

BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

VOL. VII

JANUARY, 1937

NO. 1

P R O G R A M S

MEDICAL ARTS BUILDING AUDITORIUM

8 P. M.

JANUARY 12

Fractures of the Neck of the Femur, Illustrated...Dr. E. F. Dodds

The Young Physician Looks at Medical Economics

Dr. J. F. Griggs, Jr.

• • •

JANUARY 26

ARMY AND NAVY NIGHT

Surgical paper.....Capt. Emory E. Alling,
Fort Lewis

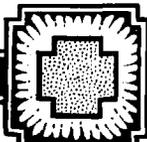
Hyperpyrexia.....Dr. James E. Potter,
U. S. Naval Hospital, Bremerton

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TACOMA, WASHINGTON



NG HUMANITY



THROUGH SCIENCE

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The officers of the Pierce County Medical Society and the Bulletin staff extend the Season's greetings and best wishes for a happy and prosperous New Year to all the members of the Society and its friends. Particularly do they thank our advertisers for their patronage and trust that they receive an adequate return in trade with our readers.

During the past year our members have worked together in friendship and harmony to make our meetings pleasant as well as instructive, and have done their part in the welfare work to lighten the burdens of the less fortunate. There has been a notable progress toward restoring prosperity, from which we have all received benefit. The coming year holds forth promise of greater improvement. We can confidently turn our faces forward and go on, with the determination to do still more for the advancement of scientific medicine and the health and happiness of our people.

In common with the whole nation, the doctor's hearts go out in loving sympathy to our own Dr. Bill Mattson and his family for the dastardly kidnaping of his son, Charles. At the time this is written the boy has not been found. It is our prayer that by the time of publication he will have been restored to his parents and the guilty culprit apprehended.

Doctors Must Keep Up An Aggressive Attitude in the Matter of Compulsory Health Insurance

Starting as far back as 1916, Illinois doctors led a campaign of education against compulsory health insurance. The campaign was active over a period of years, culminating in 1920 in a resolution at the New Orleans meeting of the American Medical Association condemning outright the idea of compulsory health insurance.

Today certain foundations, welfare workers and medical politicians are again advocating compulsory health insurance. Recently Wil-

William Trufant Foster, a well known economist, before the Academy of Political Science and the College of Physicians in Philadelphia, stated that it is folly to burden physicians any longer with business affairs which they have notoriously neglected for which they are not trained, and which they are not interested in and which interfere with single-hearted devotion to patients, which implies that medicine should be taken over by the state.

There is a preponderance of evidence that powerful forces and agencies are again working toward development of health insurance in the United States. There is also substantial evidence that foundations, philanthropists and politicians are proceeding at an alarming rate in plans that lead to the socialization of medicine. In a few months measures looking in that direction will be presented before state legislatures. Powerful forces are behind these measures. All that the doctors have to do to insure their success is to do nothing. When the physician wakes up to find that he is a hired man, sent here and there by some civilian official, it will be too late.

We suggest that the officials of state medi-

cal societies, as well as the individual physician, assume a more aggressive attitude in the matter of compulsory health insurance, in order to avert a repetition in the United States of the disastrous consequences that attend the adoption of health insurance in other countries.

—Illinois Medical Journal.

Doctor: "Why didn't you send for me sooner? Why did you wait until your husband was unconscious?"

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THE BUSINESS BUREAU

THE SPECIALIST

By E. J. BURROUGH
Collection Manager

This short article is not about physicians or dentists, but about a group of individuals, the Physicians' & Dentists' Business Bureau Collection Department.

Webster defines a specialist as a person devoted to some one line of study, occupation or professional work. We admit that we may know little as to the proper manner to handle a rent, grocery, garage or merchandise bill, but we contend that no one, in this city, at least, understands so well the problems of physicians' and dentists' accounts, or acts in the interest of such clients as well as the Bureau.

The collection of professional accounts is not a matter of merely getting the money. So many other factors are involved that it would be impossible to list them all.

To begin with, approximately 50 per cent of the accounts when first received are disputed, sometimes with apparent honesty, but usually as a defense against paying. It is necessary, of course, to make the proper investigation of the dispute to arrive at an agreement. This is usually done by a modified cross-examination, and when the complainant seems sincere, the doctor or his nurse is called to furnish necessary facts to settle the dispute.

The only way an account can be handled to the satisfaction of the debtor, doctor and Bureau is to have a definite and clear understanding and agreement between the debtor and Bureau. For this reason we have notes or contracts which call for monthly payments and name the agreed figure. We have at present over 2,000 of these on file. As time goes on and the debtor's appreciation for the doctor's services wanes and more

and more disputes arise, this agreement is found most beneficial.

In the three years I have worked here I have never heard a person truly say we were unduly unjust or unreasonable, although our court actions are frequent. This is due to the fact that we make every effort to determine just how much a debtor can pay on an account, and bring action only on those who are able to pay but refuse to do so, or to settle a dispute in court.

It is the principle of the Bureau to act in the best interest of the physician or dentist, and for this reason we believe **THE WORST SETTLEMENT IS BETTER THAN THE BEST LAW SUIT.**

We have taken six months and sometimes longer to collect an account that through shyster practice could be collected in one month, but these same debtors will go back to these same doctors for more services, and when they do they pay for their services. They are not insulted or antagonized. **THEY ARE EDUCATED.**

We contend that no other type of accounts are faced with the same problem. Constantly, and by devoting our work for nearly six years to the study of these things only, we have deserved the title, and are **SPECIALISTS.**

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MEDICAL PROGRESS IN 1936

While few years produce discoveries that revolutionize medical practice, at the same time a survey of the literature for a twelve-month discloses many things of interest and possible value. A newly-discovered treatment is often received with too much enthusiasm in some quarters, usually followed by a corresponding degree of skepticism, which, in turn, is succeeded by a correct evaluation of the measure. Nothing intrigues the imagination more than surveying the progress made in the past and speculating on the possibilities of the future. The following articles, which may be found in this library, give some of the highlights of the year just past.

In the decade and a half since its discovery various endeavors have been made to administer insulin by a method that would approximate its natural continuous secretion. Early in the year Hagedorn and his associates, of Copenhagen, announced for the first time in the American literature the development of protamine insulin, which, being relatively insoluble, is absorbed slowly, avoiding the irregular effects of insulin. During the year various men have written papers reporting the successful use of this product in suitable cases. Latest among these articles is one by Joslin, in *New England Journal of Medicine* for December 17, in which he sets forth the advantages of protamine insulin and gives methods of avoiding untoward reactions.

In *American Journal of Surgery* for January Gruskin, of Temple University, gives an account of a new pregnancy test. He ingeniously utilizes the principle that in positive cases of malignancy homologous proteins, injected intradermally produce an allergic reaction by the formation of pseudopodia. He has found, likewise, that an antigen made from placental tissue, injected intradermally, is followed by pseudopod formation in cases of pregnancy within ten minutes after the injection. Directions for preparing the antigen are given and the author reports a large series of correct results.

Observing the good results following iontophoresis of acetyl-beta-methylcholine-chloride

as a vasodilator in spastic vascular conditions and infectious arthritis, Jacoby, of the Department of Gynecology, New York Post Graduate Medical School and Hospital, experimented with its use in pelvic inflammation. The success which he met in his series of cases leads him to believe that it is superior to all other methods of inducing pelvic hyperemia, because of its more sustained physiologic action. His paper was published in *American Journal of Obstetrics and Gynecology* for January.

A year or so ago the Bureau of Entomology at Washington published its conclusion that the substance in the secretions of maggots which rendered them so efficacious in the treatment of osteomyelitis and wound infection was allantoin, which they found could be utilized successfully without the use of maggots. Now comes a second report from the Bureau that urea, also found in the secretions, has proven equally affective in stimulating wound healing. In an article published in *American Journal of Surgery* for August, directions for its use, particularly in deep wounds and inaccessible places, are given.

Collens and Wilensky, of Brooklyn, announce in *American Heart Journal* for June and *Journal of the American Medical Association* for December 12, a new treatment for peripheral obliterative arterial disease by intermittent venous occlusion and describe the apparatus used. In contrast to the Paevex method of alternate suction and pressure produced by placing the entire extremity in a boot, the authors use a pneumatic cuff about the proximal portion of the limb, inflated to a pressure approximating the diastolic arterial pressure. The venous obstruction thus produced is followed by reactive hyperemia when the pressure is released.

A new measure for the treatment of delirium tremens, by the use of evipal, is offered by Sperber, of the New York City Hospital, in *New England Journal of Medicine* for December 3. He has experimented with various drugs and the results following the use of evipal have led him to believe that it may be a specific remedy. His series of cases is small and he publishes the article in the hope that the experience of others may evaluate the treatment.

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On Tuesday evening, December 8, the Woman's Auxiliary to the Pierce County Medical Society held a meeting in the recreation room of the Tacoma General Hospital.

The business session was presided over by W. B. Penney, the president.

Following the business meeting Mr. Salem Nourse read "A Christmas Carol" by Charles Dickens and Mrs. Frederick Scheyer gave a program of Christmas songs.

During the supper hour the doctors joined the auxiliary members. Mrs. Charles S. Pascoe was chairman in charge of the supper, assisted by the following members: Mesdames R. S. Garnett, L. J. Hunt, C. D. Hunter, J. L. Hutchinson, E. W. Janes, D. H. Johnson, J. A. Johnson, Scott Jones, J. A. Keho, W. N. Keller, C. H. Kinnear, G. G. R. Kunz, C. C. Leaverton, A. C. Leslie, T. H. Long, W. H. Ludwig, R. H. Beach, W. G. Cameron, C. H. Doe, S. L. Blair, J. M.

Havlina, P. C. Kyle and B. Terry.

Mrs. C. J. Cummings and Mrs. A. W. Howe presided over the supper table, which was covered with a beautiful lace cloth and had a centerpiece of silver leaves and Christmas balls and silver candle holders with white candles.

There were over 100 present.

The meeting of January 14 will be held in the Medical Arts Building at 2 P. M. John Schlarb, Jr., will speak on "Present Day Tendencies in Medical Economics" and Mrs. E. F. Dodds will give "News Clippings."

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FOR many centuries,—and apparently down to the present time, even in this country—ricketic children have been passed through a cleft ash tree to cure them of their rickets, and thenceforth a sympathetic relationship was supposed to exist between them and the tree.

Frazer* states that the ordinary mode of effecting the cure is to split a young ash sapling longitudinally for a few feet and pass the child, naked, either three times or three times three through the fissure at sunrise. In the West of England, it is said the passage must be "against the sun." As soon as the ceremony is performed, the tree is bound tightly up and the fissure plastered over with mud or clay. The belief is that just as the cleft in the tree will be healed, so the child's body will be healed, but that if the rift in the tree remains open, the deformity in the child will remain, too, and if the tree were to die, the death of the child would surely follow.

*Frazer, J. G.: *The Golden Bough*, vol. 1, New York, Macmillan & Co., 1928



It is ironical that the practice of attempting to cure rickets by holding the child in the cleft of an ash tree was associated with the rising of the sun, the light of which we now know is in itself one of Nature's specifics.

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Notice to Obstetricians and Those Interested in Obstetrics

There is a movement on foot for the formation of a State Obstetrical Society. The object is "To further interest in and promote the advance of Obstetrics in this state."

It has been suggested that membership shall not be confined exclusively to those doing Obstetrics as a specialty but rather that it should include those physicians who are especially interested in that branch of medicine.

Suggestion has been made that the first meeting be held in Tacoma. Anyone interested is asked to see Dr. Johnson, Dr. Jones or Dr. Kyle before January 15.

TACOMA INTERNISTS' SOCIETY

January 19

Tacoma Hotel

6 P. M.

Scarlet Fever and Erysipelas

Dr. F. R. Maddison

Isolation Technic for Use With Tuberculosis

Dr. J. F. Steele

Review of Recent Literature on the Neuroses

Dr. J. R. Turner

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NEWS ITEMS

Dr. C. P. Larsen, of the Western State Hospital staff, has succeeded Dr. C. R. McColl as Pathologist at the County Hospital. Dr. McColl has served faithfully and efficiently for three and a half years, and the time he has devoted to this work has been at great personal sacrifice. Dr. Larsen is now doing microscopic sections of all organs removed and a clinical pathological conference is held each Thursday afternoon from 4 to 5, at which he discussed the specimens, projects microscopic sections on the screen and shows gross specimens. A hearty invitation is extended to all members of the society to attend these meetings.

Dr. and Mrs. Jess Read are receiving congratulations upon the birth of a son, Thomas Wilmot Read, born on Christmas Day.

New Year guests at the J. B. Robertson home were Mr. and Mrs. George Fisher (Ruth Robertson) of Westwood, California, and their little daughter, Helene.

Dr. C. P. Gammon is back in his office after his recent illness.

Dr. and Mrs. B. T. Terry are visiting their daughter and son-in-law, Dr. and Mrs. Grafton Love, in Rochester, Minnesota.

Dr. Charles H. Doe has returned from New York, accompanied by his son, Richard, who has been in school in the East for the past two years.

Dr. and Mrs. R. H. Beach spent Christmas with relatives in Brewster, Washington.

Thanks are expressed to Miller & Miller, who print our Bulletin, for their courtesies in assembling, stapling, folding and trimming, without charge, the copies of our Constitution and By-Laws which are just being sent out. The typing was done by Miss Hall's staff on the new duplicating machine in the Foundation office.

