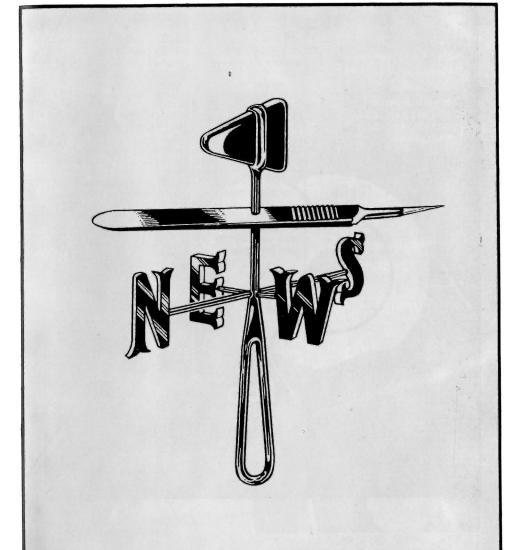
BULLETIN

of the MAHONING COUNTY MEDICAL SOCIETY

Volume LV

FEBRUARY, 1985

Number 2



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From the Desk of the President



THE PHANTOM MEMBERSHIP

During the last meeting of the Mahoning County Medical Society, as I stood before our membership, I recognized many faces that I have seen a number of times since I became a member of the Society in 1965. I also noticed very few "new faces" and missed others that used to attend, but no longer do.

I am sure that every new president of the Society goes through this type of observation and wonders why they do not come to the meetings. I, too, have wondered and hope that sharing my thoughts

may induce some of them to return.

Perhaps some feel that organized medicine, and consequently the Mahoning County Medical Society, is not really representing them and their needs and does not take into account their points of view and, therefore, see no advantage in participating in the doings of the Society.

Some others might feel so secure in the castles of their offices and the particular types of practice that they have promoted for themselves, that they feel financially secure and consequently they view the present situation of our profession with disdain as if they were untouchable by what is going on. Others see the efforts of the Medical Society as futile and, therefore, unworthy to participate in them.

Have some of us become so identified with extreme conservatism and fierce independence, that the younger members feel incompatible with us and unable to sympathize with what they feel is a defeatist

and obstructionist philosophy?

Have some of us become so critical of the others at every turn, that we function in their absence, as a phantom limb, only as a source of irritation but impotent to move the body because only the echoes of our discontent can reach the nervous system of the Society, forgetting that a phantom limb produces no work. Is our Society unable to function because we have become gradually a small body with a large phantom membership?

I challenge you, our very large silent majority, particularly those who have joined the Society in the last two decades, to attend our meetings, to learn that prudence and steady purpose are virtues and

not handicaps.

I challenge you to come and dare bring your ideas to our meetings. Infuse us with new blood. Let us mix the experience and travails of those who have preceded us with the vigor, enthusiasm and, yes, even

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BULLETIN of the Mahoning County Medical Society

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FEBRUARY, 1985



Number 2

The opinions and conclusions expressed herein do not necessarily represent the views of the Editorial staff nor the official views of the Mahoning County Medical Society.

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Benjamin Hayek, M.D.
EDITOR EMERITUS

James L. Fisher, M.D.,
MANAGING EDITOR

MANAGING EDITOR
Robert B. Blake

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Robert R. Fisher, M.D. John C. Melnick, M.D. James A. Lambert, M.D. Jack Schreiber, M.D. Richard W. Juvancic, M.D.

Editorial:

THE PHYSICIAN AND THE DYING PATIENT

It has long been our mission to comfort suffering, but we frequently fail the dying patient because it requires much time and some discomfort. The tendency is to abandon the dying patient to his family and friends, feeling we have no definite role in his dealings at the edge of life. It might be profitable for us to occasionally view life from the far side - - the side of death - - in order to gain a deeper understanding of the dying patient.

This individual has very important and difficult decisions to make. He now must assess and use values he's never had to call on before. He has been told he is going to die soon; not immediately, not tomorrow, but soon; and it's time for some of the most profound thinking he will ever do. Moral reflection - - the assessment of values used in this deliberation - - becomes a daily ritual for this patient. Values and principles may change importance when the context in which they are applied changes. Values which have served this patient all through life now seem useless and without consequence in the face of death.

