed plans to set up a Medical Advisory Committee, to operate in that work. The Committee will be appointed by Judge Beekenbach. The members of this Advisory Committee will consist of a representative of the County Commissioner of Health, recommended by Dr. Patton; a dentist to be recommended by the President of the Corryton-Palmer Dental Society; and three representatives of the Mahoning County Medical Society, recommended by the President of the Society. The work of this Advisory Committee will consist of those matters having to do with the medical care of those who benefit under the "A. D. C." Law.

BOYS GO TO TOWN The following committees deserve the Society's deep gratitude for their efficient work in putting over an unusually successful Postgraduate Day:


Publicity: Louis S. Delischman, Chairman Samuel H. Klarman W. C. Aronson Norman B. Kastner

Of equal importance, also, is the loyal support of all the members of the Society, and of our visiting friends.

Fiftieth Wedding Anniversary Dr. and Mrs. H. E. Blott are having open house May 15, in observance of their 50th Wedding Anniversary, and they will receive from 3 to 5 p. m. and from 7 to 9 p. m.
ANOTHER FEATHER IN OUR HAT

1938 Postgraduate Day is now a thing of the past; but it is only fitting that we recount some of the scenes behind the scenes. Your naying reporter mingling with the crowd heard comments like these: "A great day!"; "Better than any meeting I ever attended."

Such comments are a great satisfaction and make all the time and effort put forth by the committees worth while.

To us the biggest thrill came from the smiles of satisfaction and pride shown by every member of the Mahoning County Medical Society. Each was interested in the scenes of the meeting and each was sauntering Jim Birch, John Null, Doc Benchman and their committees: 'Well Done.'

Statistically there were 487 physicians registered representing 87 different cities and towns covering a wide area.

With these few remarks, another chapter in postgraduate education in Mahoning County is closed. The society’s activities move forward and our time and attention must be given to the most gigantic, the most stupendous task ever at hand —a matter of the Health of the Nation. That is the problem of the meeting.

The essential features of these meetings will be to determine the town championship of the counties and individual championship of the district. Individual handicaps will be established so that every golfer will have a good chance to participate in the distribution of the state serviceable and useful prizes. The teams will be determined at each meeting by the five lowest gross scores from each county. This makes every one eligible for the team which may vary from year to year. The teams and champion ship will be determined by the season totals of the five low scores for each of the four meetings.

Each meeting will consist of golf in the afternoon and dinner in the evening, one fee to cover all expenses. It is planned that at the last meeting of the year the district championship will be determined by the lowest gross score provided the contestant has registered at least two of the previous meetings.


Series of Summer Golf Meets

A series of monthly golf meetings have been planned for this summer in order to promote a more social and good fellowship with the doctors in the 6th Council District. These meets to be held the last Wednesday of each summer month, namely June, July, August and September, in the four different counties: Summit, Stark, Mahoning and Wayne. These meets to be held as follows:

June 29, 1938, Summit County, Akron.
July 27, 1918, Wayne County, Wooster.
Aug. 11, 1938, Mahoning County, Youngstown.
Sept. 28, 1938, Stark County, Canton.

The essential features of these meetings will be to determine the town championship of the counties and individual championship of the district. Individual handicaps will be established so that every golfer will have a good chance to participate in the distribution of the state serviceable and useful prizes. The teams will be determined at each meeting by the five lowest gross scores from each county. This makes every one eligible for the team which may vary from year to year. The teams and championship will be determined by the season totals of the five low scores for each of the four meetings.

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THE MEDICAL CRIER

A. Pope of Ridgway, News and Views from the Medical Field

- It used to be quite the thing to go to Vienna for Postgraduate study. Now that many of those teachers are becoming refugees and exiles it might be a good idea for them to come here for a tour of medical lectures. How about a group from Berea for our next Postgraduate Day?

We note that the Toledo Academy of Medicine during April presented a series of ten lectures on Diseases of the Heart by Wilhelm Dressler of Vienna, Austria. Fee for the course, five dollars.

- President Roosevelt thought it a pity that the District of Columbia Medical Association opposed the group health association financed by the H. O. L. C. Yes, a pity for the Medical Association. And the old Crin thinks it a pity that the President thought it a pity.

- The motion picture as a medium for medical teaching is not being used nearly as much as it should be. When four hundred doctors can sit comfortably watching an operation, everyone having an unobstructed view clear to the depths of the open abdomen, with each step explained; there is no book, no medical magazine, no seat in the cadaver amphitheatre which gives the same advantage. Four doctors viewing the same operation in the clinic would have a good view of the assistant’s back only. Moreover, the patient before operation, the operation itself, the gross and microscopic pathology in the tissues removed and the patient recovered after operation can all be shown in less than one hour—a process actually taking weeks of time. Dr. Lee’s motion picture on Carcinoma is a masterpiece, as is Lahey’s on Resection of Rectal Carcinoma. At the A. M. A. session late last June many of us spent hours viewing the motion pictures in the Mayo exhibit.

- Many of these films are available to Medical Societies without cost, except transportation. The proper time and place for showing them is a matter to be considered. The personal appearance of some distinguished medical teachers is such an ingrained part of our Society program and such a strong drawing card in promoting attendance at meetings that to dispense with it is unthinkable. Yet, we could have both.