Dr. and Mrs. H. J. Whitacre are leaving on January 12, planning to spend the next month in New York, Washington and other eastern cities.

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Dr. J. M. Havlina has returned to his practice after several months spent in study in eastern medical centers.

Among Tacomans at the Rose Bowl game were Dr. and Mrs. W. B. Penney, Dr. and Mrs. R. A. Morse, Dr. and Mrs. M. T. Nelson, Dr. and Mrs. G. G. R. Kunz, Miss Isabel Kunz, George Kunz, Dr. and Mrs. W. B. Mc Nerthney, Dr. and Mrs. S. M. MacLean, Miss Rosebety MacLean, Charles MacLean and Dr. and Mrs. Eugene Hanson.

Dr. and Mrs. G. E. Griffith were guests of Dr. Griffith's sister in Chico, California, during the Christmas holidays.

Dr. T. B. Murphy has returned from an airplane trip which included San Francisco, Los Angeles, Cleveland, Toledo and Chi-

cago. A fellow-passenger between Los Angeles and Cleveland was Dr. G. W. Crile, whose clinic was among those visited by Dr. Murphy.

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OF THE
PIERCE COUNTY MEDICAL SOCIETY

Vol. VII.

FEBRUARY, 1937

No. 2

P R O G R A M S

MEDICAL ARTS BUILDING AUDITORIUM

8 P. M.

FEBRUARY 9

Progress in Pediatrics.....Dr. D. M. Dayton
The Significance of Vertigo.....Dr. Laurence Selling,
Professor of Medicine,
University of Oregon
Medical School.

• • •

CRYSTAL BALLROOM, WINTHROP HOTEL

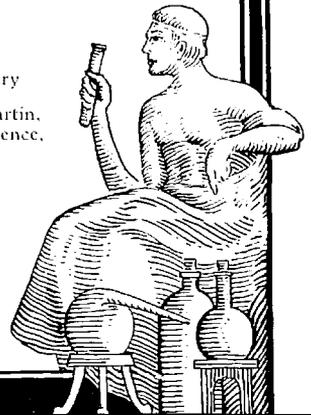
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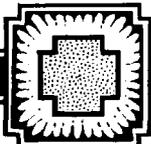
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The United States Among the Nations.....Dr. C. E. Martin,
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TACOMA, WASHINGTON



ING HUMANITY



THROUGH SCIENCE

Letter From Department of Labor & Industries Re Medical Aid Bills

January 14, 1937.

Dr. Arthur Crookall, President,
Washington State Medical Society,
Seattle, Washington.

I am writing you this letter, asking you to advise all your membership that have Medical Aid bills due them from the Department of Labor and Industries, to have those bills sent into the department office at Olympia by April 1, 1937.

The reason that I am asking you to do this, Doctor, is because if the bills are not in, the biennium closes on that date, and under the law we are precluded from paying bills after April 1, 1937, for the reason that such payment comes into the new biennium.

Heretofore, we have had some unfortunate misunderstandings, on account of the fact that the doctors were unaware of this law, and rather lax about getting their bills submitted during the biennium that the services occurred.

Therefore, I would be greatly pleased if you would co-operate with me along these lines, and advise your membership to get their bills in the Olympia office, for payment, on or before April 1, 1937.

Very sincerely yours,
E. PAT KELLY,
Director.

Motorist: "Hey, it's pretty fortunate for you that this happened in front of a doctor's house!"

Victim: "Yeah, but I'm the doctor!"

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Get-Together Dinner

The entertainment committee asks that members and their wives reserve Monday evening, February 22, for the Get-together dinner to be held at 6:30 in the Crystal Ballroom at the Winthrop. This is the first mixed dinner we have had for several years. The committee promises a good dinner and good entertainment and bespeaks a large attendance.

SOCIETY MEMBERSHIP

Pay your dues. That's what they are for. We don't have dues to give the Secretary-Treasurer a job. We need the money to buy stamps to send you a receipt.

Work as a member of the committee on which you are placed. If you can't work, how did you get in, and if you don't work, how long are you going to stay in (the way)?

Did you ever try to become interested by asking your president if there was anything you could do? Excellent plan. Results will startle you.

If you are assigned something to do—and do it—your society, your president and likewise yourself are the beneficiaries.

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WOMAN'S AUXILIARY

to PIERCE COUNTY MEDICAL SOCIETY

The meeting originally scheduled for February 11 has been postponed on account of the illness of Mrs. John N. Alley. The program for that day will be that originally planned for the January meeting—a talk on "Present Day Tendencies in Medical Economics" by John Schlarb, Jr., and "News Clippings" by Mrs. E. F. Dodds.

HOW THE AUXILIARY SERVES

MRS. ROBERT E. FITZGERALD
Wauwatosa, Wis.

Webster defines the word auxiliary, when used as a noun, as "one that aids or helps."

The Auxiliary's sphere of activity is great. There are many fields in which the group may expend effort with most gratifying results. One of these is education, and here is meant education not only of others but of ourselves.

Naturally enough there has been a great deal of criticism of the medical profession based on misinformation. The Auxiliary, then, has urged every member to inform herself thoroughly and intelligently concerning these questions so vital to her husband's profession. It is no longer permissible to be ignorant of important problems. The typical Auxiliary member desires to know the truth about matters which concern medicine. She desires to have complete mastery of the data on such questions.

The next step after self-education is the education of the public. Equipped with true facts, the doctor's wife is able to pass this information on to others. In this aspect the educational and public relations committees go hand in hand. Every member of the Auxiliary belongs to various lay organizations, parent-teacher associations, federated clubs and church groups. No club is too limited a field in the work of education for the Auxiliary member. Every social contact affords one more opportunity for disseminating factual information concerning the medical profession.

After establishing contacts with other groups, the work of public relations goes on apace. The role of the Auxiliary member is one perfectly fitted to her by nature, for as a buffer any woman is at home. Things a doctor could never bring himself to say can be said by her with perfect propriety; defense of the medical profession against unjust attacks will come from her without any violation of the ethics of the profession, and many telling blows can she deal the enemy. Further, having interested herself in lay organizations, she is in a position to promote the work of the speakers' bureau of her local medical society in order that the work of educating the public in health matters may be done by those best fitted for it and not left to unscrupulous impostors. This concerted effort cannot help but bring results and work to the advantage of both the physician and the layman.

The organization does not claim to have fulfilled all its aims. Some of these, they realize, are Utopian, and yet like Goethe, it believes that it is necessary to strive for the impossible in order to attain the possible. And so it keeps on year after year, and each year leaves behind a brighter record of achievement. As the representative and ally of the doctor, the Auxiliary member will continue to go on along the channels that have been marked out for her to follow, and she will feel amply repaid if her efforts lighten the doctor's burdens and help him advance the ideals of the noblest profession in the world.

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"NEW BROOMS AND OLD COBWEBS"

One of the hopeful signs of the times is the tendency to bring the subject of venereal disease out into the daylight. Any adult can remember when the newspapers euphemistically called syphilis the "nameless disease" when they were obliged to refer to it, whereas today this genteel evasion is superseded by the forthright designation of a spade as a spade, and much space is devoted to the subject in lay publications.

On going through the medical literature of the last few months one is struck by the increase in articles dealing with the prevention and control of venereal disease, indicating a growing realization of its importance as a public health problem. This interest will doubtless be crystallized by the conference held in December under the direction of Surgeon General Thomas Parran, at which the question of venereal disease control was approached from six standpoints and recommendations for action made.

Particular stress was laid on the importance of education of both the medical student and the practicing physician and, through them, of the general public. In order to stimulate the interest of our own members the following articles are suggested:

Education of the physician and the movement for venereal disease control, John H. Stokes; *Journal of the American Medical Association* 107:866-871, September 12, 1936.

The civilian educational program in the control of syphilis, N. A. Nelson; *Journal of the American Medical Association* 107:872-874, September 12, 1936.

The problem of syphilis and gonorrhea in relation to the private physician, John L. Rice; *Preventive Medicine* 6:7-11, January, 1937.

The control of syphilis; some of its prob-

lems, John H. Stokes; *Venereal Disease Information* 17:315-340, November, 1936.

The administration of the syphilis control program, R. A. Vonderlehr; *Journal of the American Medical Association* 107:782-784, September 5, 1936.

Public health control of syphilis, Thomas Parran, Jr.; *Annals of Internal Medicine* 10:65-72, July, 1936.

Venereal disease control program, I. I. Lubowe, *Medical Record* 144:21-26, July 1, 1936.

Syphilis and gonorrhea as a major public health problem, R. A. Vonderlehr; *Virginia Medical Monthly* 63:366-370, September, 1936.

The value of instructing syphilis patients, M. J. Exner; *Preventive Medicine* 6:12-17, January, 1937.

Control of syphilis and gonorrhea in Scandinavian countries and Great Britain, C. W. Clarke; *American Journal of Syphilis, Gonorrhea and Venereal Disease* 20:7-63, July, 1936.

The role of the private physician in the control of venereal disease, George Baehr; *Preventive Medicine* 6:17-21, January, 1937.

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SERVING ON COMMITTEES

By An Observer

Serving on a committee of a county medical society is a task which should be taken seriously or the appointment not accepted at all. This premise takes for granted that the committee appointed has something to do and has not been created merely to give some physicians an assignment.

Each committee member is under an obligation to serve faithfully and contribute something of real worth to his organization. Many do not realize this and are perfectly willing to let one or two on the committee do all the planning and the work that is necessary. Are you that kind of a committee-man?

It might be interesting to consider the ideal member of a committee. What are his qualifications and how does he meet his responsibilities?

First, he should have the interest of the medical profession at heart. This may seem a platitude; however, the doctor who fulfills this qualification is rarer than is generally thought, for he must often submerge his personal feelings to aid in the accomplishment of what is best for the profession.

Secondly, he will give thought and study to the subjects which come up before the committee and will not just be one of those present. It is surprising how few people will assume responsibility or feel it their obligation to do more than is absolutely demanded of them. No committee can do much on behalf of the profession which is not made up of members who are genuinely interested in the tasks to which they have been assigned and are willing to give the time necessary to put through the plans they have evolved.

Third, he will make it a point to be on hand for all meetings unless his professional duties require him elsewhere. So many physicians accept committee appointments and fail to attend. These are often practitioners who for some time have felt that they deserve appointment to a committee.

Nothing is so demoralizing to a committee as to have two or three out of ten or fifteen members present. There is no quorum; therefore, no action can be taken. Those on hand become discouraged and unless interest is

somehow stimulated they also drop out and the committee becomes dormant.

Fourth, he will not allow one or two men to assume the entire burden for developing plans but will contribute ideas of his own. It is easy to find fault and not contribute oneself. Unless the physician has worthwhile contributions to make to the committee, he should not serve on one. This does not mean that he must be in agreement with other members of the committee, but when a thorough discussion has been held the majority opinion should rule and he should subscribe to it.

Fifth, he will do what he can to contribute toward an orderly and not overlong meeting. Many committee members take up time with unnecessarily long discussions of unimportant details or if the subject is of importance, too much time discussing it. Nothing is so discouraging to a committee as long and tiresome sessions.

Committees can do much to improve the efficiency of medical societies because most of the planning is in their hands. Their personnel, however, should be carefully selected from among those men who will meet the qualifications here described. Only then can they justify their existence. At least that is the opinion of this observer.

Bulletin of the Erie County Medical Society, Buffalo, N. Y.

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Important Happenings in the Tacoma General Hospital During the Fall

1. Changes of staff are as follows:

Miss Sutherland resigns February 1st to be married; however, she will continue pre-professional course for hospital at College of Puget Sound until close of term.

Miss Harvey becomes Director of Education.

Miss Greenough, just back from Chicago Lying In, appointed Nursery Supervisor to assist Miss Hamilton.

2. Cystoscopic room now on 2 North; complete service for urologists.

3. Rotating anode tube and new Bucky table on way; may require higher energizing unit; films markedly superior to present ones.

4. State Orthopedic Clinic for children from 14 to 21, conducted by State Department of Public Welfare, held January 29th.

5. Tacoma General Hospital Orthopedic Clinic, for children from birth to 14, now once a month; 2nd Thursday, beginning February 11th.

6. Faculty has 100 per cent membership in National League of Nursing Education. Only one other hospital in United States has this record.

7. Twenty-five students capped at impressive ceremonies January 8th. Fifteen new students enter February 2nd.

8. Thanks extended to those doctors who gave new chair to Nurses' Home for Christmas.

9. Hospital accredited by National Association Nurse Anesthetists for course in anesthesia. One-year course given by Miss Koski; Miss Erdahl, student.

Patient: "Doctor, are you sure this is pneumonia? Sometimes doctors prescribe for one thing and patients die of something else."

Doctor (with dignity): "When I prescribe for pneumonia you die of pneumonia."

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NEWS ITEMS

Dr. S. P. Lehman has been appointed City and County Health Officer at Olympia, succeeding Dr. B. D. Holland, who has joined the United States Army Medical Service and is now stationed at Fort Stevens, Oregon.

Dr. and Mrs. W. B. McCreery are receiving congratulations upon the birth of a second granddaughter, Helen Norris, whose parents are Mr. and Mrs. Frank Norris, of San Francisco.

Dr. and Mrs. W. G. Cameron are residing at 303 Seventeenth Avenue, West, Olympia, during the State Legislature.

Dr. and Mrs. W. W. Pascoe are leaving on a journey of several months which will take them through most of the European countries.

