

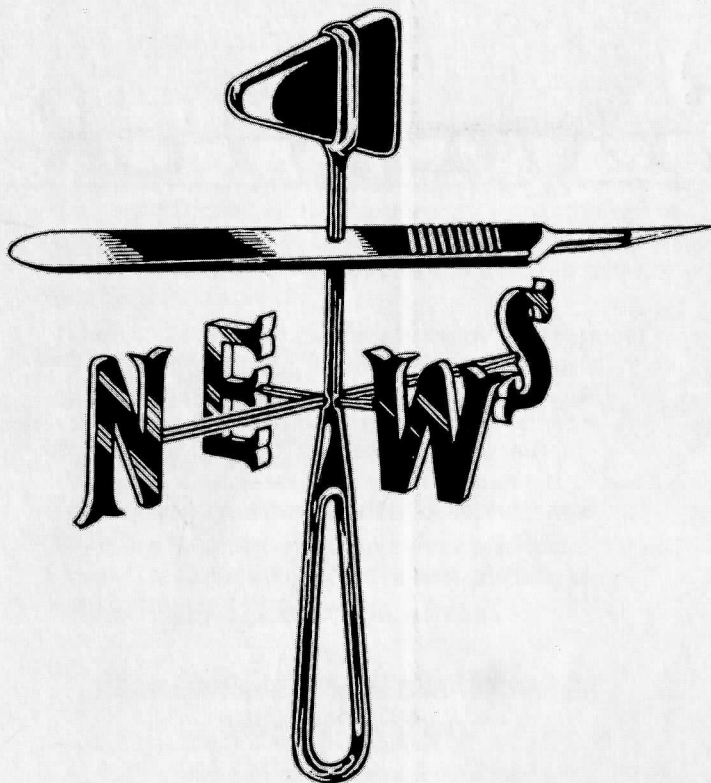
# BULLETIN

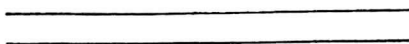
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MAHONING COUNTY  
MEDICAL SOCIETY

*Volume LVIII*

SEPTEMBER, 1988

*Number 6*





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NEW YORK TIMES



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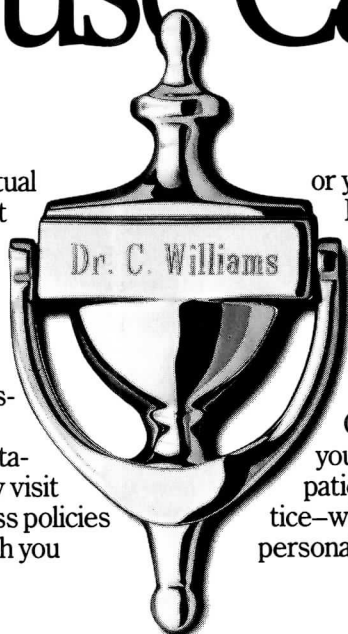
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 R.A. MEMO  
 S.K. MISHR

**1988 - MAHONING COUNTY MEDICAL SOCIETY MEETINGS - 1988**

<b>Tuesday</b> Jan. 23	<b>Tuesday</b> Mar. 15	<b>Tuesday</b> May 17	<b>Tuesday</b> Sept. 20	<b>Tuesday</b> Nov. 15	<b>Tuesday</b> Dec. 20
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## *From the Desk of the President*



### — UNITED WAY —

In April, as President of this organization I was approached by the United Way officials to discuss ways to improve professional groups' contribution to the United Way of the Youngstown area. The importance of United Way is most evident. There are three areas, however, that I feel need to be emphasized: 1. All money is spent locally; 2. The United Way is the most efficient charity organization of its size (only 10% is spent on administration and campaign expenses); and 3. You and I are direct beneficiaries of United Way.

For instance, when a patient needs a blood transfusion, the Red Cross by its screening of donors, collection, processing and distribution of the blood, makes a surgeon's job so much easier. A high percentage of the Red Cross budget is derived from United Way. When a primary care physician discharges a patient from the hospital and visiting nurse service or meals on wheels is needed, part of the cost of those services is derived from the United Way. These are only a couple of examples. the Alcoholic Clinic and the Salvation Army are others in a long list of organizations that need the help of the United Way to maintain and continue their services.

Physicians often talk about quality care; this is where it truly benefits our patients. We should not only invest our money in United Way, we really ought to go out and activley campaign for it.

Over the past 4 years, on the average, there were 280 physicians who made contributions and 140 physicians who did not make contributions (a whopping 30-40% of non-givers). The average amount of contributions by physicians is LESS than the average amount of contributions given by the employees of Ohio Edison or Standard Slag. I am aware that many physicians are constantly doing charity work; taking care of indigent patients free of charge; making calls on welfare patients for reduced fees; and participating actively in many community improvement projects. However, physicians in other communities also perform charitable work. Nationwide in 1985, the median contribution was \$100.00. In places like Charleston, West Virginia, the AVERAGE contribution given by a physician is \$436.00. I don't believe that physicians in Charleston have larger incomes than physicians here.

We turn away from neighbors in our own backyards who need our help. We speak of quality care and refuse to help make it a reality. How could we let this important fund raising even slip by? Statistics emphasize how important contributions to the United Way are and how far our contributions are lagging. I don't believe for one minute that

(Continued on Pg. 169)

**BULLETIN****of the Mahoning County Medical Society**

Published Monthly for and by the Members

5104 Market Street

Youngstown, Ohio 44512

Phone (216) 788-4700

*Not published in May,  
July and August.***Volume LVIII****SEPTEMBER, 1988****Number 6**

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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Eleanor Pershing

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John C. Melnick, M.D.

Brian S. Gordon, M.D.

Emil S. Dickstein, M.D.

**Editorial:****THE JAPANESE WATCH SYNDROME**

More than ten years ago, cardiologist-philosopher-runner George Sheehan M.D. described a deterioration in human mental capacity that he called the Japanese Watch Syndrome. Affordable watches that not only kept good time, but also included the date and day of the week on their faces had been introduced by the Japanese, and before long, most of us were wearing "calendar watches". In the past, our awareness of day and date was intact. Shortly after one began to wear one of the new watches, that inner calendar began to atrophy from disuse. How often now do we write the date or even the day of the week without first consulting the calendar watch? Dr. Sheehan's point was that mankind possesses fewer instincts than in the past because he has allowed them to atrophy through disuse and dependence on external substitutes. This was not an indictment against modern technology, but rather a caution that we should not allow the technology to replace our inner capacities.