Terminal illness and, invariably, death are things we all face. Death may be sudden, but many of us will experience some sort of illness prior to death. Hence, it is not a question of "IF" for any of us - - but rather how and when. We may come to the end of our earthly existence in any of several ways. In any case, most of us will succumb to cancer, heart, or vascular disease. Despite our reluctance to think of our own death, we, all of us, are in no uncertain terms terminal. The only difference between us and this patient is that this individual has a rough notion of his temporal demise. He has a notion of when - - not exactly - - but only that his death would be soon. Unfortunately, we haven't the vaguest notion of when we will die. It may be sooner than our patient. The impact of this notion is better appreciated when we note the distinction between the death of someone we love and the death of one of our patients. The objective of this discussion may seem thus far elusive - - just as the contemplation of our death is elusive. I will reduce it to sublime simplicity.

The dying offer you and me one great gift: An invaluable gift that most of us refuse but all of us need. The dying patient can teach us how to (Continued on Page 36)

Editorial:

face that inevitable end of our own temporal existence. As children, we took our parents hands and began our first steps on that life-long journey to death; those *first* steps were supported and guided by our parents; to death, we remain children. We have the opportunity to take the hand of that dying patient and allow him to teach us how to take our *last* and final steps. Each of us will face our diagnosis differently. Each one will review the values that brought him to his present state. We have the sublime opportunity to culminate that journey and sense those values with each person we touch. We've learned only one way to walk, and it serves us well: We may learn many ways to die - - as we must die. In so doing, as your experience grows, not only have you been given a gift to help you at your death, but you may now share more and more experience - - and help others in their final moments.

We have a very technological approach to medicine. We can do just about anything up to and including the deferment or delay of physiological death. Because of worsening economic constraints and sheer size, we've become obsessed with efficiency. Furthermore, in this climate of industrialized medicine, we are told only the efficient will survive - - we are not told 'only

at the expense of human needs'.

What are the needs of a dying patient? Foremost in our minds of course is pain. But we must remember that the dying can suffer more than one kind of pain: Aside from physical pain, there is the pain of despair, the pain of decision-making. There is no principle that states we should not suffer. Suffering and pain are part of life. Of course, pain is to be charitably minimized, but that also has its consequences in distortion of the sensorium. We must remind ourselves that some patients would not want that trade-off, and

if it is not their prime objective, then neither should it be ours.

Being honest in a charitable and considerate manner is also essential in order to maintain patient dignity. Presentation of false hopes of survival in the face of certain treatments (chemotherapy, surgery, etc.) may be a serious injustice: Honesty must be temperd with timeliness and gentleness - but nonetheless honest. Only in this manner can the patient make a legitimate decision concerning the final days of his life. We cannot be responsible for deception at this point in an individual's life. It is not our duty to convince a patient of what therapy he might need, especially when personal gain might be a subconscious ulterior motive. It is our duty to educate our patients honestly concerning the benefits of any treatment, allowing them to make an informed decision.

Probably the worst anquish suffered by a dying patient is despair and hopelessness. These feelings are not usually based on temporal notions, but more on restrospective moral assessment. It is in *this* time of anguish that we

may best serve as physicians.

Let me close with this; if there is one thing we can accomplish in our lives of service, let it be helping someone come to terms with death. Let us take the journey with these people instead of avoiding them, so that we may know the road well for our own journey. Benjamin M. Hayek, M.D.

From the Desk of the President (Continued)

the recklessness of youth. Come, help us prove that unity of purpose can only strengthen us and help us save the heritage of over two thousand years of tradition and excellence, which dictate that the interests and welfare of our patients always come first.

Come, let us reason together. Not to barricade ourselves against the world, but to show that the basic human values in which we believe can be preserved, in spite of the many extraneous forces that attempt to prove to

the contrary.

May we see you at our next meeting?

Juan A. Ruiz, M.D. FEBRUARY



GOOD HUMOR prevailed as Dr. Juan A. Ruiz (left) received the gavel from Dr. Glenn Baumblatt, indicating the change of command for the Society at the January 15 meeting.

SOCIETY HEARS WINE MAKER

For the second year in a row, the annual Installation Dinner of the Mahoning County Medical Society had a wine-tasting as its program, along with the installing of officers for 1985, at the January 15th meeting.

Dr. Thomas W. Wykoff of Cleveland Heights, a practicing otolarnygologist and maker of wines, presented three of his Cedar Hill wines for the

palates of those present at the new Antone's in McKay Court.

Dr. Wykoff, assisted by his business manager Joanne Held, presented an appetizer wine to go with some cheeses prior to the dinner. During the dinner, a delightful Chardonnay white and the Cedar Hill Orchestra Red were poured. A slide show depicting the processes involved in making wine was presented following dinner.