Dr. R. D. Wright, formerly of the Northern Pacific Hospital Staff, has been elected president of the newly formed Coulee Dam

Medical Society.

Dr. and Mrs. T. H. Duerfeldt and family are spending several weeks in California.

Mrs. E. F. Dodds has returned from Denver, where she was called by the sudden death of her mother, Mrs. M. G. Pratt.

The Morton hospital, under the direction of Dr. C. B. Ritchie, has just been opened.

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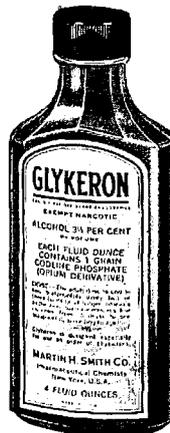
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Literature on request

Dr. Christen Quevli, Jr., is back in his office after a vacation spent in Southern California. He was accompanied by Mrs. Quevli and their little daughter.

Dr. G. M. Steele was elected to membership in the Pierce County Medical Society; Dr. C. H. Kinnear offered resolutions covering changes in by-laws; two clinical cases were presented by Dr. A. S. Monzingo; Dr. W. B. Penney was elected to membership. (Extracts from minutes of meetings of Pierce County Medical Society on February 6 and 20, 1912.)

Dr. M. W. Abernethy is to give a paper entitled "Building Amalgam and Other Plastic Filling Materials to Contour With a Tailor-Made Matrix That Assures Separation, Stability and Fracture Immunity" at the Chicago Dental Society midwinter meeting on February 15.

Dr. and Mrs. A. E. Hillis, Dr. and Mrs.

W. H. Ludwig and Dr. and Mrs. C. V. Lundvick were recent visitors to Los Angeles, where Drs. Hillis, Ludwig and Lundvick attended the midwinter course in Eye, Ear, Nose and Throat.

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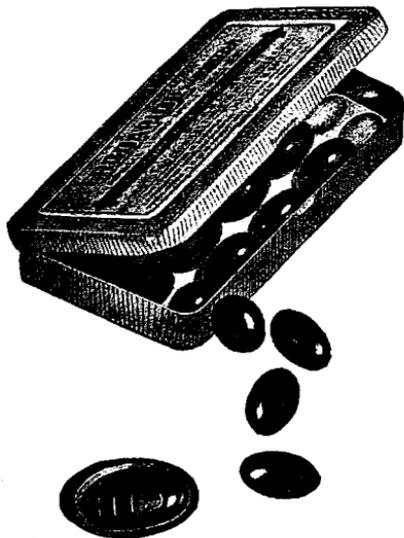
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Vol. VII.

MARCH, 1937

No. 3

P R O G R A M S

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Dinner—6:30 P. M.

MARCH 12

Neuropsychosis in Hypertension.....Dr. Karl Menninger,
Menninger Clinic,
Topeka, Kas.

• • •

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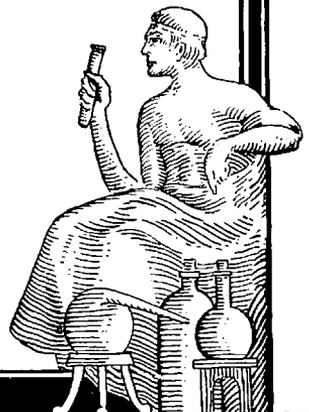
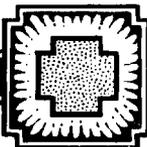
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2,500 YEARS OF WISDOM

An important phase of medicine is the ability to appraise the literature correctly.—Hippocrates.

In all things relating to diseases, credulity remains a permanent fact uninfluenced by civilization or education.—Osler.

The most important therapeutic factor in medicine is therapeutic success. It is of greater moment than all special investigations, be they ever so exact, and than all ingenious theories.—Bernard Aschner.

Where there is love of humanity, there also is love for the art of medicine.—Hippocrates.

Physical ills are the taxes laid upon this wretched life; some are taxed higher, and some lower, but all pay something.—Chesterfield.

We all labor against our own cure, for death is the cure of all diseases.—Sir Thomas Browne.

He who has health, has hope; and he who has hope, has everything.—Arabian Proverb.

It is not the disease but neglect of the remedy which generally destroys life.—Latin Proverb.

I do not say that no drugs are useful; but there is not enough discrimination in their use.—Sir William Gull.

In acute diseases, the prediction of outcome is very uncertain.—Hippocrates.

God has not inflicted diseases upon us, without at the same time supplying remedies.—Mahomet.

Give nature a chance, but help Nature. Keep things about you in such shape that you will lessen the possibilities of attack. Try to prevent.—Maimonides.

Truly it is better to cure diseases than to foretell their course, but this is unfortunately not always possible.—Hippocrates.

—Pittsburgh Medical Bulletin.

THE BUSINESS BUREAU

THE BUSINESS BUREAU

By E. J. Burrough
Collection Manager

It wasn't so long ago that physicians were just "Doc this" or "Doc that," and your patients were Sam, Jim or Harry. You knew them well and they knew you. It was no guesswork to determine if they could and would pay because you lived by and with these people, as your friends; you were their "Doc."

Then came the machine age with the keynote of progress. Large cities, more immigrants, more knowledge, more greed and more than all the revamping of all enterprises into a business. It is for this reason that it is necessary to have a central bureau to work with physicians—like it or not—fight it if you desire, but the general public has forced the old "Doc" to become a Doctor, a specialist, a business man.

The fundamental principle behind every organization or individual giving credit is the intelligent investigation of customers or clients. Now this is no impossible task to a business. An order may be held up until a report is made, but with a physician often the call is an emergency one for treatment which must be given before a check can be made.

The Physicians' and Dentists' Business Bureau has made every attempt to cope with this problem, and it was with these variations in mind that our credit program was instigated. We have provided a system to keep you informed of any credit change or record of your patient. This system is in form of a

monthly report sent to you at no additional cost. The intelligent or businesslike method of handling your general accounts AFTER the service has been given and charge made is as important as the credit record on these people BEFORE the account is contracted. You cannot do this unless you know if any other doctor has bills against the patient, what he is spending, buying, if he is being sued by anyone, if account is probate, divorce, home loans, etc.

Many of our members do not seem to realize the value of this service and fail to send in a list of their clients who have outstanding or unpaid balances. These lists should be sent in each month so that we will have on record those who owe you and be able to send you information about them.

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- Stitt: Practical Bacteriology
- Sutton: Diseases of the Skin
- Lewis: Practice of Surgery, Vol. 8
- Tice: Practice of Medicine, Vol. 9
- Moorhead: Traumatotherapy
- Babcock: Textbook of Surgery, ed. 1
- Archives of Otolaryngology, Vol. 14
- Archives of Neurology & Psychiatry, May, 1936
- Archives of Surgery, November, 1936
- Journal of Urology, April, 1935
- Journal of Urology, July, 1936
- American Journal of the Medical Sciences, January, 1935

This is undoubtedly due to two factors: first, the material has been taken out and mislaid and the borrower is unable to find it; second, it has been taken out in the absence of the librarian and no record has been left. Therefore, the Library Committee has decided to establish the following rule:

In the absence of the librarian any person obtaining the key to the library must sign the book in the business office and will at that time receive a slip as follows:

I have not taken any books or periodicals from the Medical Library.

I have taken the following from the Medical Library:

This slip must be returned to the business office when the key is returned.

Strange as it seems, a number of the members of our profession have criticized the telephone operator in the business office because they had to go through the formality of signing a book when the key was obtained. Kindly remember that this girl is only the

agent of the medical society and if any individual wishes to be discourteous it will be appreciated if he will address his remarks to the chairman of the Library Committee.

S. M. MacLean, *Chairman*,
Library Committee.

The Library has just received Vol. 3 of *Nostrums & Quackery*, to which the title of *Pseudomedicine* has been added. If you wish to tell a patient what is in Old Dr. Smogg's Stomach Bitters, good for man and beast, this book will help you.

The publishers have sent us complete replacements for several volumes of the *Oxford Monographs*—The *Diagnosis and Treatment of Diseases of the Liver and Biliary Tract*, by John Phillips, *Arthritis*, by R. L. Cecil and *Diseases of the Stomach and Intestines* by W. F. Cheney.

Other recent accessions are the new *Keys & Ferguson Urology* and *Industrial Poisons* in the United States by Hamilton.

Material on these subjects has been furnished recently: Vincent's angina, dermoid cysts, breech presentation, Meniere's disease, uterine hemorrhage, ulcerative colitis, glaucoma, salivary calculi, Barany's test, protamine insulin, amebiasis, insulin shock in schizophrenia, wound infection, splenomegaly, thyroglossal cysts, skin grafting, mesenteric thrombosis, regional ileitis and infectious mononucleosis.

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The March meeting will be a tea at the home of Mrs. H. S. Argue, 3520 North Washington, at 2 o'clock on the 10th. Mrs. E. F. Dodds will review news clippings on medical matters and will then introduce Mrs. James D. McCann, of Longview, Washington State Commander of the National Cancer Campaign, who will speak on educating the public in cancer prevention. Mrs. A. E. Hillis will give an informal talk on Mexico and show articles of interest collected on her recent trip. Following a group of Mexican songs, tea will be served. Assisting Mrs. George H. Stalter, chairman, will be Mesdames R. S. Garnett, E. W. Janes, C. H. Kinnear, G. G. R. Kunz, A. C. Leslie, P. C. Kyle, C. V. Lundvick, C. R. McCreery, W. B. McCreery, W. B. McNerthney, R. E. McPhail, N. C. Mace, S. M. MacLean, R. D. MacRae, F. R. Maddison, W. W. Mattson, R. W. Monaghan, W. A. Monroe and R. H. Rea.

HYGEIA

I am Hygeia,
Daughter of Aesculapius and Epione.

I am Hygeia, Goddess of Health;
I will put the breath of lilac in your nostrils,
I will make your eyes like the windows to a
cloudless morning,
I will pour the fresh roses of dawn in your
blood.

I am Hygeia,
And I come wherever men call me.
I walk in the gutters and give them the beauty
of meadowlands,
Flaming with flowers. I knock at the hovel
And turn all its windows to casements,
Its doors into portals. I hang on its walls
in the sunlight
The rich tapestries of clean thoughts.

I am Hygeia;
Give me the mothers
And I will banish forever the darkness of
birth;
Give me the children
And I will give them a power and a fleetness
That shall outdistance all sickness
And folly and woe and the travails of child-
hood;
Give me the youths and the maidens;
I will turn all their dreams into wisdom.
Give me the mothers and fathers
And I will transform all their gardens to
kingdoms,
Their homes into palaces. I am Hygeia,
Goddess of Health, crying ever and clamoring
To regain once more the lost multitudes.
Will you not walk with me?
Will you not aid me?

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“DON'TS”

If Doctors will learn to observe the following advice they will save themselves from much trouble:

1. Don't assign accounts to a collection agency until you ascertain the standing and reputation of the agency.

2. Don't fall for "directories" that promise you business if you will pay a certain sum for listing your name.

3. Don't take out an insurance policy because you are given a promise of appointment as a medical examiner or member of their panel of physicians.

4. Don't operate on a minor without written consent of the parent or guardian.

5. Don't perform a sterilization operation on a minor without a court order. On those who have attained their majority, secure written consent.

6. Don't operate on anyone without a clear and full understanding as to the nature of the operation. See *The Journal of the American Medical Association*, p. 33, January 4, 1936, issue, for forms for consent for operations, examinations, and autopsy.

7. Don't sue for a fee until the statute of limitations has prevented any counter suit for malpractice.

8. Don't report on services rendered to life insurance companies without patient's consent. Obtain fee for these reports from the company.

9. Don't make affidavits until you know their purpose.

10. Don't fail to obtain consultation or advice when you are doubt.

11. Don't employ lay technical X-ray and laboratory persons. Use licensed physician's laboratories.

12. Don't violate patients' confidential physician-patient relationship.

13. Don't fail to keep complete accurate records.

14. Don't be an easy mark in falling for agents' representations.

15. Don't sign till you know what you are signing.

16. Don't fail to consult your investment banker before investing in any business or promotion scheme.

17. Don't prescribe narcotics for transient persons.

18. Don't sign a death certificate if you have not seen the patient within thirty-six hours before death. Call the coroner.

19. Don't neglect carrying indemnity defense insurance.

20. Don't break the Golden Rule.

—California and Western Medicine.

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Old Way...

CURING RICKETS in the CLEFT of an ASH TREE

FOR many centuries,—and apparently down to the present time, even in this country—ricketic children have been passed through a cleft ash tree to cure them of their rickets, and thenceforth a sympathetic relationship was supposed to exist between them and the tree.

Frazer* states that the ordinary mode of effecting the cure is to split a young ash sapling longitudinally for a few feet and pass the child, naked, either three times or three times three through the fissure at sunrise. In the West of England, it is said the passage must be "against the sun." As soon as the ceremony is performed, the tree is bound tightly up and the fissure plastered over with mud or clay. The belief is that just as the cleft in the tree will be healed, so the child's body will be healed, but that if the rift in the tree remains open, the deformity in the child will remain, too, and if the tree were to die, the death of the child would surely follow.

*Frazer, J. G.: *The Golden Bough*, vol. 1, New York, Macmillan & Co., 1928



It is ironical that the practice of attempting to cure rickets by holding the child in the cleft of an ash tree was associated with the rising of the sun, the light of which we now know is in itself one of Nature's specifics.

New Way...