I believe that we are faced with the constant threat of Japanese Watch Syndrome in the practice of Medicine. Our predecessors, out of necessity and lack of technology, were the ultimate clinicians. A thorough history and physical exam, combined with the physician's "gut feeling" about the patient's condition, formed the entire data base from which a diagnosis was made and treatment accomplished. Technology has made many great advances, and in proper perspective, each one has been beneficial to the practice of good medicine. New treatment technologies have given us better surgical procedures, materials and instruments. Discoveries in pharmacology have allowed dramatic improvements in medical therapy. The explosion in diagnostic technology allows us to probe the body even down to specific loci on its chromosomes if we wish. The danger to us as clinicians is that as we become more indiscriminant in our use of new technology, we become more dependent on it. That part of our brain trained in traditional medicine, where a thorough history and physical should give us a correct impression most of the time, begins to atrophy from disuse. We lose confidence in our diagnostic skills, and no longer trust our "gut feelings". We continue to order skull X-rays on low-risk head trauma patients, we order lab tests by broad groups in case we might "miss something", use broad-spectrum antibiotics rather than using our skill to be specific in our therapy. It's possible that as our approach to diagnosis and treatment becomes more

(Continued on Pg. 174)

## MAHONING COUNTY MEDICAL SOCIETY PROCEEDINGS OF COUNCIL June 14, 1988

The monthly meeting of the Council of the Mahoning County Medical Society was held Tuesday, June 14, 1988 at Antone's Restaurant.

The president, Dr. H.S. Wang, called the meeting to order at 7:20 p.m. Upon motion duly made and seconded the council unanimously determined to dispense with the reading of the May meeting minutes which had been mailed to all members.

The treasurer's report noted a total of 354 members paid 1988 dues. Notices have been sent to the 18 members who are delinquent and council members plan to personally contact those physicians. Any physician who has not paid dues by August 31, 1988 will be dropped from the membership. A financial report was given and upon motion duly made and seconded the Council unanimously authorized payment of bills as listed with the agenda.

The following applications for membership were presented:

ASSOCIATE: Sandra Mollie Jones-Gordon, M.D. James A. Nard, M.D.

The Applications were approved and the applicants will become members of the Mahoning County Medical Society in the voted category 15 days after the names have been printed in the Council's June meeting minutes that are mailed to all members unless an objection is received in writing by the executive director before that effective date.

The president Dr. Wang, announced that a letter from the Mahoning County Medical Society placing the name of Sixth district Councilor, Dr. J. James Anderson, in nomination for the office of president elect of the Ohio State Medical Association for 1989 had been sent to the OSMA.

Other announcements included: Dr. A. Bitonte has been appointed to fill the unexpired term of alternate delegate Dr. P.J. Mahar, Jr. who had previously resigned. The Society and the Society Auxiliary will publish a combined directory with shared costs. No further information has been received on the OSMA liability insurance.

Upon motion duly made and seconded the Council unanimously authorized the funding of \$1500 for the 1989 President's Ball (to be held in January) co-sponsored by the Society Auxiliary and the change of the January date of the Society meeting.

### COMMUNICATIONS

Letters of resignation from two members of the Society and a letter of resignation, effective June 30, 1988, from Mrs. Betty Belsan, secretary-bookkeeper of the Society.

Sixth District Councilor Dr. Anderson will send replies to the two physicians and in a discussion on membership, a suggestion was made to send a letter to the President, Medical Staff of St. Elizabeth Hospital Medical Center and the President, Clinical Staff of Western Reserve Care System requesting permission to present an update on the happenings of the Mahoning County Medical Society and the Ohio State Medical Association at the quarterly staff meeting. The presentation would be given by the Society president or vice president.

The Council accepted with regret the letter of resignation from Mrs. Belsan noting the excellent job she has done and her dedication during her 16 years employment.

### COMMITTEE REPORTS

The Medical Legal Committee will compile a survey to be sent to members of the

(Continued on Page 169)

**PROCEEDINGS OF COUNCIL** (Continued from Pg. 168)

Society.

The Aids Awareness Committee reported 9 requests for speakers and 8 inquires for information. The committee will meet on June 27, 1988 to formulate future plans.

The Marketing Committee reported a total of 60 requests have been received in response to the physicians referral advertisement. The committee will meet to evaluate the program.

The Project Open Committee reported no applications had been received. Sixth District Councilor Dr. Anderson commented on the 1988 O.S.M.A. Annual Meeting and also thanked the Society for nominating him for the office of President Elect 1989. To date 2 physicians have been nominated for that office. Dr. Anderson noted that Resolution 2188 from Mahoning Clunty (Employer Right to Choice of Health Insurance Option) was approved at the OSMA House of Delegates meeting and was to be presented at the 1988 AMA Annual Meeting.

**UNFINISHED BUSINESS**

the Patient Advocate Program will include health insurance and the elderly. A meeting is planned with the president of the senior citizens' group.

**NEW BUSINESS**

A number of applications have been received for the position of secretary-bookkeeper and interviews have been scheduled.

Upon motion duly made and seconded the Council unanimously authorized the insurance committee to review various health insurance plans and to recommend an appropriate plan for the Society. Dr. Anderson volunteered to serve as a member of the established committee.

A letter concerning a Podiatrist's self referring services was referred to the Ethics Committee.

Due to the lengthy agenda, the report of the delegates was deferred to the September meeting.

Upon motion duly made and seconded the council unanimously determined to dispense with the July and August Council meetings

The meeting was adjourned at 10 p.m.

**From The Desk of the President** (Cont. from pg. 166)

we are less generous than physicians elsewhere. Reach into your pockets and give generously this year.

I would also like to take this opportunity to salute the volunteer physicians, such as Drs. Goldberg, Mersol, Bunn, Deppisch, Kunin, Crans, Pass, Perni, Biros, Krautter and many others who act as volunteer solicitors for United Way. They spend hours to reach out to fellow physicians. Many of them volunteer year after year; they are really the role models for the rest of us. Their recognition is long overdue. Special recognition goes to Dr. Samuel Goldberg. He has been doing this as long as I can remember. Honor and respect his generous example. I repeat, please give generously this year.

H.S. Wang, M.D., President



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## *Something To Crow About*

It all began in 1946. The Canfield Fair was 100 years old that year and the Fair Board asked the Medical Society to display a medical exhibit in the Centennial Fair. The Medical Society has been active at the Fair ever since and presently a permanent building houses 34 exhibits representing the major health and medical agencies in the Mahoning Valley. During these 40 plus years, the Medical Society has been responsible for organizing and coordinating the various exhibits and in addition has had a display of its own.