Dr. Glenn Baumblatt, outgoing president, opened the meeting and gave the oath of office to the incoming members of the Council and officers. He presented a gavel to Dr. Juan Ruiz to indicate his assumption of the office of president. Dr. Ruiz, in turn, presented a special plaque and pin to Dr. Baumblatt to denote the Society's appreciation of his time as president. Dr. Baumblatt will remain on Council as immediate past president.

The program was under the direction of Dr. Richard Memo, who intro-

duced the speaker.

The invocation was given by Rev. Richard Belsan of Pilgrim Collegiate Church.

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PROCEEDINGS OF COUNCIL Jan. 8. 1985

The regular meeting of the Council of the Mahoning County Medical Society was held Tuesday, Jan. 8, 1985 at the Youngstown Club.

The meeting was called to order at 7:35 p.m. by Dr. Ruiz. The minutes

of the December meeting, having been read, were approved.

The treasurer's report included a list of four members who were dropped from membership for non-payment of 1984 dues. The report listed total membership for 1984 and membership to date for 1985. A report of total income for 1984 was also part of the treasurer's report.

The following applications for membership were presented:

ACTIVE: Norton I. German, M.D. ASSOCIATE:

Robert G. Spratt, M.D. Bimal Dayal, M.D. Kimbroe J. Carter, M.D. Baljeet Singh, M.D. Madhavarao S. Dasu, M.D. Thomas M. Robb, D.O.

The applications were approved. The applicants will become members of the Mahoning County Medical Society in the voted category 15 days after the printing of the names in the minutes of the January meeting that are mailed to all members, unless an objection is filed in writing with the executive director before that time.

Communications included:

A response from OSMA regarding the endorsement of Dr. Sudimack for secretary-treasurer of OSMA; an OSMA communication regarding reservations for the May meeting of the House of Delegates; notice of the OMPAC luncheon and the party to honor Hart Page, the outgoing OSMA exec; letter from Dr. Robert Katz of Metropolitan Insurance Company offering to speak to the Society regarding the health care plan at GM.

The Council voted to extend an invitation to Dr. Katz to appear at the March meeting of the Society as part of a program on HMO, PPO and

IPA health care systems.

Sixth District OSMA Councilor Dr. Anderson reported that Dr. Sudimack's candidacy has been approved by the OSMA Council. He noted OSMA is still in the process of trying to determine the legality of Advance Plan participation as a requisite to participating in the PPO. Dr. Anderson noted the presidents of the four county societies in the sixth district would meet Jan. 14 in Canton with Herb Gillen of OSMA and the district councilor to formulate some strategy for the coming year. He noted any resolutions for presentation to the House of Delegates in May must be sent to OSMA head-quarters no later than March 18. He stated they would have to be in his hands before Jan. 30 in order to be considered at the Sixth District meeting in Alliance on Jan. 30.

Dr. Sovik, a member of the board of the new Health Systems Agency here, reported on its meeting. He noted the HSA will be funded from February through October, at least. He stated the unit is headed by Chester Amedia as president, with Dr. Joseph Sudimack as treasurer. Dr. Sovik also took note of the fact that the merger of Blue Cross and Blue Shield into one unit

locally has been approved by the courts.

Dr. Sovik reported a new draft of legislation being sponsored by the Ohio Nurses Association is expected to be presented at a meeting to be held

Jan. 30 in Columbus.

Dr. Ruiz took note of the December recommendation that a committee be formed to select a non-medical person in Mahoning County to receive the accolade of "Citizen of the Year". He appointed Dr. John C. Melnick to head the committee and Dr. Melnick is to select the members of the committee. Dr. H. S. Wang was Dr. Melnick's first committee selection.

A motion was made, seconded and passed to approve a resolution naming the Dollar Savings and Trust Company as depository of checking account funds for the Society.

A motion was made, seconded and passed to pay the dinner expenses

for delegates and alternates who attend the Jan. 30 meeting in Canton.

It was announced the next meeting of the Society is Jan. 15, 1985 (Tuesday evening) at Antone's in McKay Court, just off Rt. 224, with installation of officers and a wine tasting as the program. Dr. Thomas W. Wykoff of Cleveland, a practicing Otolaryngologist and owner of the Cedar Hill Winery, will be the guest speaker.

Dr. Jacobson informed the Council that he got an apparently bad batch of Xylocaine and cautioned the other physicians to be cautious. He noted the

batch was 2% in a 50cc container with a lot number 306035.

The meeting closed with a spirited discussion concerning the image of the physician and what can be done to make the public aware of the differences between private practice and the other systems of health care that are beginning to proliferate in the area. It was noted that at the patient level in the physicians' offices is where the most impact can be made.