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Like other specifics for other diseases, larger dosage may be required for extreme cases. It is safe to say that when used in the indicated dosage, Mead's Oleum Percomorphum is a specific in almost all cases of rickets, regardless of degree and duration.

Mead's Oleum Percomorphum because of its high vitamins A and D content is also useful in deficiency conditions such as tetany, osteomalacia and xerophthalmia.

Mead's Oleum Percomorphum is not advertised to the public and is now obtainable at drug stores at a new economical price in 10 c.c. and 50 c.c. bottles and 10-drop capsules.

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TACOMA SURGICAL CLUB

The Tacoma Surgical Club will hold its annual meeting on April 3, with Dr. George W. Crile, of Cleveland, Dr. Gordon B. New, of the Mayo Clinic, and Dr. Paul B. Magnuson, of Chicago, as guest speakers. The subject to be considered this year is "The Surgery of Congenital Defects," and members of the club are hard at work preparing an exceptionally fine demonstration of embryology and congenital defects, with a view to bringing the knowledge of this subject up to date.

Tacoma Internists' Society

March 16—6 P. M.—Tacoma Hotel

- Poliomyelitis.....Dr. L. S. Baskin
- Influenza—A Virus Disease?...Dr. H. J. Hards
- Review of Recent Literature on Rheumatic Fever.....Dr. L. A. Hopkins

Doctor: "Did Johnnie take his medicine like a man?"
 Mother: "Yes, he made an awful fuss."

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NEWS ITEMS

Dr. and Mrs. Lawrence McNerthey are receiving congratulations upon the arrival of a little daughter, Mary Helen, who was born on February 10.

Dr. A. W. Howe has been elected president of the Puget Sound Academy of Ophthalmology and Dr. J. Arnason Johnson, vice president.

The engagement of Miss Janet Newton, of Seattle, and Dr. George A. Moosey, of the Northern Pacific Hospital staff, has just been announced.

Dr. F. H. Luce, a charter member of the Pierce County Medical Society, died at the Zenith Sanatorium on February 1. Dr. Luce had not practiced medicine for many years, having served as vice president of the Fidelity

Science, Doctors or Medicine have not found a way to avoid patronizing morticians. When you need their services see the

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Dr. and Mrs. R. H. Beach are spending some time in Mexico City. They will return about March 15.

Jones: "Is your wife out of danger yet?"

Brown: "No, not yet. The doctor is going to make two or three more visits."

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BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

Vol. VII

APRIL, 1937

No. 4

P R O G R A M S

MEDICAL ARTS BUILDING AUDITORIUM

8 P. M.

APRIL 13

Closed meeting of the Pierce County Medical Society
Members only.

• • •

MEDICAL ARTS BUILDING AUDITORIUM

APRIL 27

8 P. M.

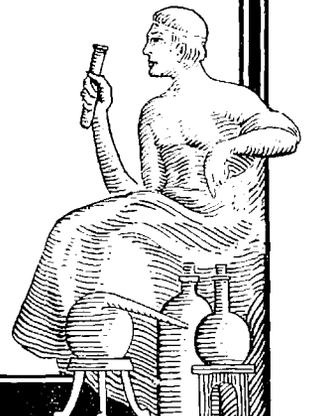
Program to be announced later.

—○—

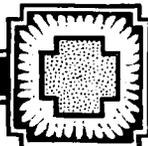
See page 3 for program of Tacoma Surgical Club.

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ING HUMANITY



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Dr. C. D. Hunter	Dr. W. W. Mattson
Dr. W. B. McCreery	Dr. J. A. LaGasa
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Once again the Pierce County Medical Society has the pleasure of joining with the Tacoma Surgical Club in welcome to their guests. We are glad to greet and renew our friendships with the many visiting doctors from all parts of the state and the Northwest, and to extend a most hearty welcome to those who are here for the first time. We trust you will find your visit both pleasant and profitable and that we may sow the seeds of acquaintanceship which will ripen into years of lasting friendship.

We are grateful to those who have come from afar, especially to the honored guests who contribute to our program—Dr. George W. Crile, of Cleveland, whose original work and writings have made his name known throughout the world, to Dr. Paul B. Magnuson, of Chicago, whose work in bone is so well known and to Dr. Gordon B. New, of the Mayo Clinic, who is so well known to us all and whom we again are pleased to have with us.

The Surgery of Congenital Defects is the subject selected for this day's study. The members of the Surgical Club have worked hard in arranging an attractive program, consisting of dissections, anatomical and surgical demonstrations and X-Ray and pathological exhibits. These will be shown on the third floor, Medical Arts Building from 9 A. M. to 12 noon. At 12:30 there will be a no host luncheon and round table talks.

The afternoon session will be held in the Medical Arts Building Auditorium at 2 P. M., and will consist of addresses by Drs. Crile, Magnuson and New.

The evening meeting at 8 o'clock in the Baptist Church will be under the auspices of the club and the American College of Surgeons. This is a public meeting and all our friends are cordially invited to attend.

The Program

DR. H. G. WILLARD, Presiding Officer
Invocation.....Rev. Weldon M. Wilson
Medicine of the Future....Dr. George Crile
Seven Wonders of Medicine
Dr. Bowman C. Crowell

Posture in Health and Disease

Dr. Paul B. Magnuson

Light in the Home and School

Dr. Edward Jackson

Diet in Health and Disease

Dr. Charles Higgins

Rehabilitation After Disease or Injury

Dr. Gordon New

The local and visiting ophthalmologists will hold a luncheon at noon at the Winthrop in honor of Dr. Edward Jackson, of Denver, one of the oldest and most beloved of American ophthalmologists.

The Washington State Obstetrical Society will held its regular Spring meeting at 6 P. M. at the Winthrop, with dinner and round table discussion on puerperal sepsis, contracting and retracting bands, anatomy of pelvis, and pre-natal and post-natal care. All those interested are invited to come.

The Tacoma Surgical Club

Saturday April 3rd

Morning Session 9 a. m. to 12 noon

MEDICAL ARTS BUILDING

THIRD FLOOR

RALPH C. SCHAEFFER, M. D., *Director*

1. Development of the Embryo.
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Horace J. Whitacre, M. D.
2. Demonstration of Developmental Anomalies of the Face and Neck.
Millard T. Nelsen, M. D.
3. Anatomical Dissection of the Neck.
Edwin C. Yoder, M. D.
Woodward A. Njethammer, M. D.
4. Developmental Defects of the Heart.
Burton Brown, M. D.
5. Anatomical Dissection of the Upper Abdomen.
Leo J. Hunt, M. D.
William B. Mc Nerthney, M. D.
6. Demonstration of Congenital Anomalies of the Kidney and Ureter.
Charles S. Pascoe, M. D.

7. Anatomical Dissection of the Genito-Urinary System.
Hiram S. Argue, M. D.

8. Dissection and Demonstration of the Development of Inguinal Hernia.
Karl S. Staatz, M. D.

9. Anomalies of the Female Pelvis.
Charles McCreery, M. D.
William McCreery, M. D.

10. Congenital Deformities of the Spine. Clinical Demonstration.
Edgar F. Dodds, M. D.
William H. Goering, M. D.

11. Anatomical Dissection of the Hip Joint. Demonstration of Surgical Treatment of Congenital Dislocation.
Harry B. Allison, M. D.

12. Demonstration of Congenital Anomalies of the Rectum.
Siegfried F. Herrmann, M. D.

13. Exhibit of Pathological Specimens from Tacoma General Hospital.
Benjamin T. Terry, M. D.

14. Exhibit of Pathological Specimens from Western State Hospital.
Charles B. Larson, M. D.

15. X-Ray Demonstration.
Bernard D. Harrington, M. D.

16. X-Ray Demonstration.
Raymond D. McCrea, M. D.

Afternoon Session 2 p. m.

MEDICAL ARTS BUILDING AUDITORIUM
FIRST FLOOR

HARRY G. WILLARD, M. D., *Presiding*

1. Congenital Defects of the Face and Neck.
Gordon B. New, M. D.
Mayo Clinic, Rochester
2. Surgery of Congenital Defects of the Spine.
Paul B. Magnuson, M. D.
Chicago
3. Newer Points of View on Metabolism and Their Clinical Applications.
George W. Crile, M. D.
Cleveland

Evening Session 8 p. m.

Public Health Meeting at the First Baptist Church under the auspices of the Tacoma Surgical Club and the American College of Surgeons.

THE BUSINESS BUREAU

COLLECTION RACKETS

A Tacoma physician was looking through some very old unpaid accounts dating back seven or eight years. A solicitor for a national collection agency said to him, "Let me take those accounts and work on them. It isn't necessary to make any contract, just let us have the names and the amounts."

In a month or two, the doctor began to receive letters from his annoyed and disgusted patients, saying that they had been bothered by threatening letters from a Los Angeles connection agency. The accounts as stated in these letters were larger than when the doctor had made out the original list and the dates of service had been altered to make them legal. Some of the patients wanted to know why a reputable physician would allow his accounts to be handled in this manner.

In a short while other physicians began to report the same difficulty and some of them reported that they had inadvertently sent in for collection the names of some patients whose accounts they had assigned to the Bureau, and which the Bureau had collected. The racketeers had insisted upon obtaining a fifty percent commission on these accounts, and were able to produce a signed contract which gave them the legal right to sue the doctor.

One of the newest rackets is to ask a doctor for the accounts which have been returned by the Bureau as uncollectable.

Letters are then written to those patients, telling them that the account has been placed for collection, and giving a very large unpaid balance. The letter then asks the patient to correct this figure if it is error. When the indignant patient writes to the racketeering agency citing the correct figure, the letter becomes an admission of debt and the patient is sued. Unfortunately, the doctor's name is always mentioned in these communications.

There are many rackets in the collection business, of which these are perhaps the latest. Years ago the situation became so bad that the physicians and dentists of this county organized their own business bureau. The organization of the Business Bureau, however, had one unfortunate result. It was like the false immunity from contagious disease which follows after a few years in which no cases of the disease are reported. Immunization programs break down when there is no incidence of the disease, and pave the way for a particularly severe onslaught.

The Business Bureau has been able to abate so many nuisances in the collection business as to allay the suspicions and the watchfulness of the doctors, thus making an easy approach for the collection racketeers. It should be remembered that every account given by a professional man to a commercial agency for collection is a blow to the doctor's own organization and to himself, and hampers the effort to reduce racketeering in the collection business.

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Withdraw toxic materials
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BLANCHE L. DEWITT, LIBRARIAN

WHAT THE REVIEWERS SAY OF SOME OF OUR RECENT BOOKS

"Endocrinology in Modern Practice." By William Wolf, M.D., M. S., Ph.D.

This volume includes special chapters devoted to each of the glands and then sections concerning various types of disorders recognized as glandular. Supplementing these special considerations is the second portion of the book, which is concerned with the various systems of the body and special medical groups so far as they are concerned with glandular disturbances. The final two divisions are devoted to endocrine diagnosis and endocrine preparations. In a field in which there is vast overenthusiasm and much diffuse knowledge, the author provides an excellent summary. Obviously, most of the doubt in this field is concerned with the application of the knowledge to therapy. Here again the author has exercised admirable restraint in his recommendations.

"Disability Evaluation. Principles of Treatment of Compensable Injuries." By Earl D. McBride, B.S., M.D., F.R.C.S.

The author has attempted to evaluate injury to the body structure by an appraisal of each factor which enters into the disability. For example, the four factors making up the total anatomic result are: (1) length, (2) alignment (total) by inspection and measurement, (3) apposition judged by roentgenograms taken in two planes, (4) angulations.

The same system of determining value is applied to functional and economic results. The book is most complete in its analysis of injury of every part of the body: bones, nerves, joints, abdominal viscera, eye, ear and all other structures together with most valuable suggestions for treatment of many injuries.

"The Eye and Its Diseases." By 82 International Authorities. Edited by Conrad Berens, M.D.

In this volume competent ophthalmologists throughout the world cooperate to present

a complete textbook. Eighty-two authorities are included. The book follows the classic procedure in medicine of beginning with history and proceeding to anatomy and physiology, examination, refraction, disease, medical ophthalmology, injuries, treatment and prophylaxis. There are also chapters on the legal aspects of ophthalmology, immunology and laboratory diagnosis. The section on anatomy and physiology are excellently illustrated and the section on routine examination is practical.

"Allergy of the Nose and Paranasal Sinuses." By French K. Hansel, M.D., M.S.

In the preface of this book the author outlines his work as follows: "The object of this monograph is: (1) To familiarize the otolaryngologist with the clinical features of allergy as related to the field of otolaryngology, (2) to review the various phases of the subject itself and, (3) to point out the frequent association of its nasal with the other manifestations, particularly, (a) asthma, (b) gastrointestinal allergy, (c) allergic skin diseases, and (d) allergic headache."

The subject matter is approached primarily by the consideration of: (1) The fundamental principles of physiology, biochemistry and bacteriology of the secretions, (2) the cellular reactions of the tissues in allergy and in immunity, (3) the histopathology of allergy as they relate to the nose and paranasal sinuses.

"Diseases of the Nose and Throat." By Charles J. Imperatori, M. D., F.A.C.S.

The authors state that it is for the beginner as well as the specialist of ear, nose and throat work. Each subject is covered in a thorough manner and the authors confine their discussion to those phases which have chiefly clinical application. The first part of the book is taken up with general necessary office equipment, and various conditions of the nose and sinuses. In the latter part of the book he takes up most thoroughly the larynx, esophagus and trachea, going minutely into the anatomy and pathology of these parts. This contribution to the literature is useful not only to the specialist but to the general man as well.