For the past 12 years the Medical Society featured an old "Doctor's Office". This year that old office was transferred to another area and a modern office, complete with an examining room and adjacent consultation room, was presented. The examining room displayed typical office equipment including x-ray view-box with assorted x-ray films, an EKG machine and medical and surgical instruments.

The office was staffed during the entire 5 day fair by physicians representing a variety of specialties, answering and explaining various medical and surgical procedures. Judging from the response by the thousands of people coming through the Medical/Health building, this year's exhibit was a high light of the entire building.

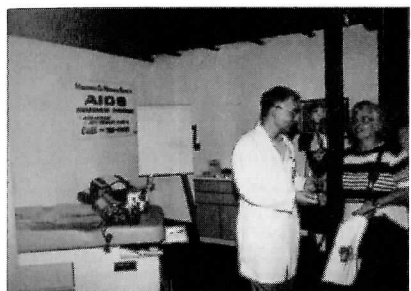
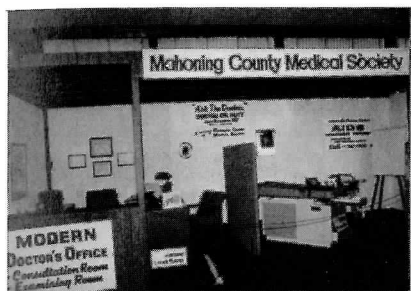
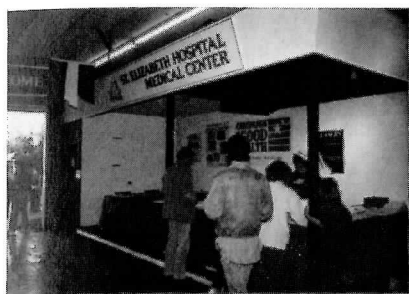
The physicians who staffed the exhibit were Drs. Denise Bobovnyik, Family Practice; James Botsko, Family Practice; Sanford Gaylord, Gastroenterology; Tim Hartwig, Family Practice; Bertram Katz, General Surgeon; Dean Limbert, Urology - Impotency; Robert Maggiano, Family Practice; Jeet Mehta, Colo-Rectal Surgeon; Consuelo Mendez, Internal Medicine; Suman Mishr, Endocrinology-Diabetes-Osteoporosis; Abdur Rashid, Nephrology; Jack Schreiber, Family Practice; Suzan Selim, Internal Medicine.

Special thanks are due these physicians for giving of their time and knowledge.

Thanks also goes to Fred Friedrich, M.D. Co-Chairman, who organized the physicians' schedule and to Lyons Medical Supply and Master's Office Supply for their generous loan of medical and office equipment.

Jack Schreiber, M.D.  
Chairman  
Canfield Fair Committee





## – Happenings –

### Auxiliary Begins New Season

Among the activities & community projects planned for the coming year by the Mahoning County Medical Society Auxiliary are a Doctors' Day observance, a Smokeless Tobacco school education program. The officers for the 1988-1989 year are Mrs. Steven Kalavsky, president, Mrs. William Crawford, president-elect; Mrs. Murali Guthikonda, secretary; Mrs. Rashid Abdu, corresponding secretary; and Mrs. Antonio Gestasoni, treasurer.

### Medical Assistants Honor Advisors

The Mahoning County Chapter of the American Association of Medical Assistants held a special dinner meeting on September 8, 1988 at the Holiday Inn-Boardman, to honor retiring chapter advisors, Dr. Paul Ruth and Dr. Barclay Brandmiller.

Special recognition was also given to Mrs. Betty Belson, retiring secretary of the Mahoning County Medical Society, and to Howard Rempes, a longtime supporter of the Mahoning County Chapter.

Other guests in attendance included Mrs. Maryella Ruth, Mrs. Eleanor Rempes, Dr. and Mrs. Juan Ruiz, Mrs. Eleanor Pershing, Mrs. Mary O'Hare, Pam Cox and Beth Pruban.

The president, Mrs. Mary Jane Arguilla, noted that the group welcomes new members. Prospective members need not be certified medical assistants. More information can be obtained by calling 792-2047.

## 31st Annual Medical Assistants Dinner

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## Japanese Watch Syndrome (Cont. from pg. 167)

technologic and impersonal, and that area in our brain where "clinical judgement" resides is allowed to atrophy, there would be no need for a clinician to make the decisions. In that case, Japanese Watch Syndrome could be a fatal disease to clinical medicine.

Our Medical schools continue to recognize the importance of good decision-making skills. Dr. Steven Muller, President of John Hopkins University said in his commencement address several years ago "What science should mean is a method of inquiry, not a body of facts; and scientific aptitude should be defined as understanding and disciplined application of concepts, rather than memorization of data." The application of concepts along with maturity and experience are the essence of sound clinical judgement. We must not only encourage these skills in our training programs, but also nurture our own abilities of physical diagnosis so that we can remain selective in our use of diagnostic and therapeutic modalities. We must continue to react to our clinical instincts so as to keep them alive. We can't allow clinical medicine to fall victim to Japanese Watch Syndrome.



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## MRS. O'HARE JOINS SOCIETY

Mrs. Mary O'Hare became the secretary-bookkeeper for the Mahoning County Medical Society on August 31, 1988.

A graduate of South High School, Mary was an office manager for a multi-physician practice for nine years. Prior to that, she worked as a bookkeeper for a surgical group.



Mary enjoys bowling. She holds many awards earned in tournaments and has established some records not since matched. She was president of the Youngstown Women's Bowling Association for many years and has served as vice president & director of the Ohio Women's Bowling Association. She is a recipient of a lifetime Directorship of the Youngstown Women's Bowling Association & a Life Member of the National Women's bowling Association.

Mary is a member of the Mahoning Valley chapter C.P.A. Wives Auxziliary and a former member of the Mahoning County Medical Assistants.

Mary resides in Boardman with her husband George. They have two sons, Brian and Dennis, who make their home in Fort Lauderdale, florida.

### Society Meetings

It has been brought to our attention that the October Society meeting occurs on the same date as Yom Kippur. The Society appologizes to those members observing the holiday.

All Society meetings for 1988 were scheduled in 1987. According to the bylaws, any change in the meeting date of the Society must be authorized by the members at a previous Society meeting. In order to avoid similar conflicts in the future, the Society will publish the proposed meeting dates for the current year in the January issue of the Bulletin.