The meeting adjourned at 8:46 p.m.

Robert B. Blake Executive Director

ERHARD WELTMAN, M.D. 1899 - 1985

The Mahoning County Medical Society and its members note with great sorrow the passing of Dr. Erhard Weltman. He was an important part of the local medical scene for 43 years, retiring from active family practice in 1982.

Dr. Weltman received his training in Germany, coming to the United States in the late thirties, a victim of Nazi persecution. He had spent seven years in post-graduate work in Germany where he rubbed elbows with some of the famous historical figures of medicine. He brought with him to Youngstown a wife, a daughter, a keen mind and well-trained intellect, a thorough understanding of medical ethics and a great deal of idealism. He conducted his office practice in the Home Savings and Loan Building and was affiliated with St. Elizabeth Hospital.

Although humble in his own self-assessment, Dr. Weltman was fiercely proud of being part of medicine. Physically small, he had a gentle manner that endeared him to his colleagues and patients. He was known for his rapid walk and quiet sense of humor. He was loved by his patients who came from all strata of society. His regard for the profession and its practitioners was profound, and he considered medicine the acme of human achievements. He was idealistic in his professional life and expected the same from others. His scientific curiosity remained with him throughout his career; he was still reading medical journals and attending meetings in retirement.

He will be missed in the years ahead. His mature, wise counsel cannot be readily replaced. Of great significance, medicine can ill afford his loss. Profound changes in our profession are occurring at a terrifying rate. Dr. Weltman understood the immutable ethics and philosophy of medicine as enuciated by Aristotle and Maimonides. He was able to practice successfully in modern society while adhering to these ancient principles. His example may serve as a guide as we struggle to preserve the ideals that were so important to him.

Kurt J. Wegner, M.D.

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Feb. 26

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Feb. 28
J. S. Goldcamp

Mar. 1

L. M. Farolan N. R. Sarma

Mar. 3 F. C. Lin

Mar. 4 H. L. Queen

Mar. 5

C. C. Albarran **Mar. 6**

D. Chung N. I. German Mar. 8

P. B. Guttikonda M. D. Miller

Mar. 9

A. N. Pannozzo

Mar. 10 R. A. Brown

Mar. 12 S. F. Petraglia

Mar. 14

J. R. Madison

Mar. 15 N. Afrooz J. Mersol

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MORE THAN BARGAINED FOR

Non-physician health care providers who are edging into the traditional medical practice area are finding more than they bargained for, i.e., professional liability. *Medical Economics* reports than an Idaho naturopath has been found guilty of involuntary manslaughter in connection with the death of a patient; and, a group of Seattle midwives recently agreed to a \$725,000 settlement in a wrongful death suit.

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Pappas	Melnick	Gaylord
Saint-Julien	Resch	Hong
Renner	Sinsenheimer	Jung
Athletic Injury	Child Learning	Ĺakhani
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Gonzalez	Klahr	Drug Abuse
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Jaffer	Mahar, Jr.	Galose— <i>Chairman</i> Gelbman
ĹaManna, Jr.	Mirvis	Nalluri
Panozzo	Nigam Sethi, V.	Prochnow
Raghavan	White	Renner
Werning	Civil Defense & Disaster	Sethi, V.
Wieneke		Saint-Julien
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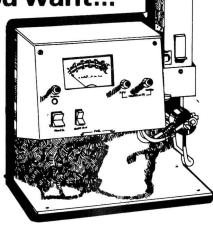
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From the Bulletin

FIFTY YEARS AGO — FEBRUARY, 1935

The big subject for discussion that month was the introduction of a new law into the State Legislature by the Ohio Hospital Association. This law proposed to take the care of the indigent sick out of the hands of the politicians and place it under the control of the Health Department of each district. It would allow the indigent patient a free choice of his physician, both in and out of the hospital. The local Board of Health would pay the physician a "reasonable fee" for his services. It also provided that all Health Commissioners be physicians in good standing in the community. The legislation was intended to replace the Federal Emergency Relief Act which was soon to expire. President J. L. Fisher and Legislative Committee Chairman O. J. Walker urged members to write to their state senators and representatives to urge the passage of this new bill.

H. E. McClenahan, M.D. reported that 1,047 doses of Diptheria Toxoid were given out by the Diptheria Immunization Program. Of these 687 were

indigent cases and 360 were private.