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to PIERCE COUNTY MEDICAL SOCIETY

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The next meeting of the Auxiliary will be a tea at the home of Mrs. D. M. Dayton, 4131 Madrona Way, on Thursday, April 8. The speaker of the afternoon will be Dr. John F. Steele, whose subject will be "How We Breathe," illustrated with moving pictures.

SYPHILIS

Reprinted from Auxiliary page, Pittsburgh Medical Bulletin, Pittsburgh, Pa.

The medical profession has declared war on syphilis.

I wonder how much we might be able to help in this work of stamping out syphilis in America if we, as the doctors' helpers, went about it with the definite purpose of providing places where the story of syphilis might be told. Is there not a real field here for the Auxiliary in co-operation with parent-teacher groups?

What does the average adult know about

syphilis? Ask some of your friends and you will find that knowledge ranges from absolutely nothing to a very nebulous idea of two venereal diseases, "one of which is in the blood."

If the United States is to be freed of syphilis, education of the people is necessary. Here is a timely topic for health programs in women's clubs.

Let us, as doctors' wives, get behind this war which the medical profession has launched, doing what is given to us to do, giving where we are asked to give.

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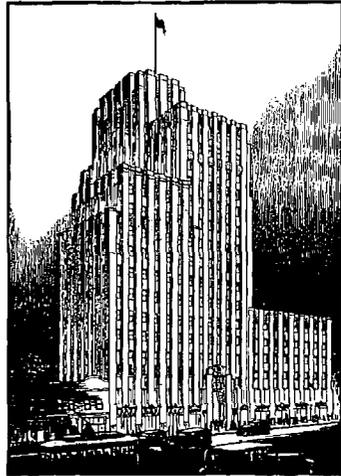
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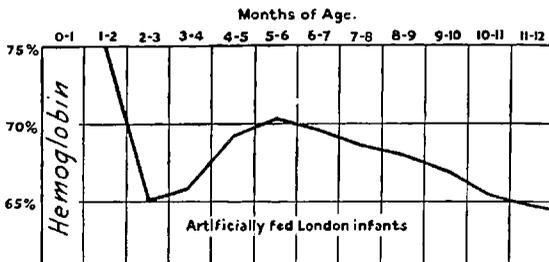
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Nutritional Anemia in Infants

The accompanying chart of the hemoglobin level in the blood of infants is based on more than 1,000 clinical cases studied by Mackay. The sharp drop in hemoglobin during the early months of life has also been reported by a number of other authorities. It is noteworthy that this fall in hemoglobin has been found to parallel closely that of diminishing iron reserve in the infant's liver.

The usual milk formula of infants in early life further contributes to this anemia because milk is notably low in iron. It is now possible, however, to increase significantly the iron intake of bottle-fed infants from birth by feeding Dextrin-Maltose With Vitamin B in the milk formula. After the third month Pablum as the first solid food offers substantial amounts of iron for both breast- and bottle-fed babies.



Reasons for Early Pablum Feedings

1. The iron stored in the infant's liver at birth is rapidly depleted during the first months of life. (Mackay,¹ Elvehjem.²)
2. During this period the infant's diet contains very little iron—1.44 mg. per day from the average bottle formulae of 20 ounces, or possibly 1.7 mg. per day from 28 ounces of breast milk. (Holt.³)

For these reasons, and also because of the low hemoglobin values so frequent among pregnant and nursing mothers (Coons,⁴ Galloway⁵), the pediatric trend is constantly toward the addition of iron-containing foods at an earlier age, as early as the third or fourth month. (Blatt,⁶ Glazier,⁷ Lynch⁸).

The Choice of the Iron-Containing Food

1. Many foods reputed to be high in iron actually add very few milligrams to the diet because much of the iron is lost in cooking or because the amount fed is necessarily small or because the food has a high percentage of water. Strained spinach, for instance, contains only 1 to 1.4 mg. of iron per 100 gm. (Bridges.⁹)
2. To be effective, food iron should be in soluble form. Some foods fairly high in total iron are low in soluble iron. (Summerfeldt.¹⁰)
3. Pablum is high both in total iron (30 mg. per 100 gm.) and soluble iron (7.8 mg. per 100 gm.) and can be fed in significant amounts without digestive upsets as early as the third month, before the initial store of iron in the liver is depleted. Pablum also forms an iron-valuable addition to the diet of pregnant and nursing mothers.

Pablum (Mead's Cereal thoroughly cooked and dried) consists of wheatmeal, oatmeal, cornmeal, wheat embryo, brewers' yeast, alfalfa leaf, beef bone, iron salt and sodium chloride.

¹⁻¹⁰ Bibliography on request.

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DOCTOR'S ADVICE

I'm often cautioned by the docs to eat at certain hours; "That man is wiser than a fox who thus his food devours. This thing of eating now and then, as well as here and there, has ruined many stalwart men," the thoughtful docs declare. "A man should always watch the clock, and when the hour arrives he'll eat his victuals from a crock"—and thus the race survives. The docs insist what we should eat at certain stated times; and if this system meets defeat, we are accused of crimes. But how about the good old docs? They are chasing here and there; they take some doughnuts in a box, to serve as bill of fare; they eat a pie at 9 o'clock, some wienerwurst at 10, for they must lope around the block to save some fellow-men. To save the life of some poor scout their cars the road devour, and they must eat a can of kraut at 60 miles an hour. At intervals a quiet night invites them to repose; at home, they feel the rare delight that but the tired man knows. But when they there sit down to eat, they hear the telephone; old Jimpson

fell upon the street and smashed his collar-bone. And so they take their cross-cut saws, their knives and guillotines, and labor in a worthy cause—what chance is there for beans? The docs must catch their custard pies and eat them on the bounce; and yet they hand us counsel wise that's worth five bucks an ounce.

—Exchange.

Patient: "But, Doctor, are you charging me \$2.00 just for taking a cinder out of my eye?"

Doctor: "Er—my charge is for removing a foreign substance from the conjunctiva."

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NEWS ITEMS

Dr. John H. Mills, University of Chicago, '33, has recently joined the staff of the Western Clinic, coming to Tacoma from the Mayo Clinic.

Our sympathy is extended to Drs. Weldon W. Pascoe and Charles S. Pascoe in the loss of their father, Rev. James Pascoe, who died in Coronado, California on March 26 at the age of seventy-seven years.

Drs. Turner, Penny, Duerfeldt and Maddison attended the meeting of the North Pacific Society of Internal Medicine in Portland on March 20.

Dr. Miles Parrott, Northwestern, '34, who served his internship in West Suburban Hospital, Oak Park, Illinois, has opened offices at 750½ South 38th Street. Dr. Parrott was elected to membership in the Pierce County Medical Society on March 23.

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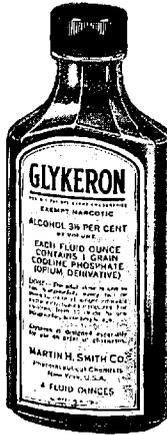
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Literature on request

MARTIN H. SMITH COMPANY · NEW YORK

Dr. and Mrs. C. G. Trimble and family have just moved into the new home which they have purchased at 620 South Union.

Dr. and Mrs. R. H. Beach have returned from an automobile trip to Mexico City.

Dr. Edward Jackson, of Denver, is a Tacoma visitor this week.

Dr. and Mrs. W. G. Cameron are at home after two months spent in Olympia during the legislative session.

Dr. D. M. Dayton has been re-elected president of the Tacoma Rose Society.

A daughter was born on March 6 to Mr. and Mrs. Gershom Rowland. The little girl is a granddaughter of Dr. and Mrs. C. D. Hunter.

Dr. and Mrs. A. G. Nace are visiting their son, Dr. F. M. Nace, who is serving his internship in Alameda Hospital, Oakland.

TACOMA INTERNISTS' SOCIETY

TACOMA HOTEL APRIL 20 6 P.M.
Epidemic Meningitis-----Dr. E. W. Janes
Epidemic Encephalitis---Dr. W. B. Penney

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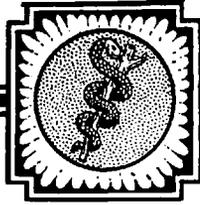
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BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

Vol. VII

MAY, 1937

No. 5

P R O G R A M S

MEDICAL ARTS BUILDING AUDITORIUM

May 11

8 P. M.

Election of Officers

(See list of nominees on page 8)

Report of County Health Officer.....Dr. H. D. Jones

Report of City Health Officer.....Dr. S. M. Creswell

• • •

WINTHROP HOTEL

May 25

6:30 P. M.

Annual Dinner

Message from the President of the Society

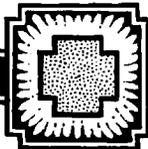
Installation of New Officers •

Guest Speaker

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A sixteen-year-old girl came to the doctor's office with a medical relief ticket. She said she wanted an order for more milk than she was then receiving. A few months before she had married a boy of about her own age, whose education extended to the fourth grade in the public school. Her mother objected to the union but the license was issued and the ceremony performed by a justice of the peace. The girl's fourteen-year-old sister was a witness.

On the night of marriage the girl returned to her home, but spent the next week with her husband in an auto camp. The boy was picked up by the police for an investigation and he was found to have dementia praecox and was committed to the hospital for the insane. While grieving for the loss of her husband's company the girl found consolation in the embraces of another young man. She is now pregnant.

At the time of marriage the total finances of the young couple amounted to five dollars. The most of this was spent for the fees for license and ceremony. At present she is penniless.

Here are two young people with no means of self-support, starting life as a burden on society. She will be on relief for a long time and he is a permanent ward of the State. They have united and brought an unfortunate child into the world, whose future portends nothing but poverty and suffering.

Such misfit marriages are of common occurrence. Only the exceptional case is brought to public notice. Elopements and the so-called gin marriage get publicity according to the social status of the participants or the resultant divorce proceedings.

In the olden times matrimony was not entered into so lightly. Most marriages received the sanction of the church, and the posting of the marriage banns gave due notice of the coming event. Public opinion and the views of friends and neighbors had a restraining influence against the uniting of unsuited people.

There has been a decline of the power of the

church and a lack of interest in religion, as it pertains to the daily lives of the community. The vows are spoken more and more frequently without the solemnity and sanctity of a church service. Young men and girls go before a justice, or a minister who makes a special business of marriage. They answer a few perfunctory questions, pay the fee and are on their way in a few moments. Often they have an acquaintance of but a few days or hours. No question is asked as to parental consent or the financial ability to make a decent living. There is no investigation of the family history or previous personal conduct, no inquiry into the health or mental condition of the participants. There are obliging marrying parsons and justices of the peace who are ready and willing to unite any and all who will pay the price.

Today we are in need of more stringent laws governing the license to marry. Such laws should require the lapse of a reasonable time after the license is issued before marriage could take place. Both applicants should present a medical certificate of examination. The health requirements need not be very stringent, but should, at least, compel each party to show a negative reaction to the Wassermann blood test.

These measures should be fairly easy to put into effect today, while the anti-syphilitic campaign by the Public Health Service is being conducted. Results are shown already in a change of public opinion. Staid and proper newspapers now write editorials concerning this scourge and people of intelligence and

refinement no longer hesitate to recognize the existence of this disease. As the campaign progresses the whole mass of people will be more conscious of syphilis and its dire effects in late life and in the succeeding generations.

Birth and death, marriage and divorce are sociological questions, but they are also medical problems. Marriage is pre-eminently such. Population is increasing at an amazing rate. In Europe the population remained at about 180 million from the sixth century to the year 1800, while 1920 showed a growth to 446 million, and our own country has grown to its present millions of inhabitants in a comparatively short space of time.

The weak and diseased, the malformed, the congenital deaf and blind, the idiotic and insane, all are kept alive by modern science and supported by the State. Among the large number of unemployed persons who are being supported by those who are able to work are many who are unemployable. They are unfit and always have been unfit to perform any services to take proper care of themselves. Medicine is engaged in a war to prevent disease. Its present great objective is to stamp out existing syphilis and to prevent its occurrence. Here is a great opportunity to spread the knowledge of this insidious disease and how it affects the lives of the offspring of syphilitic parents unto the third and fourth generation.

A substantial program of education along these lines will do much to create a public sentiment that will demand a revision of our marriage laws which will prohibit marriage of the unfit and will prevent their reproduction.

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THE BUSINESS BUREAU

Trends in medical service, in public welfare and in social security are broader than medicine and deeper than political parties. Most consumers of medical services can have little to say about procedures and results except those which are wholly financial. Judgment on these matters must be left, more largely than in most economic issues, to those who furnish service—physicians, hospitals, dentists and nurses. Of especial importance, therefore, is the participation of these professions and agencies in policy-making and in administration. These groups should thus be assured fair conditions of service and of remuneration, and the public in turn can properly hold physicians and hospital authorities largely responsible for the efficient and economical organization of services and institutions. Fortunately, the underlying trends within medicine and its allied groups are in the same direction as those trends which have pressed upon medicine as a result of general social and economic changes. As exemplified in the development of hospitals, clinics and the organization of their professional staffs under community control, these currents of professional change have been moving forward steadily, with but occasional local back-washes, for at least 25 years.

Looking into a crystal ball is dangerous to the reputation. But no second sight is required to discern, among next moves, the forward march of public health work, extended to more rural areas; intensified and broadened in the cities. Public health authorities will come to grips not only with communicable diseases like tuberculosis and syphilis, but also with diseases which are infused with a public interest because they are prevalent, costly and capable of reduction if certain known measures are available for the use of physicians and patients. Cancer, pneumonia and diabetes are already within this group. Laboratory, clinical and administrative research will add

more diseases to the list, particularly, it may be hoped, those prevalent in the later periods of life.