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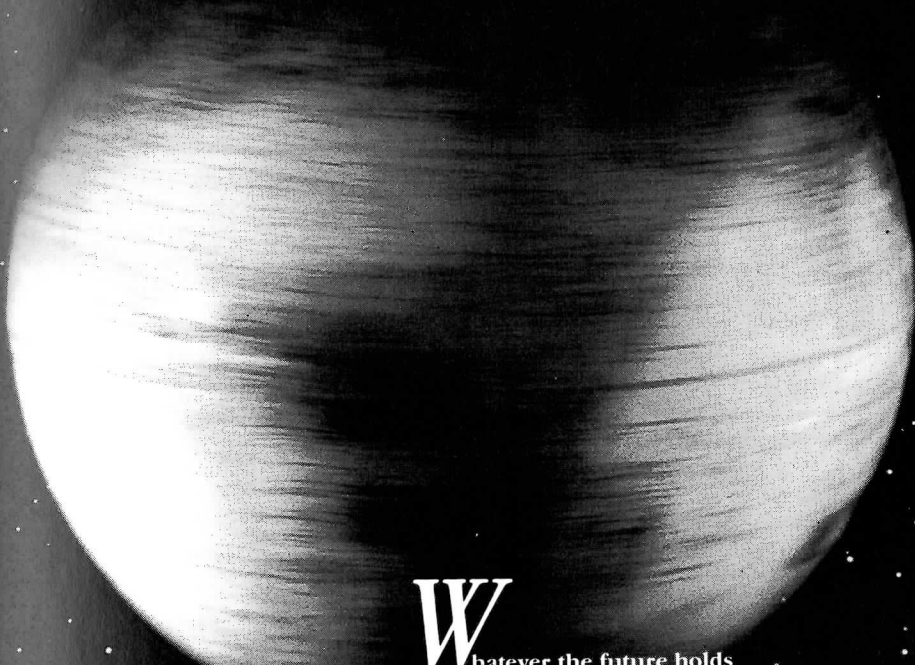
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# From the Bulletin

## FIFTY YEARS AGO SEPTEMBER 1938

DR. E.H. Young had an article on the "Treatment of Poisoning". He emphasized the treatment of shock and anoxemia as well as specific antidotes.

Dr. S.J. Goldblatt was studying obstetrics and gynecology at the University of Chicago. Fred Coombs was back from three years at the Massachusetts General. J.P. Harvey was in Boston studying heart disease with Dr. Paul White.

L.W. Weller attended the interne's reunion at Henry Ford Hospital and the fellowship reunion at the Cleveland Clinic.

Lyons Physician Supply recommended Dr. Weaver's Nasal Filter for hay fever patients but McKelvey's was pushing a new Allergy Electric Mask which was sure to remove 99.4% of the pollens from inhaled air.

## FORTY YEARS AGO SEPTEMBER 1948

Dr. Francis Gambrel was a resident in Obstetrics and Gynecology and Dr. Donald Dockry was a resident in Surgery at St. Elizabeth's Hospital.

Dr. Harold Reese had an interesting article on "Hycodan" the first codeine derivative.

At the golf meet with the Corydon Palmer Dental Society, Dr. Frank Belino won with a score of 79. Dr. E.J. Wenass was second with 84. Prizes were won by Drs. G.M. McKelvey, Sam Tamarkin, W.H. Welsh, W.H. Bunn, Sr. and S.J. Ondash.

## THIRTY YEARS AGO SEPTEMBER 1958

Dr. Leon Bernstein's lecture to the Youngstown Hospital Staff on "Hypnosis" was a featured article. Drs. Earl H. Young and Simon W. Chiasson were joint authors of "The Practical Application of Hypnosis". Frank Gelbman wrote about "A New Medical Emergency" and made suggestions for the treatment of a person who failed to waken from a hypnotic trance.

Dr. Dick Gross was hospitalized in California with Meningitis. Dr. Louisa Cervone died. She was the first practicing woman physician in Ohio. Dr. Waldo Z Baker died after forty years of general medical practice.

Mr. Howard Rempes was hired in August as the first full-time Executive Secretary of the Medical society. It was an excellent choice. On September 1 the Society moved into new offices in the Bel-Park building.

## TWENTY YEARS AGO SEPTEMBER 1968

The Medical School Committee, spearheaded by Dr. Leonard Caccamo, launched a fund-raising campaign to defray the costs of a feasibility study to bring a Medical School to Youngstown State University.

The Heart Association Work Evaluation Unit under the direction of Dr. Frank Tiberio and Dr. A.V. Whittaker were handling three patients a week.

Dr. Wayne B. Hardin died after a long and valiant fight against cancer of the larynx. Dr. Harold Reese, immediate Past-President, became Director of Student Health Service at Central Michigan State University.

## TEN YEARS AGO SEPTEMBER 1978

Dr. Michael Vuksta was presented with the Outstanding Team Physician Award in Canton. The presentation was made by President George Dietz, for many years of dedication to Sports Medicine.

Dr. John Stotler died at the young age of 62. He had served as team physician for YSU and was the first physician named to the Youngstown Board of Health. He also served for two years as Chief of St. Elizabeth Hospital Medical Center.

Also at age 62, Dr. Bernard Schneider died after a long illness. He was a family physician in Hubbard, Ohio. He was a Captain in the Air Force from 1942 to 1946. He also was a physician for the Hubbard high School football team.

New members that month were: Active- Ying Amorn, M.D., Tahir Firdaus, M.D., Nazim Jaffer, M.D., Sai Che Young, M.D., Associate- Wm. Richard Finch, M.D., B.N. Krishnasetty, M.D., Raul E. Pedraza, M.D. Robert R. Fisher, M.D.

SEPTEMBER



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Sept 19 - D. Malta	Sept 29 - D.H. Levy C.S. Ko	Oct 10 - G.A. Mihok
Sept 20 - H.S. Hwang Wm. Moskalik	Oct 1 - K. Iqbal	Oct 11 - S.K. Bal H.S. Ellison R.J. Solyn
Sept 21 - R.G. Warnock D.J. Pipoly	Oct 2 - W.L. Crawford	Oct 12 - B.I. Firestone A. Garcia
Sept 23 - M. Halmos P.R. Lakhani N.P. DePizzo B. Singh K.K. Codjoe	Oct 4 - G. Delfs	Oct 14 - G.R. Barton D.A. Hoffman
	Oct 5 - B. Katz	

## *In Memoriam*

### STEWART G. PATTON, JR., M.D. 1910 - 1988

Dr. Stewart G. Patton Jr., 78, died of cancer July 14, 1988 at his home. He was an orthopedist.