Meetings are usually over by ten thirty, and many members linger afterward for social pursuits. The projection apparatus and operator are usually on the job and to run a film would take only a little extra time after the speaker’s paper and its discussion are finished. Such an added attraction might bring out a larger attendance at meetings and would prove a welcome addition to our educational program.

- We were agreeably surprised the other evening to hear the familiar voice of Dr. Aldricher over the radio on the “Man on the Street” program. The old Doc spoke right up with his usual assurance and answered the announcer’s questions. We are still trying to figure out that one about the flying time between New York and Chicago. But how can he claim Scotch ancestry with a name like that is a little too much. We think he was just showing the old Dutch thrift.

- The best one we heard this month was about the lady who named the puppy Paderesky because he was the paint dog she ever saw!

CONGRATULATIONS

Congratulations are in order from the Mahoning Drug Club to Members of the Mahoning County Medical Society for their successful and interesting Postgraduate Assemblies. The club, much into the drug business, watches the growth of the Society and our thirty-five members wish to thank the profession for their hearty cooperation.
ANOTHER FEATHER IN OUR HAT
1938 Postgraduate Day is now a thing of the past; but it is only fitting that we recount some of the scenes behind the scenes. Your evening reception mingling with the crowd heard comments like these: "A great day"; "Better thin our meeting! I even attended"; "I wonder how they do it." Such comments are a great satisfaction and make all the time and effort put forth by the committees worth while.

To me the biggest thrill came from the smiles of satisfaction and pride shown by every member of the Mahoning County Medical Society. Each was interested in the success of the meeting and each was saying to Jim Birch, John Noll, Lou Detchman and their committees: "Well Done."

Statistically there were 487 physicians registered representing 87 different cities and towns covering a wide area.

With these few remarks, another chapter in postgraduate education in Mahoning County is closed. The society's activities move forward and our time and attention must be given to making these as successful as the postgraduate meeting. The committees have learned much of value to aid in making the next meeting the most gigantic, the most stupendous and the most colossal ever. We place another feather in our hat and march forward prouder than ever.

SAMUEL J. KATZMAN, M.D.

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The essential features of these meetings will be to determine the team championship of the counties and individual championship of the district. Individual handicaps will be established so that every golfer will have a good chance to participate in the distribution of the many superior and useful prizes. The teams will be determined at each meeting by the five lowest gross scores from each county. This makes every one eligible for the team which may vary from meet to meet. The team championship will be determined by the season total of the five low scores for each of the four meetings.

Each meeting will consist of golf in the afternoon and dinner in the evening, one fee to cover all expenses. It is planned that at the last meeting of the year the district championship will be determined by the lowest gross score provided the consistent lists registered at least two of the previous meetings.

Chairman 6th Councilor District:
C. D. Underwood—Stark, Navarre.
A. C. Smith—Wayne, Wooster.
D. C. Benson—Summit, Akron.

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THE MEDICAL CRIER
A Page of Sidelines, News and Views from the Medical Field

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• The motion picture as a medium for medical teaching is not being used to the extent that many doctors can sit comfortably and give all their time and attention to making the next meeting a process actually taking weeks. DeLee's motion picture on the Mahoning Drug Club to America is finished. Such an added program. The old Doc spoke right like that is a little too much. We need more attraction might bring out a larger attendance at meetings and would prove a welcome addition to our educational program.

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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.

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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.

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THE use of cow's milk, water and carbohydrate mixtures represents the one system of infant feeding that consistently, for three decades, has received universal pediatric recognition. No carbohydrate employed in this system of infant feeding enjoys so rich and enduring a background of authoritative clinical experience as Dextri-Maltose.

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3:PYRIDINE CARBOXYLIC ACID
(Nicotinic Acid)
TABLETS
Now Available to the Medical Profession

Physicians may now obtain SMACo 3:Pyridine Carboxylic Acid (Nicotinic Acid) for clinical experimentation in tablet form for oral administration. Two potencies are available: 100 milligrams per tablet, or 20 milligrams per tablet.

While making no therapeutic claims, we offer the following references to the literature for the attention of the physician:


3. "Therapeutic Administration of Nicotinic Acid in Human Pellagra During Health and Disease"—Smith, Cooper, and Blankenhorn. (Read before the Central Society for Clinical Research, Chicago—Nov. 1937.) To be published.


SMACo 3:Pyridine Carboxylic Acid Tablets, of both potencies, are scored permitting a wide flexibility in dosage. Tablets may be broken in two parts at the score, enabling the physician to administer any multiple of 10 milligrams as a single dose.

SMACo 3:Pyridine Carboxylic Acid (Nicotinic Acid) is available in tablet form in the following packages:

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 One-hundred-milligram tablets</td>
<td>$0.73</td>
</tr>
<tr>
<td>50 Twenty-milligram tablets</td>
<td>$0.71</td>
</tr>
<tr>
<td>300 Twenty-milligram tablets</td>
<td>$0.75</td>
</tr>
</tbody>
</table>

Also available in crystals and ampoules.

You may have your pharmacist order any of the above packages in the regular way, or you may order Clinical Trial Packages as follows direct from us: Address Dept. 13-58.

10. Bottles of 20 one-hundred-milligram tablets SMACo 7331 each...........$1
11. Bottles of 50 twenty-milligram tablets SMACo 7311 each............$1

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"Our course must be facts first, then policies based upon these facts, later."
(From Inaugural Address of President E. J. Harst)

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