Mose: "Doc, I've jest been bit by a dawg."

Doctor: "I hope it wasn't a rabid dog."

Mose: "Nossuh, it was a bird dawg."

On Being Old

Age is a quality of mind;
If you have left your dreams behind,
If hope is cold,
If you no longer look ahead,
If your ambition's fires are dead—
Then you are old.

But if from life you take the best,
And if in life you keep the jest,
If love you hold;
No matter how the years go by,
No matter how the birthdays fly—
You are not old.

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OPERATIVE SURGERY, in two volumes, by Horsley and Bigger, with contributions by specialists in the fields of neurology, urology and orthopedics.

THE MANAGEMENT OF OBSTETRIC DIFFICULTIES, by Titus. This book is designed primarily to meet the needs of the general practitioner rather than the specialist.

HANDBOOK OF ORTHOPEDIC SURGERY, by Shands. This work also will have a particular appeal to the general man.

MATERIA MEDICA, TOXICOLOGY & PHARMACY, by Mansfield. Embodied in the text are portions of the U. S. Pharmacopoeia and National Formulary. Classification is such as to permit ready reference and photographs of each vegetable and animal drug are provided.

ROENTGEN INTERPRETATION, by Holmes and Ruggles, presents the newest in X-ray technic and diagnosis.

CLINICAL ALLERGY, by Rowe, just off the press, will unquestionably prove to be one of the most popular and useful books in the library.

THE OCULAR FUNDUS IN DIAGNOSIS AND TREATMENT, by Atkinson, takes up the anatomy of the normal eye and describes ocular manifestations of systemic disease.

ANATOMY OF THE HUMAN BODY, by Gray, an old friend in a new dress, has just appeared in its twenty-third edition. While much of the original text is used, this new edition embodies the latest additions to the knowledge of anatomy.

TRAUMA AND DISEASE, edited by Brahdry and Kahn, with contributions by spe-

cialists in many fields, covers the relationship of a single trauma to disease and the principles upon which a medical opinion should be based.

MODERN UROLOGY, in two volumes, edited by Cabot, is the third edition of this well-known work. It is comprehensive and thoroughly up to date in all respects.

From time to time we like to tell our members how much their contributions are appreciated. Most of the material given to us finds a use, either in our own library or by exchange with other libraries. Recent gifts include ten bound volumes of Archives of Ophthalmology from Dr. Lundvick, Urologic & Cutaneous Review, Hygeia, Life and various other magazines from Dr. Engels, regular contributions of Annals of Surgery and Surgery, Gynecology & Obstetrics, also Industrial Medicine & Surgery by Mock, from Dr. Schaeffer, American Journal of Cancer, given us regularly by Dr. MacLean, American Journal of Ophthalmology and Archives of Otolaryngology, presented each month by Dr. Bell, various books from Dr. W. W. Pascoe, Annals of Internal Medicine, which Dr. Maddison gives to us regularly, Western Journal of Surgery, Obstetrics & Gynecology, recent Yearbooks and other magazines from Dr. Whitacre, Journal of Pediatrics from Dr. Dayton, many numbers of International Clinics and Surgical and Medical Clinics of North America from Dr. LaGasa, Journal of the American Dental Association, a regular gift from Dr. Taylor, Eye, Ear, Nose and Throat Monthly and Laryngoscope from Dr. J. A. Johnson, Surgery, Gynecology & Obstetrics from Dr. Argue, Hygeia, from Dr. Light, Medical Clinics, Hygeia and other magazines from Dr. Penney and Northwest Medicine and Journal of the A. M. A. from Drs. Herrmann,

(Continued on Page 12)

WOMAN'S AUXILIARY

to PIERCE COUNTY MEDICAL SOCIETY

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A tea will be given by the Woman's Auxiliary to the Pierce County Medical Society Thursday afternoon, May 13th, at the home of Mrs. W. B. Penney, 3018 North Puget Sound Ave. The business session will be at 2 p. m.

Following the business session there will be a program of songs by Mrs. Darrel H. Running.

For the tea hour Mrs. H. S. Argue will be chairman, and she will be assisted by the following Auxiliary members: Mesdames D. H. Running, R. C. Schaeffer, A. L. Schultz, K. S. Staatz, G. H. Smith, J. F. Steele, C. G. Trimble, J. R. Turner, G. J. Vandenberg, E. D. Warreen, H. J. Whitacre, G. A. Wislicenus, W. A. Moore, H. F. Griffin, Ray Morse, T. C. Rummell and Joseph Griggs.

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Woman's Auxiliary to St. Louis County Medical Society sponsors "Health Day" program, featuring social hygiene education.

Philadelphia County Woman's Auxiliary has "Health Institute" in society rooms, with talks on health subjects.

Salt Lake County Auxiliary, Utah, chooses for the year's work an educational program on venereal disease control.

Milwaukee County Auxiliary, Wisconsin, equips loan cupboard of bedside and nursing equipment for Visiting Nurse Association, for rental at a nominal cost or for free use of those unable to pay.

Queen's County Auxiliary, New York, holds annual Child Health Day programs, with health exhibits and health movies, and presents loving cups to schools in recognition of co-operation in health work.

Fresno County Auxiliary, California, sponsors debate on state medicine.

Luzerne County Auxiliary, Pennsylvania, conducts Maternal Welfare Institute.

Ridge Medical Auxiliary of South Carolina has "listening in" parties for broadcast of "Your Health" programs.

Mercer County Auxiliary, Pennsylvania, has fund for under-privileged school children.

Iowa State Auxiliary seeks to secure co-operation of school officials, stressing importance of medical advice in school health programs.

Minnesota State Auxiliary co-operates with state Public Health Association in essay contest on the subject of "The Thirty-Year Fight Against Tuberculosis."

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TACOMA SURGICAL CLUB MEETING

The Tacoma Surgical Club on April 3, 1937, held its annual public meeting, devoting the day to a study of the "Surgery of Congenital Defects." This program was arranged in co-operation with and following the Northwest Sectional Meeting of the American College of Surgeons.

Following the usual custom of the Tacoma Surgical Club, the morning session was devoted to dissections, anatomical demonstrations and a story in clay models of the development of the embryo and of congenital anomalies of the face, neck, abdomen, back, genito-urinary system, female pelvis and the rectum. The pathological exhibit, including pathological specimens from the Western State Hospital and a demonstration from the Tacoma General Hospital, attracted particular attention. The X-ray technicians of the two Tacoma hospitals also furnished an unusual X-ray display of congenital anomalies of the bones.

This meeting differed from previous meetings in that clinical material was presented showing developmental anomalies of the face and neck and orthopedic anomalies. The quality of these demonstrations was unusually high because of the time and attention given by each member of the club to the preparation of his material with special reference to its teaching and demonstration value.

Visiting guests, including Dr. Gordon B. New of Rochester, Dr. Paul B. Magnusson of Northwestern University, and Dr. George W. Crile of Cleveland, presented papers for an audience which completely filled the Junior Ballroom of the Winthrop Hotel. A public meeting was held in the evening at the First Baptist Church before a very large and appreciative audience.

The registration at this meeting was large and the guest speakers and other visitors were very enthusiastic in their approval of the originality and scientific value of the program. The Club members were highly pleased by the favorable comments of our honored guests, all of whom were University teachers.

Minutes of Regular Meeting of April 13, 1937

The resignations of Drs. A. W. Bridge, I. A. Druess and C. E. Wiseman from membership in the society were read and accepted.

Dr. W. W. Mattson showed a case of recovery from a severe crushing injury of the spine. A case of edema of the right arm of no determined origin was shown by Dr. R. C. Schaeffer. Drs. W. H. Goering and W. W. Mattson presented a case of multiple abscesses following stye and boils.

Dr. H. J. Whitacre gave his demonstration of embryology, illustrated by casts and clay models as given at the recent Surgical Club meeting.

Dr. B. T. Terry presented a series of lantern slides showing various congenital anomalies.

Committees were elected to bring in nominations for officers and trustees for 1937-8.

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Minutes of Regular Meeting of April 27, 1937

Nominating Committees presented their reports as follows:

TICKET NO. 1

President: Dr. A. H. Buis.

Vice President: Dr. A. E. Hillis.

Secretary-Treasurer: Dr. W. B. Penney.

Trustees: Dr. V. E. Crowe, Dr. L. J. Hunt.

Delegate: Dr. S. M. MacLean.

Trustees of Business Bureau: Dr. C. C. Leaverton, Dr. A. E. Hillis, Dr. E. W. Janes, Dr. D. M. Dayton.

TICKET NO. 2

President: Dr. A. H. Buis.

Vice President: Dr. C. C. Leaverton.

Secretary-Treasurer: Dr. W. B. Penney.

Trustees: Dr. T. K. Bowles, Dr. E. W. Hanson.

Delegate: Dr. W. B. Penney.

Trustees of Business Bureau: Dr. H. G. Willard, Dr. A. W. Howe, Dr. H. J. Whitacre, Dr. W. B. Penney.

Dr. W. D. Read gave a report on the Social Security Act providing for a committee of the medical society and the dental society. Drs. V. E. Crowe, F. R. Maddison and L. A. Hopkins were elected to serve on this committee.

Rules regarding the use of the lantern and moving picture machine belonging to the society were adopted.

Dr. C. L. Whitmire gave a paper on "The Psychoses of Shakespearean Characters," with discussions by Drs. R. H. Rea and G. H. Smith.

Dr. B. D. Harrington spoke on "Uterine Bleeding." This paper was discussed by Drs. S. F. Herrmann, W. W. Mattson and J. R. Turner.

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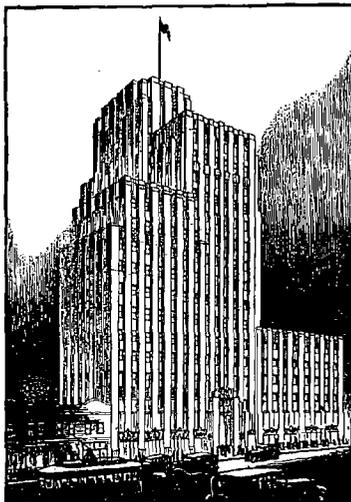
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TACOMA GENERAL HOSPITAL

There are 35 nurses in the graduating class this year. The Commencement Exercises will be held Wednesday, May 12th, at the First Baptist Church.

Mrs. Lenert Ceder (Anette Sutherling) has resigned as Director of the Educational Department and Miss Cleda G. Harvey has been appointed to this position.

We are grateful to Drs. Bell, Bruenner, Clay, Creswell, Duerfeldt, Goering, Harrington, Havlina, Herrmann, Howe, Janes, D. Johnson, Jonez, Magill, C. McCreery, W. McCreery, Nelsen, J. Steele, Stewart, Terry and Trimble for lecturing to the nurses during the past year.

Our appreciation goes also to Drs. Goering, Allison, Dodds, Clay, Dayton, Nelsen, and others for service to the children of the Tacoma General Hospital Children's Clinic during the past year.

Drs. B. D. Harrington and B. T. Terry announce that the Tumor Clinics will continue through the summer months.

The radiographic equipment is completely new and comprised of a Bucky table, rotating anode tube and accessories.

The last Staff Meeting of the year will be Tuesday, May 4th. They will be resumed in September.

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Literature on request

LIBRARY

(Continued from Page 5)

McNerthney, Janes, Dodds, Mattson, Nie-thammer, J. A. Bowles, Magill, Griffith, Howe and Griffin.

Mrs. Frances L. Embree, librarian of the King County Medical Society, visited our library on April 10.

Latest addition to our periodical list is the new magazine *Surgery*, whose editors are Dr. Alton Ochsner and Dr. Owen H. Wangensteen and whose Advisory Council, Editorial Board and Committee on Publications comprise many of the best-known names in the profession.

The April issue of *American Journal of Surgery* is devoted to "Office Surgery," and will appeal particularly to the general practitioner. The more common minor procedures and traumatic emergencies are covered.

We have just received replacements for numerous chapters of the *Oxford Looseleaf Medicine*. Of particular interest are chapters on disease of the blood vessels, by Graham, disease of the thyroid, by Boothby and Plummer, and septicemia by Tileston and Poole.

PERSONAL

Dr. B. A. Brown has been elected First Vice President of the Washington State Hospital Association.

Our heartfelt sympathy is extended to Dr. J. P. Kane and his children in the death of Mrs. Kane.

Back at home after a Mediterranean cruise are Dr. and Mrs. W. W. Pascoe, who left Tacoma in February.

Dr. and Mrs. George A. Moosey, whose marriage was an event of last month in Seattle, are at home at 1418 North Tenth Street.

Mrs. S. S. Keller, mother of Dr. W. N. Keller, passed away recently at Council Bluffs, Iowa.

Drs. H. J. Whitacre and B. T. Terry addressed the Sectional Meeting of the American College of Surgeons at its recent session in Seattle.

Mrs. J. Gordon Love, of Rochester, Minnesota, has been visiting her parents, Dr. and Mrs. B. T. Terry.

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Dr. and Mrs. G. G. R. Kunz have just returned from a ten-day trip to California.

Mrs. Frank Grandy, wife of Dr. Frank Grandy, formerly of the staff of the Northern Pacific Hospital, died in Seattle on April 12.