Dr. Patton was born in North Jackson and was the son of Dr. Stewart G. Patton former County Health Commissioner. He graduated from Westminster College, New Wilmington, Pa., and the University of Pittsburgh Medical School. He was awarded a fellowship in orthopedics at the University of Pittsburgh Children's Hospital.

Dr. Patton was a member of the Army Medical Corps during World War II and served in occupied Japan after the war.

A member of the orthopedic staff of Southside Medical Center, W.R.C.S., Dr. Patton was President of the Northeastern Orthopedic Society and a longtime member of the Mahoning County Board of Health.

Dr. Patton was in practice 35 years before retiring in 1981. He was a member of the American Medical Association, Ohio State Medical Association and the Mahoning County Medical Society.

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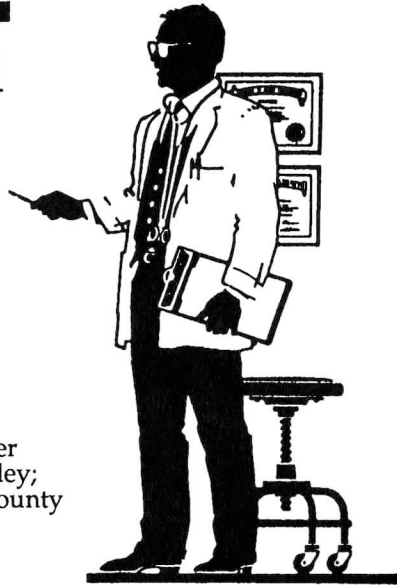
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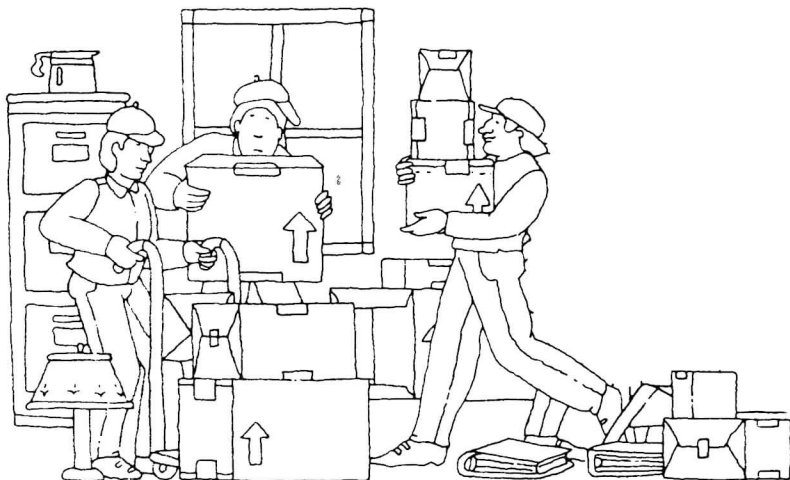
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## We've Made Our Move...

The Mahoning County Medical Society, after 30 years at 1005 Belmont Avenue, moved to larger quarters in Boardman on August 31, 1988.

The new office is located at 5104 Market Street. (in the former office of recently retired Dr. Barclay Brandmiller) The new phone number is (216)788-4700.

The Society's hours have been expanded to 8:30 a.m. to 5 p.m. Monday through Friday.



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## **Mrs. Belsan**

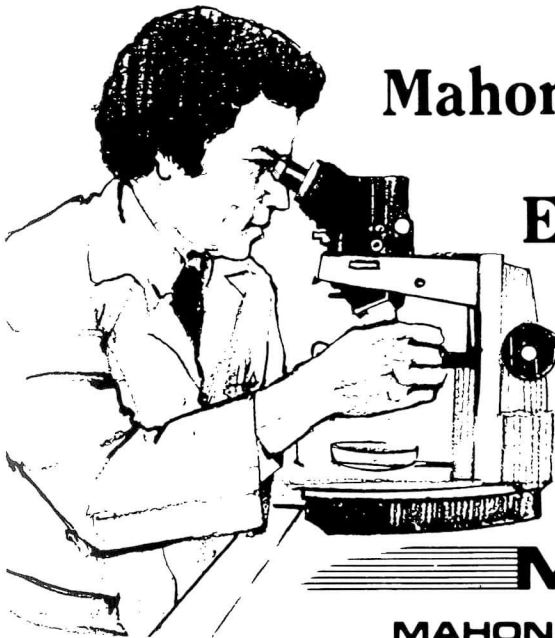
# **RETIRES**

Mrs. Betty Belsan who has been the secretary - bookkeeper of the Mahoning County Medical Society since July of 1972 retired June 30, 1988.

Betty served an important role in the growth of the Society during the last 16 years. She was not only dedicated to the goals of the Society but was tireless in her efforts to help the members and the community at large.

Betty is married to Dr. Richard Belsan, Pastor of Pilgrim Collegiate United Church of Christ, Youngstown and has three children, Diana of Davis, California, Claudia Woodard of Erie, Pennsylvania and Todd of Ocala, Florida. She also has two grandchildren.

Her plans for retirement includes an active pursuit of her hobbies and as much traveling as she and her husband find possible.



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**September 16, 1988 .....PAIN MANAGEMENT**

**SAM MOON, M.D.**  
Program Manager

**September 23, 1988 .....1ST ANNUAL FAMILY MEDICINE SYMPOSIUM**

**HARRY METCALF, M.D.**  
President, American Academy of Family Physicians  
Louis C. Zeller, M.D. Lecture in Family Medicine  
*"Family Medicine in Evolution"*

**GREG A WARSHAW, M.D.**  
Associate Professor of Family Medicine  
University of Cincinnati School of Medicine  
*"Vision and Hearing Problems in the Elderly"*

**GLEN E. EAST, M.D.**  
Associate Professor of Family Medicine  
Northeastern Ohio Universities college of Medicine  
*"An Exercise Prescription"*

**The Louis C. Zeller, M.D. Lecture in Family Medicine**

This lecture pays tribute to Dr. Louis C. Zeller a retired family practice physician. A member of St. Elizabeth's Medical Staff for more than 36 years, Dr. Zeller was instrumental in the developemnt of the hospital's Family Medicine Residency Program. Dr. Zeller is also recognized for his many years of compassionate and competent care for his patients; his community leadership as Health Commissioner and School Physician for the City of Girard; and his commitment to the develop-ment of Family Medicine as the foundation of current medical practicee.