Dr. Herman Kling reported the rapid rise in cases of Scarlet Fever, Measles, and Chicken Pox in December. "Why can we not protect the child against Pneumonia, as we are doing with Diptheria, by vaccine - - -?" he complained. He pointed out that since the advent of Smallpox vaccination, "not one case of Smallpox was reported in Youngstown in 1934."

FORTY YEARS AGO — FEBRUARY, 1945

Dr. Gabriel Kramer resigned as Pathologist for the Youngstown Hospital and the Executive Committee chose Dr. Horace K. Giffen to succeed him.

Dr. Giffen came from Lakewood Hospital.

St. Elizabeth Hospital reported having treated a total number of 11,985 patients in 1944, an increase of 510 patients over the 1943 total. Of these 1570 were newborn babies. The average patients per day was 300, and the average length of stay was 9.2 days.

Captain T. J. Tims wrote from Paris, France, that they were having continual rains and flooding. He had spent his third Christmas away from home. Major John Goldcamp wrote about the rain and mud in the Phillipines. Lt. Comdr. J. L. Fisher was aboard the U.S.S. Gage in the Pacific. He played the organ for all three denominations for Christmas services. Lt. Comdr. Wm. H. Evans was home on leave before going to his new assignment in Norfolk, Virginia.

Herman Wolf Weinberg, M.D. passed away December 31, 1944. New active member was J. H. Cronick and new associate member was Dr. J. F. Stotler.

THIRTY YEARS AGO — FEBRUARY, 1955

New President that year was Dr. Ivan C. Smith. He initiated what has become an annual event, the Medical-Legal banquet. Robert Tornello was the new Editor, and he dedicated his column to the celebration of Dr. Albert Sweitzer's fiftieth birthday.

Dr. Frank Kravek was elected Secretary of the Ohio Chapter of the American College of Chest Physicians. Dr. J. L. Fisher was elected "G. P. of the Year" by the Mahoning Academy of General Practice. Dr. John Heberding received a pin, honoring him for his fifty years in the practice of medicine.

New members that month were Dr. Wayne Agey and Dr. Myron Hanysh.

TWENTY YEARS AGO — FEBRUARY, 1965

(Bulletin not available)

TEN YEARS AGO — FEBRUARY, 1975

A combined meeting of the Mahoning and Trumbull County Medical Societies was held February 26 at the Squaw Creek Country Club. More than one hundred physicians attended. Featured speakers were Dr. Bert Hecker and Dr. Ed Pichette. Dr. Rashid Abdu presided over the meeting, with Dr. Ed. Westbrook as special guest.

Dr. Wm. O. Roberts gave the annual Bunn Memorial Lecture on February 20 at St. Elizabeth Hospital School of Nursing. His topic was Coronary Arteries in Ischemic Heart Disease.

WKBN TV showed an outstanding film on environmental pollution on "Sunday, 10:30" program hosted by Merv Jones and Norm Berger. Dr. John Melnick was the guest expert and provided medical statistics on the problem with special emphasis on Mill Creek Park stream and lake pollution.

Robert R. Fisher, M.D.



ITEMS

From the Exec's Desk

ROBERT B. BLAKE, Executive Director

Our meeting in March is going to take a head-on look at the Alphabet Soup that is spilling into the practice of medicine. There are HMO's, PPO's, IPA's etc. and each of them impacts some way on the private practice of medicine. We will have an expert on Alphabets at the meeting, together with a rep from Metropolitan Insurance and (we hope) someone from the Blues. If you ever cared about the practice of medicine, this is the meeting to attend.

The annual House of Delegates meeting of the Ohio State Medical Association is set for May 17 to May 22 in Columbus. The headquarters hotel is the downtown Hyatt Regency. Attendance at the meeting is not limited to delegates, alternate delegates and officers. Any member of OSMA can attend and sit in on the reference committee meetings as well as the sessions of the House. If you plan to attend, tell us at the Society office and we'll take care of hotel reservations for you. Every physician should attend at least one House of Delegates session. You would really see your dues at work.

Any member of the Society can submit a resolution to the House of Delegates as an individual. There is a certain format that must be followed and members wishing to submit a resolution can avail themselves of the services of the Society office to make certain the resolution is presentable.

One of the good things about medicine that was published recently was the interview of our new president, Dr. Juan Ruiz, by *Vindicator* reporter Pete Milliken. That was a nice way to start the new year.

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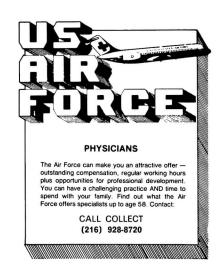
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