Young Bud Hopkins appears to be having about as wonderful a time in Washington as a boy could imagine, even if he were very, very talented at imagining wonderful times, the high point being a picnic with the President, "Uncle Harry," Secretary Ickes and Secretary Wallace.

The Tacoma Public Library reports that a book, "The Cause and Cure of Cancer," by Nichols, has been turned in there. If this is the property of one of our members he may call for it at the main library.

Dr. J. A. LaGasa has been suffering from an ear infection, having spent some days at St. Joseph's Hospital.

Miss Helen M. Casey, who specializes in colonic therapy, taking only referred cases, has

joined the ranks of our advertisers. Miss Casey trained at Sacred Heart, Spokane, and Ralph C. Walker School of Physical Therapy, Portland.

A former advertiser returned to our columns is the Sunnydale Goat Dairy, who stress the fact that their herd is free of Bangs disease and who invite you to visit their plant at Des Moines.

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THE UNHOLY MINORITY (A Diagnosis)

By L. R. Effler, M. D.

There is nothing basically wrong with the practice of medicine either as it now stands or has stood since the beginning of history. The faults are incidental. They may be extrinsic and intrinsic. Extrinsic faults, such as unemployment, unequal distribution of wealth, and the like, are of an economic nature over which the profession has no control. Intrinsic faults of which it does have control, are limited largely to comparatively few doctors and could be eliminated. If faults were corrected, there would be practically no ammunition left for socially-minded reformers of Medicine.

Doctors! Quit blaming social workers, public health agencies, and highly endowed foundations for all our troubles! Place some of the blame on our own shoulders! Hold the mirror up to nature and see ourselves as others see us!

Begin with an assumption. Consider roughly that 75 per cent of our practitioners are conscientious and reflect credit upon themselves individually as well as on the profession as a whole. This proportion may not be accurate, but let it serve for the sake of argument.

What about the remaining 25 per cent of our practitioners? We believe that many, but not all, belong to a class of "rugged individualists" actuated almost solely by motives of self-interest. Their self-aggrandizement, social and mercenary, is at the expense of the public whom they serve, and their medical brethren, whom they should consider. These are the fellows who do most of the damage.

The services of the plodding majority we seldom hear about because accepted as a matter of course. The services of the exploiting minority we hear plenty about because they shriek to high heaven and because they are assumed by aggrieved patients to be the methods of all practitioners.

Let us enumerate a few of the outstanding sins of this Unholy Minority.

First, over-charging for surgical or medical services. For instance, insisting that an operation is worth so much, instead of gauging the charge by the patient's ability to pay.

Second, over-treating a case. Dragging it out endlessly so that Medicine is placed in a bad light.

Third, needless operations brought about by exaggerations of the consequences of avoiding surgery instead of a proper exposition of the pros and cons.

Fourth, needless operations brought about through vicious untruths. These are calculated to trade on a patient's fears by painting pictures of helpless insanity, life-long invalidism, and the like, in consequence of postponement.

Fifth, attempting operations or treatments for which the physician has definite inability to qualify.

Sixth, posing as a specialist when training has been inadequate.

Seventh, over-consultation by passing a patient needlessly through a form of clinic-mill.

Eighth, laboratory examinations that may be as unnecessary as they are expensive.

Ninth, the practice of always finding oddities or abnormalities in each patient where none exists.

Tenth, the practice of looking puzzled or scratching the head in perplexity at each new case.

These last two instances may serve to im-

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press the uninitiated patient by appealing to his pride. They are good salesmanship, but bad ethics. They usually result in "making mountains out of mole hills" and at times frighten a patient when he needs mental comfort and bodily relief.

Eleventh, turning a deaf ear to medical economics questions, so vital at present, and pretending an interest in scientific Medicine alone.

Twelfth, playing the hypocrite by prating loudly of medical ethics and posing as a Pillar of Medicine to the laity, while in reality committing in actual practice every one of the 57 varieties of violations of ethics.

Thirteenth, miscellaneous, which include any and all not mentioned above.

Let us each of us examine our conscience and find out whether we fall into any of the above categories. Perhaps our sins may seem only venial in our own eyes. Yet they all prove mortal in the aggregate to the fair name of Medicine and to the interests of the majority. The difference between the Unholy Minority and the Holy Majority lies in the fact that the former sins consistently and knowingly while the latter may sin occasionally only and mostly unwittingly.

The Unholy Minority is doing nothing to save Medicine and everything to jeopardize it. It furnishes the fuel for distrust and suspicion. It supplies the objectionable methods which are gossiped about by dissatisfied patients until they reach the ears of reformers and amount to a hue and cry for a change in the present medical system.

—Bulletin of the Medical Society of the County of Kings, New York.

TACOMA INTERNISTS' SOCIETY

Tacoma Hotel — May 18 — 6:30 P. M.

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—Spokane County Medical Society Bulletin.

Johnnie: "What is a consulting physician, Pop?"

Father: "A doctor called in at the last minute to share the blame."

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Go out among your fellows and learn of them—mix with them.

Speak only when you have something to say. And when you speak, assert only that of which you know.

Respect your colleagues. Do not judge them by the reports of patients.

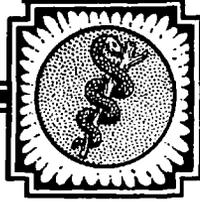
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BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

VOL. VII.

SEPTEMBER, 1937

No. 6

P R O G R A M S

MEDICAL ARTS BUILDING

8 P. M.

SEPTEMBER 14

The Crippled Child.....Ruth Whiteside, Staff Assistant,
Department of Social Security, Olympia

Report of Delegates to Washington State Medical Association
Meeting.

• • •

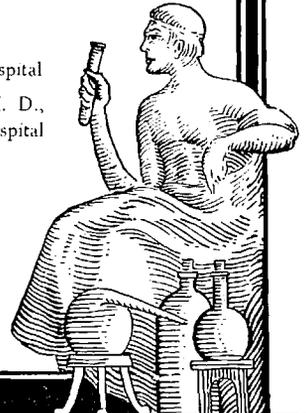
SEPTEMBER 28

Status Hypoplasticus (Status Thymolympathicus)
C. P. Larson, M. D., C. M., Western State Hospital

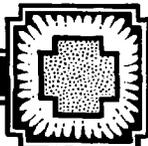
Pathological Demonstration.....B. T. Terry, M. D.,
Tacoma General Hospital

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Dr. R. D. MacRae	Dr. A. W. Howe
Dr. L. J. Hunt	Dr. W. W. Mattson

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News.....	Dr. P. C. Kyle

Pierce county has been a pioneer in the study of medical economics and their practical application to medical practice.

During the war the Pierce County Medical and Surgical Bureau was formed and continues to function today. When the question of caring for the needy sick arose during the depression, the Pierce County Bureau was able to make a contract with the Government at once. It was a going concern. It had years of experience. In consequence, these doctors of Pierce County received pay for these services before any other groups in the state. Today the bureau plan has been adopted by the State Medical Association and each county has its bureau.

Pierce County was one of the earliest, if not the first society to co-ordinate all its activities by establishing a central Business Bureau, which included a collection department, a credit department, a doctor's telephone exchange, and a nurses' registry, together with headquarters of the Anti-tuberculosis Society and the Society of Social Hygiene.

Our members have taken an active part in the work of the Committee on Economics of the Washington State Association, and in numerous public health activities and medical surveys. In an endeavor to get information upon the various aspects of medical practice, such as private practice, clinics or groups, contract practice, medical insurance and state medicine, an organization was formed called The Foundation for Social Research in Medical Care. This was made possible through the generosity of one of our public-spirited citizens, who furnished the money needed to pay expenses. The by-laws state that the governing board shall be constituted of one member of the county medical society, one member of the county dental society, one lawyer, one minister of the gospel, one doctor engaged in contract practice and a representative of a hospital. The president of the Pierce County Medical Society is a member ex-officio. In addition to these, there is a representative of

the Chamber of Commerce, a member of the State Social Security Board and an editor on the present board of governors.

There has been some criticism of the actions of the Foundation and of the different surveys and studies. It has been remarked that Pierce county was growing tired of being a medical guinea pig, and that this questioning of medical practice would create a public opinion that would be hostile to the individual doctor and favor state medicine.

In order that the members of the society may be informed, the Bulletin publishes this month a short resume of the work done. This deserves careful reading and thought. A better understanding of the work may be had by calling at headquarters, where the director will be glad to give anyone what information he may desire.

While the Foundation is not an activity of the medical society in the strictest sense, its findings are of the utmost importance to the medical profession. The study of medical economics must include the views of the laity. The patient must be consulted and his wishes ascertained.

It is well at the beginning of a new medical year to think over all these things, to take stock of what we have done in the past and to map out a program for our future activities.

The committee is hard at work preparing the Public Health exhibit for the Puyallup Fair.

This year promises to be the finest exhibit yet given. Murals are being prepared, showing the progress and discoveries of medicine

through the ages. There will be the usual models and charts illustrating various medical procedures and displays of X-Ray and specimens. Pierce County may well be proud of this exhibit, which in other years has been loaned to different cities throughout the state. Be sure and tell your patients to visit the exhibit.

PREVIEW OF FAIR EXHIBIT

There will be a preview of the Medical Exhibit at the Puyallup Fair on Sunday, September 12 at 2 p. m. All doctors and their wives are invited. The bus entrance will be open.

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STORY OF THE FOUNDATION

The Foundation for Social Research in Medical Care was organized in November, 1932. Its history goes farther back, however. When the Business Bureau was organized in 1931, it was found that many problems arose which could not be dealt with for lack of information. It was recognized at that time that medical economics was changing, and that problems were going to arise.

There was a great deal of theorizing from many quarters, most of which showed lack of understanding of the medical point of view. It could be seen that if the profession was to take the lead in the solution of its problems, it must have complete and accurate data. It was also seen that the work of gathering and analyzing reliable data is impossible except by means of personnel and money.

A few of the leading spirits of the medical profession saw this need and induced a philanthropist to endow a fund to do the necessary work. The purpose was to find some solutions for medical problems that would meet with the approval of the medical profession.

Work was begun, and great quantities of statistical material have been compiled, analyzed and filed. It has not proved useless to collect this material. Although much of it has not yet been used, some surprising uses have been found for many parts of the work of the Foundation.

Two years ago, the question of the operation of the County Hospital and the County Sanitarium was raised by the County Administration. There was no money available to continue the operation of these institutions, and some-

thing had to be done. The Foundation was asked to submit a plan and did so from its data. The plan was put in operation and saved these institutions. The recommendations which the Foundation made also brought about the reorganization of the County Farm. The success of the reorganization of these institutions led to further work on behalf of the County, and the Foundation assisted in the preparation of a budget which would enable the County to recover its financial equilibrium. That budget was adopted.

About the same time the opportunity came to develop a new and modern medical exhibit at the County Fair. New quarters were available, but no means was at hand to develop the proposed exhibit. The Foundation through its connection with the Federal Government was able to obtain a force of workmen who were loaned to the Fair Committee. Each year since that time the Foundation has assisted in supplying ushers and other personnel for the exhibit at the Fair. Some of the material used in these exhibits was also arranged for and developed by the Foundation. When the City of Tacoma entered the Public Health competition, the Foundation was asked for data to aid in the contest. This data was supplied, and after Tacoma won the National contest, the Foundation has continued to assist the Public Health Council in developing the program which was recommended by the National Survey. The reorganization of the

(Continued on Page 9)

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BLANCHE L. DEWITT, LIBRARIAN

For the benefit of those who are scheduled to present papers during the coming months, this abstract of an article by Dr. W. A. O'Brien, of the University of Minnesota, is offered:

The subject of a talk is most important. When you are invited to speak it is assumed that you have something to offer. The same is true if you request an opportunity to be heard. Too often we hear physicians say that they get a great deal out of preparing a talk even if no one did from listening to them. I believe this is the wrong attitude. The subject we select should be pretty well in hand before we offer it to a program committee.

After you have selected your subject write down in a few words the reason for your selection. The best subject for the average man to attempt is some common condition. In it he should correlate his own experience with that of others. It is assumed that his audience knows a considerable amount about his subject. His hope is to bring their knowledge up to date by various additions and subtractions to current concepts.

The next step is to outline your speech. Select from four to six points and stick to them. After they have made their outline, some speakers write their entire speech at once. Most lecturers, however, find it more desirable to write their speeches after they have spent most of their time thinking over the points they intend to make.

Extemporaneous speech is the ideal form. The word is often misunderstood, as it is confused with impromptu speech. Extemporaneous speech means "speech delivery out of the moment." It is thinking on our feet as the result of long and adequate preparation. It is not memorized speech.

Most good speakers are not orators. They follow the conversational mode. A person who is a good conversationalist with very little change in his technic can become a good speaker. In conversation we do not speak in a monotone or continue after it is obvious that our listeners are becoming bored. We vary our voices as to quality and rate of utterance and we watch our listeners to see

if they are interested. The first training in improving our speech method is to attempt to improve our conversational ability.

Use short, simple sentences. If you find yourself in an involved statement, stop and start over. We should attempt to make comprehension easy. It is up to the audience to get our meaning at once or not at all.

Never apologize at the beginning of a speech. If you feel that your effort is not to be your best it is too late to make amends. In the average case, sufficient time has elapsed to make proper preparation. If you have done this there is nothing to apologize about.

Most of us offend by failing to speak loudly enough to be heard. We should form our vowel sounds in the mouth, never the nose or throat. If we wish to be heard by a large crowd we should put the power from deep down in the diaphragmatic region and relax the throat.