September 30, 1988 ..... ORAL MEDICINE

**JAMES J. SCIUBBA, D.M.D., PH.D.**

Professor of Oral Pathology

State University of New York at Stony Brook

School of Dental Medicine

Chairman, Department of Dentistry

Long Island Jewish Medical Center

New Hyde Park, New York

*"Oral Manifestations of AIDS"*

October 7, 1988 ..... GERIATRICS

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Professor of Medicine

Director, Division of Clinical Pharmacology

Department of Medicine

Indiana University School of Medicine

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October 14, 1988 ..... CRITICAL CARE

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- September 17, Anesthesiology Lecture Series, "Anesthesia for the Burn Patient", Marc H. Uram, M.D., Associate Professor of Anesthesiology, NEOUCOM, Neurosurgical Anesthesiologist, Western Reserve Care System.
- September 17, Tumor Conference, Thomas N. Detesco, M.D., Moderator, Instructor in Internal Medicine, NEOUCOM, Internist, Western Reserve Care System.
- September 17, Surgical Visiting Professor, "Update on the Management of Perforated Viscus", George Tchirkow, M.D, Surgeon Mercy Hospital of Pittsburgh and St. Clair Memorial Hospital, Pittsburgh, Pennsylvania.
- September 20, Emergency Medicine Lecture Series, "Emergency Management of Diabetic Problems", Raul M. Rosman, D.O., Associate Professor of Internal Medicine, Research Associate Professor of Physiology, NEOUCOM, Director, Endocrinology Service, Western Reserve Care System.
- September 22, Mini Cancer Symposium, Topics Include: "Malignant Melanoma and Syndrome of Dysplastic Nevi", Yau Too Chiu, M.D. & Shokat Fatteh, M.D.; "Treatment of Cutaneous Malignancies and Mycosis Fungoides", Robert J. Piroli, M.D.; "T-Cell Lymphoma: Diagnosis and Treatment", Lawrence M. Pass, M.D.; Dermatologic Manifestations of Malignancies and other Cutaneous Malignancies", Kenneth M. Lloyd, M.D.; "Chemotherapy of Cutaneous Malignancies", Chris A. Knight, M.D.
- September 22, Fourth Annual Ambulatory Pediatric Symposium, Topics Include: "Breast Feeding Into the 90,s", Louise Aurilio, R.N.C., M.S.N.; "The Spitting Infant: Update on Pathogenesis and Diagnosis of GE Reflux", Fred C. Rothstein, M.D.; "The Pediatric Oncology Patient in Your Office", Edwin N. Forman, M.D.; "The Future of Home Care: Medicine Without Hospitals?", Charles A. Kallick, M.D.
- September 24, Anesthesiology Lecture Series, "Anesthesia for the Patient with Renal Failure", Darlene M. Miller, M.D., Assistant Professor of Anesthesiology, NEOUCOM, Pediatric Anesthesiologist, Western Reserve Care System.
- September 24, Tumor Conference, Masud S. Hashmi, M.D., Moderator, General Surgeon, Western Reserve Care System.
- September 27, Emergency Medicine Lecture Series, "Pediatric Case of the Month Presentation", Dale L. Kile, Jr., M.D., F.A.A.P., Assistant Professor of Pediatrics, Clinical Assistant Professor of Emergency Medicine, NEOUCOM, Coordinator, Pediatric Emergency Medicine, Western Reserve Care System.
- September 29, Internal Medicine Grand Rounds, Case Presentation, Lawrence M. Pass, M.D., Moderator, Associate Professor of Internal Medicine, NEOUCOM, Chairman, Department of Medicine, Western Reserve Care System.
- September 29, Pediatric Grand Rounds, "Herpes Simplex Infections in Infants and Children", John S. Venglarcik, III, M.D., Assistant Professor of Pediatrics, NEOUCOM, Director, Pediatric Infectious Disease, Tod Children's Hospital.

**Western Reserve Care System** (Continued from Pg. 190)

- October 1, Anesthesiology Lecture Series, "SBE Prophylaxis", Lester R. Melnick, D.O., Assistant Professor of Anesthesiology, NEOUCOM, Cardiovascular Anesthesiologist, Western Reserve Care System.
- October 1, Tumor Conference, Chris A. Knight, M.D., Moderator, Assistant Professor of Internal Medicine, NEOUCOM, Hematologist/Oncologist, Western Reserve Care System.
- October 4, Emergency Medicine Lecture Series, "Penile and Scrotal Trauma", A. Reed Hoffmaster, M.D., Urologist, Western Reserve Care System.
- October 6, Internal Medicine Grand Rounds, "Inflammatory Bowel Disease - 1988 Update", David B. Brown, M.D., Associate Professor of Internal Medicine, NEOUCOM, Director, Medical Endoscopy, Western Reserve Care System.
- October 6, Pediatric Grand Rounds, "Histiocytosis X and Diabetes Insipidus", Mustafa Barudi, M.D., Director, Department of Pediatric Hematology/Oncology, Tod Children,s Hospital, Humberto A. Latorre, M.D., Associate Professor of Pediatrics NEOUCOM, Director, Pediatric Endocrinology, Tod Children,s Hospital.
- October 8, Anesthesiology Lecture Series, "Malignant Hyperpyrexia", Donald L. Person, M.D., Anesthesiologist, Western Reserve Care System.
- October 8, Tumor Conference, Yau-Too Chiu, M.D., Moderator, Assistant Professor of Plastic Surgery, NEOUCOM, Director, Plastic Surgery Service, Western Reserve Care System.
- October 11, Sports Medicine Lecture Series, "Knee Injuries Menscal and Ligamentous", Raymond S. Duffett, M.D., Orthopedic Surgeon, Western Reserve Care System.
- October 11, Emergency Medicine Lecture Series, "Esophageal Obstruction", David B. Brown, M.D., Associate Professor of Internal Medicine, NEOUCOM, Director, Medical Endoscopy, Western Reserve Care System.
- October 12, Pathology Grand Rounds, "Skin Adnexal Tumors", Shokat Fatteh, M.D., Assistant Professor of Pathology, NEOUCOM, Pathologist, Western Reserve Care System.
- October 13, Medical Genetics, Topics Include: "Oncogenes", Mark A. Israel, M.D.; Cytogenetics and Cancer", Avery A. Sandberg, M.D.; Flow Cytometry and Solid Neoplasms", Edwin J. Mahin, M.D.; Bone Marrow Transplantation and Hematologic Malignancy, Brian J. Bolwell, M.D.
- October 13, Pediatric Grand Rounds, "Munchausen by Proxy", J. Jeffrey Malatack, M.D., Associate Professor of Pediatrics, University of Pittsburgh School of Medicine, Pediatrician, Children,s Hospital of Pittsburgh, Pittsburgh, Pennsylvania.
- October 15, Anesthesiology Lecture Series, "Anesthesia for the Trauma Patient", John B. Werning, M.D., Assistant Professor of Anesthesiology, NEOUCOM, Anesthesiologist, Western Reserve Care System.
- October 15, Tumor Conference, Earnest Perry, M.D., Moderator, Assistant Professor of Surgery, NEOUCOM, General Surgeon, Western Reserve Care System.
- October 15, Surgical Visiting Professor, "Trauma Surgery and the Nutritional Management of the Surgical Patient", Frank V. McL. Booth, M.D., Assistant Professor of Surgery, State University of New York at Buffalo, Director, Surgical Intensive Care Unit, Buffalo General Hospital, Buffalo, New York.

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**Precautions: General—1.** Symptomatic response to nizatidine therapy does not preclude the presence of gastric malignancy.

**2.** Because nizatidine is excreted primarily by the kidney, dosage should be reduced in patients with moderate to severe renal insufficiency.

**3.** Pharmacokinetic studies in patients with hepatorenal syndrome have not been done. Part of the dose of nizatidine is metabolized in the liver. In patients with normal renal function and uncomplicated hepatic dysfunction, the disposition of nizatidine is similar to that in normal subjects.

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**Carcinogenesis, Mutagenesis, Impairment of Fertility—A two-year oral carcinogenicity study in rats with doses as high as 500 mg/kg/day (about 80 times the recommended daily therapeutic dose) showed no evidence of a carcinogenic effect. There was a dose related increase in the density of enterochromaffin-like (ECL) cells in the gastric oxyntic mucosa. In a two-year study in mice, there was no evidence of a carcinogenic effect in male mice; although hyperplastic nodules of the liver were increased in the high dose males compared to placebo. Female mice given the high dose of Axid (2,000 mg/kg/day, about 330 times the human dose) showed marginally statistically significant increases in hepatic carcinoma and hepatic nodular hyperplasia with no numerical increase seen in any of the other dose groups. The rate of hepatic carcinoma in the high dose animals was within the historical control limits seen for the strain of mice used. The female mice were given a dose larger than the maximum tolerated dose, as indicated by excessive (30%) weight decrement compared to concurrent controls, and evidence of mild liver injury (transaminase elevations). The occurrence of a marginal finding at high dose only in animals given an excessive, and somewhat hepatotoxic dose, with no evidence of a carcinogenic effect in rats, male mice, and female mice (given up to 360 mg/kg/day, about 60 times the human dose), and a negative mutagenicity battery is not considered evidence of a carcinogenic potential for Axid.**

Axid was not mutagenic in a battery of tests performed to evaluate its potential genetic toxicity, including bacterial mutation tests, unscheduled DNA synthesis, sister chromatid exchange, and the mouse lymphoma assay.

In a two-generation, perinatal and postnatal, fertility study in rats, doses of nizatidine up to 650 mg/kg/day produced no adverse effects on the reproductive performance of parental animals or their progeny.

**Pregnancy—Teratogenic Effects—Pregnancy Category C—**Oral reproduction studies in rats at doses up to 300 times the human dose, and in Dutch Belted rabbits at doses up to 55 times the human dose, revealed no evidence of impaired fertility or teratogenic effect; but, at a dose equivalent to 300 times the human dose, treated rabbits had abortions, decreased number of live fetuses, and depressed fetal weights. On intravenous administration to pregnant New Zealand White rabbits, nizatidine at 20 mg/kg produced cardiac enlargement, coarctation of the aortic arch, and cutaneous edema in one fetus and at 50 mg/kg it produced ven-

tricular anomaly, distended abdomen, spina bifida, hydrocephaly, and enlarged heart in one fetus. There are, however, no adequate and well-controlled studies in pregnant women. It is also not known whether nizatidine can cause fetal harm when administered to a pregnant woman or can affect reproductive capacity. Nizatidine should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.

**Nursing Mothers—**Nizatidine is secreted and concentrated in the milk of lactating rats. Pups reared by treated lactating rats had depressed growth rates. Although no studies have been conducted in lactating women, nizatidine is assumed to be secreted in human milk, and caution should be exercised when nizatidine is administered to nursing mothers.

**Pediatric Use—**Safety and effectiveness in children have not been established.

**Use in Elderly Patients—**Ulcer healing rates in elderly patients are similar to those in younger age groups. The incidence rates of adverse events and laboratory test abnormalities are also similar to those seen in other age groups. Age alone may not be an important factor in the disposition of nizatidine. Elderly patients may have reduced renal function.

**Adverse Reactions:** Clinical trials of nizatidine included almost 5,000 patients given nizatidine in studies of varying durations. Domestic placebo-controlled trials included over 1,900 patients given nizatidine and over 1,300 given placebo. Among the more common adverse events in the domestic placebo-controlled trials, sweating (1% vs 0.2%), urticaria (0.5% vs <0.01%), and somnolence (2.4% vs 1.3%) were significantly more common in the nizatidine group. A variety of less common events was also reported; it was not possible to determine whether these were caused by nizatidine.

**Hepatic—**Hepatocellular injury, evidenced by elevated liver enzyme tests (SGOT [AST], SGPT [ALT], or alkaline phosphatase), occurred in some patients possibly or probably related to nizatidine. In some cases, there was marked elevation of SGOT, SGPT enzymes (greater than 500 IU/L), and in a single instance, SGPT was greater than 2,000 IU/L. The overall rate of occurrences of elevated liver enzymes and elevations to three times the upper limit of normal, however, did not significantly differ from the rate of liver enzyme abnormalities in placebo-treated patients. All abnormalities were reversible after discontinuation of Axid.

**Cardiovascular—**In clinical pharmacology studies, short episodes of asymptomatic ventricular tachycardia occurred in two individuals administered Axid and in three untreated subjects.

**Endocrine—**Clinical pharmacology studies and controlled clinical trials showed no evidence of androgenic activity due to Axid. Impotence and decreased libido were reported with equal frequency by patients who received Axid and by those given placebo. Rare reports of gynecomastia occurred.

**Hematologic—**Fatal thrombocytopenia was reported in a patient who was treated with Axid and another H<sub>2</sub>-receptor antagonist. On previous occasions, this patient had experienced thrombocytopenia while taking other drugs.

**Integumental—**Sweating and urticaria were reported significantly more frequently in nizatidine than in placebo patients. Rash and exfoliative dermatitis were also reported.

**Other—**Hyperuricemia unassociated with gout or nephrolithiasis was reported.

**Overdosage:** There is little clinical experience with overdosage of Axid in humans. If overdosage occurs, use of activated charcoal, emesis, or lavage should be considered along with clinical monitoring and supportive therapy. Renal dialysis for four to six hours increased plasma clearance by approximately 84%.

Test animals that received large doses of nizatidine have exhibited cholinergic-type effects, including lacrimation, salivation, emesis, miosis, and diarrhea. Single oral doses of 800 mg/kg in dogs and of 1,200 mg/kg in monkeys were not lethal. Intravenous LD<sub>50</sub> values in the rat and mouse were 301 mg/kg and 232 mg/kg respectively. PV 2091 AMP (AXID288)

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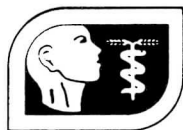
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## • • • • Update • • • •

### **Infectious Medical Waste Bill Becomes Law**

Ohio physicians, dentists, veterinarians, hospitals and clinics disposing of infectious medical waste are now required to adhere to statutory requirements established under Senate Bill 243, which became effective August 10, 1988.

All generators of infectious medical waste will be required to contain "sharps" (hypodermic needles, syringes, scapel blades, and glass articles that have been broken) in rigid, tightly closed, puncture resistant containers. If the "sharps" waste has been disinfected, the containers are required to be labeled "sharps" and, if the "sharps" waste has not been disinfected, the containers are required to be conspicuously labeled with the international biohazard symbol. All generators of infectious medical waste are also required to disinfect all specimen cultures and cultures of viable infectious agents on the premises where generated to render such waste noninfectious or to transport such waste to a treatment facility for treatment.

The OSMA was successful in persuading legislators to include an exemption in the bill permitting generators of infectious medical waste producing less than fifty pounds of infectious medical waste per month to place the "sharps" containers and disinfected cultures in with their regular waste for disposal.

Persons generating fifty or more pounds of infectious medical waste per month will be required to register with the Ohio Environmental Protection Agency and obtain a registration certificate. The registration certificate fee is \$300 and payable at the time of applying for the certificate. The registration certificate is valid for three years. More extensive regulations are established for individuals and entities generating fifty or more pounds of infectious medical waste per month.

For more information contact Sue Buchanan at the Ohio EPA at (614) 644-2956.

- - - -

### **Prompt Pay Bill Takes Effect**

Senate Bill 169, which requires third-party payors to pay health providers within 24 days of receiving a completed claim, became effective on June 29, 1988.

According to the bill, the term "health provider" means any physician, hospital or other health professional entitled to reimbursement for services rendered under the terms of a benefit contract.

"Third-party payor" means health insurance companies, HMOs, PPOs, labor organizations, employers, pre-paid dental plans and third-party administrators. Government programs such as Medicaid, Medicare and Workers' Compensation are not considered insurance companies and are not covered under the bill.

*(Cont. next page)*



The bill also provides for remedies in cases of late payments, and defines primary and secondary coverage which must be taken into consideration when determining third-party payment schedules.

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### Medicare Catastrophic Coverage Act

The catastrophic bill (H.R. 2045) expands the Medicare program and sets a cap on out-of-pocket expenses the elderly will pay for acute medical care. The bill manifests a dramatic financing shift in public health policy. Costs of the added insurance protection will be borne by the elderly themselves rather than by all workers through payroll taxes, as has been the case in the past. Premiums for coverage also will vary according to one's ability to pay.

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### Physicians Must Re-register

Ohio physicians will be receiving re-registration forms for licensure from the Ohio State Medical Board in September. The forms will be mailed to the last known address on file for each licensed physician.

If you have not received your forms by October 1, contact the Medical Board at (614) 466-3934. Cards and re-registration fees must be returned to the Board by January 1, 1989.

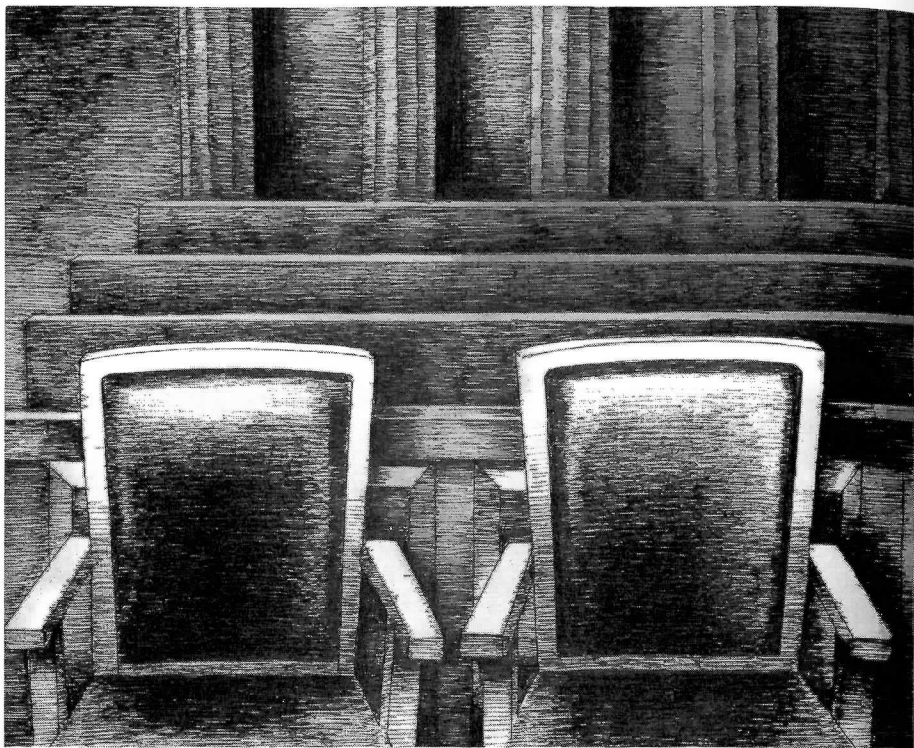


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