Use illustrations freely. Scientific men should be able to explain what they mean. If you are going to talk about lantern slides, speak with the lights out and move right along with your discourse. If you are using only a few slides or an assorted group, it is much better to show them at the beginning or the end of your talk.

Beware of using complicated statistics. Condense your material into statistics of the simplest sort. In the short amount of time your audience has to see them it is difficult for them to get the same information from your charts that you do.

What is the secret of talking to non-professional groups about scientific matters? The answer is very simple for all that you have to do is to put yourself in the place of the audience. Simple, dignified, sympathetic speech should always be employed and every statement weighed in advance, to avoid misinterpretation. In spite of your best efforts, you will fail, but do not worry too much about this, as the main purpose of such discussions is to interest the listener and make him want to know more about the subject.

Ending a speech is an art. The best time to stop is when you are supposed to or when

WOMAN'S AUXILIARY to PIERCE COUNTY MEDICAL SOCIETY

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2nd Vice President.....	Mrs. C. P. Gamton
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Mrs. Jesse Read	Mrs. Cyril Lundvick
Mrs. J. A. Keho	

Membership

Mrs. D. M. Dayton, Chairman
Mrs. Scott Jones

Middle Life" and Mrs. Charles G. Welker gave a program of songs.

chairman, was assisted by the following auxiliary members: Mesdames Harry Allison, Ivan Balabanoff, Lester Baskin, Robert Beach, D. H. Bell, Samuel Blair, John Bowles and Albertus Buis.

"THE TEN COMMANDMENTS"

Mrs. David W. Thomas of Lock Haven, president of the Woman's Auxiliary to the Medical Society of the State of Pennsylvania is widely known because of her "Ten Commandments for the Doctor's Wife," which have been widely printed.

She must NOT know the meaning of the word "jealous."

She must never gossip.

She must run a cafeteria, serving meals at all hours for her husband.

She must be—like Caesar's wife—above reproach.

She must have self-reliance and self-control.

She must be able to think quickly and sanely in emergencies.

She must be a diplomat, see all, hear all, say a lot, yet say nothing.

She must learn to bear stoically and without complaint, disappointments in her personal plans.

She must be a good mother and father, because doctors are often too busy to discipline their own children.

She must be a good "doctor" because doctors never take time to "doctor" themselves.

—Bulletin of the Lackawanna
County Medical Society,
Scranton, Pa.

The first tea of the club year was given by the Woman's Auxiliary to the Pierce County Medical Society Thursday afternoon, September 9, at the attractive home of Mrs. Christen Quevli, Sr., Lakeview. The business session began at 2 p. m. and Mrs. W. B. Penney, retiring president, turned over the gavel to Mrs. John F. Steele, who will be president for the coming year.

Following the business session Mrs. C. G. Trimble spoke on "Mental Hygiene in

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Story of the Foundation

(Continued from Page 4)

County Health Service is one of the items that was recommended at the time of the National Survey, and the Foundation is now engaged on this problem.

When the State of Washington asked the medical profession to develop a method for the medical care of welfare clients, the Foundation was able to supply basic data for the formation of that program. Recently the Resettlement Administration of the Federal Government has asked the medical profession to develop a program for the care of its clients. The data which the Foundation had previously collected on medical costs was very useful to the Resettlement Committee in developing its recommendations and in assuring that the method of operations of the Resettlement Administration plan would result in a program satisfactory to the medical profession.

The Foundation has also been able to assist the Public Health Council, the Y.W.C.A. and the Y.M.C.A. in the preparation of their annual programs; and in the case of the Public Health Nursing Association, methods have been developed through the Foundation studies for the extension of that service on a broader basis.

The Foundation is now engaged in a further study of the County Hospital and Welfare Department services, a medical service for teachers in the Tacoma Public Schools, additional data to be used by the Committee

on Resettlement Administration, and a summary of the costs of medical care in Pierce County for the Economics Committee of the County Society. All the work that has been done has been released only upon the approval of the appropriate committee of the Medical Society. Costs have amounted to more than \$100,000.00, no part of which came from the organized medical profession.

Communicable Diseases

JULY

Chickenpox	8
Whooping cough	28
Erysipelas	1
Cerebrospinal meningitis	1
Measles	1
Typhoid fever	2
Scarlet fever	3
Mumps	16

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Library

(Continued from Page 5)

your audience is getting bored. When either time comes, summarize in a few words the main points that you hope you have made and then sit down. While it may be a pleasant surprise when you stop suddenly, there is little to be said in favor of this method of ending a talk. Give your audience a few minutes' warning so that they may relax with you.

When you get up to speak you may think the situation is new and novel, but it has happened thousands of times before. Most good speakers would rather speak than do anything else. If you do not feel this way about it you had better ask yourself how you can improve your speech technic for, after all, we are social beings and like the approval of our fellow men.

NEWS ITEMS

Dr. Willard is now traveling through the Panama Canal to New York where he will stay for a rest before coming home.

Dr. Hopkins is Chairman of the State Medical Dental Board which handles Medical and Dental Relief for the State.

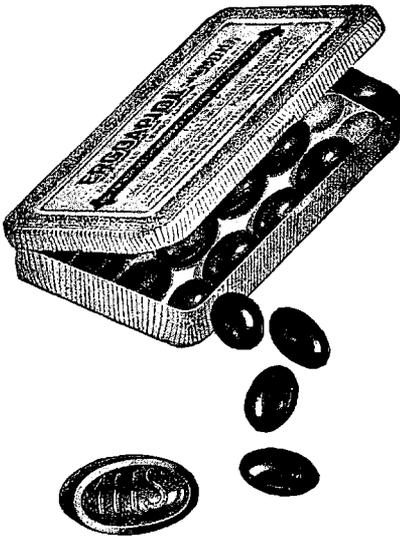
Dr. MacRae was with a group of Doctors at Point Lawrence on Orcas Island fishing.

The profession is looking forward to the early return of Dr. LaGasa to his work. He has been away from his office due to ill health for five months.

Dr. John Steele is in Boston at Harvard Postgraduate taking Paul White's course on The Heart during September. Dr. Steele was in Lola T. B. Sanitarium visiting his two brothers-in-law.

Dr. Niethammer was incapacitated due to sickness and saw the four white walls of a hospital.

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Dr. Schultz was back to Ann Arbor with Miller and Kretchzman for a six weeks course in Obstetrics and Gynecology. The family met Dr. Shultz in Detroit to drive back.

Dr. Penney was in Milwaukee for National T. B. Association, then to Atlantic City for A.M.A. Convention. Following this he went to Boston for Dr. Joslin's Diabetes Clinic and Dr. White's Heart Clinic.

Dr. Carlson has opened offices with Dr. Stewart for Nervous and Mental Diseases.

A number of local Medical men attended the Post Graduate Lectures at the University of Washington which were held this year in conjunction with Washington State Medical Meeting.

Dr. Reynolds is caring for Dr. Murphy's practice while Dr. Murphy is in Europe.

The most traveled man in the Medical Arts Bldg., (on elevators) is Dr. Paul.

Dr. and Mrs. Will McNerthey went to Mt. Baker and Vancouver, B. C. for golf and relaxation.

Dr. and Mrs. Lawrence McNerthey drove down to San Francisco to spend their vacation.

Dr. Arch Howe and family are just back from a trip on Caribou Trail.

Dr. Eugene Hanson's are the proud parents of a bouncing boy. They are building a fine new family home at 3510 North 33rd St.

Dr. Morton has opened office in Sumner.

Dr. Joe Griggs has left Sumner to be College Physician for Clairemont College at Pomona, California.

Dr. Chas. Denzler has turned over his practice in Gig Harbor to his brother. Dr. Denzler is now associated with Dr. Kohl at Sumner.

Dr. and Mrs. Hillis were visiting in Missoula, Montana, with Dr. Hillis' sister for a few days.

Dr. Nelsen spent a month on Hood's Canal with his family.

Dr. Staatz bought a farm in Oregon. He is raising turkeys and sheep. Dr. Staatz and family plan some vacation there this fall.

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The Western Branch of the American Urological Association met at Paradise Inn in July.

Dr. Herrmann and family vacationed in Yellowstone National Park.

Dr. Turner spent a month at Los Angeles General Hospital taking an advanced course on Proctology.

Dr. and Mrs. Goering attended the American Orthopedic Association meeting at Lincoln, Nebraska.

Dr. Benjamin Vitou, who has just finished his internship at St. Joseph's, has received an appointment and commission in the Medical Corps of the United States Navy. He reported at Washington, D. C., early in August to attend the Naval Medical School.

Representing Pierce County at the A.M.A. meeting this summer were Drs. W. B. Penney, B. T. Terry and C. P. Larson.

Interns just beginning their service at the Tacoma General Hospital are Dr. Raymond J. M. Bennett, University of Indiana, Dr.

Emery W. Garrod, University of Louisville, Dr. Philip B. Smith, University of Arkansas and Dr. Cecil L. G. Yarbrough, Jr., Baylor. At St. Joseph's are Dr. Cyril J. Ryan, University of Iowa, Dr. Thomas Connors, University of Oklahoma, Dr. Howard W. Finke, College of the Medical Evangelists and Dr. Richard J. Hein, Marquette; and at County Dr. D. M. Pettibone, Creighton, Dr. R. B. Sigafos, University of Nebraska and Dr. Forrest Monzingo, Northwestern.

Dr. and Mrs. C. H. Kinnear have just returned from a motor trip to California.

Farmer: "An' how's Lawyer Jones doin', Doc?"

Doctor: "Lying at death's door, poor fellow!"

Farmer "That's grit fer ye! At death's door and still lyin'!"

Doctor: "How is it, Mose, that you and your family keep so healthy?"

Mose: "Well, suh, I done bought one of dem sanitary drinkin' cups and we all drinks outen in."

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Literature on request

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TACOMA GENERAL HOSPITAL

The first monthly Clinical-Pathological Conference will be held September 7th in the Assembly Room. Meetings are held at 8:00 p. m. on the first Tuesday of each month.

Mrs. Fraser Chisholm, (Beatrice Blakestad), recently married, will continue as Supervisor of Third North.

Miss Catherine Griffin is replacing Miss Amy Buringrud as Supervisor of Second Floor.

A preliminary class of 30 will enter the School of Nursing on Septmber 7th.

Miss Rhoda Clark, of the Social Service Division, W.S.D.P.W., with offices in the Tacoma General Hospital, is in Chicago on leave of absence for graduate study in her field.

Miss Ruth Whiteside, formerly Director of Social Service, Pirce County Hospital, and recently located in the State offices, is replacing Miss Clark.

An Electrocardiograph, a Submersible Plinth for the Exercise Pool, and another Kinetometer have been added to the equipment.

A Formula Kitchen is being added to the nursery suite.

He: "Do you know, dear, I have a heart affection for you?"

She: "Have you had it lung?"

He: "Oh, yes, I think I will liver troubled life without you!"

She: "Then why don't you asthma?"

Staff Meetings

TACOMA GENERAL HOSPITAL

Monthly staff meeting-----Oct. 5, 8 P. M.
 Tumor clinics--Sept. 14, 21, 28, Oct. 5, 9:30 A. M.
 Medical Clinics----Sept. 16, 23, 30, Oct. 7, 9 A. M.
 Orthopedic clinic--Sept. 16, 23, 30, Oct. 7, 9 A. M.

ST. JOSEPH'S

Monthly clinical meeting-----Oct. 4, 8 P. M.

COUNTY

Monthly staff meeting-----Sept. 24, 12 N.
 Clinical pathological conferences
 Sept. 16, 23, 30, Oct. 7, 4 P. M.

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AN OLD, OLD STORY

To those few physicians who demand to know "what organized medicine has done for the doctors anyway" or who say "we are paying too much dues for what we get," we offer a friendly word of caution and advice. First of all, it is the better part of wisdom to learn all the facts before passing judgment. So far as dues are concerned, physicians who know what organized medicine is doing and who are fully aware of the seriousness of the situation in which organized medicine finds itself say that the real danger lies in the failure of medical men to realize that medical societies to be effective need more financial support than they are now receiving. That the physician should be "sold" on the necessity for contributing more to his medical society than he does to his ordinary club is their earnest conviction.

Certainly there is food for serious thought in that some physicians are not willing to recognize the very real fact that only organized medicine stands between them and disaster, and that the more adequate the funds available are the more certain it is that the high standards of medical practice will be maintained.

There really should be definite requirements as to membership in medical societies other than just paying dues. We suggest the following for consideration.

1. That every member read his national, state, and county society constitutions and by-laws.

2. That he inform himself as to the activities of his national, state and county societies: Viz, boards, committees, bureaus, etc. This is possible through medical journals and contact with society headquarters. He should be encouraged, also, to offer suggestions as to new activities which medical societies might sponsor in behalf of the medical profession and the improvement of those already established.

3. That he consider himself a committee of one to support those policies approved by the majority of his fellow-members.

4. That he not only keep abreast of the times in scientific matters, but that he inform himself on social and economic programs relating to medicine, so that he can more intelligently aid in solving them.

If the majority of physicians would even begin to fulfill these requirements organized medicine would come into its own, and no longer would officers need to hammer away pleading for a "united front," "closing of ranks," and cooperation. More adequate financial support may be needed before medicine again reaches tranquil waters, but in the meantime an informed and unified medical profession is essential.

An old, old story, you say? Yes, and one that will need retelling many times if we judge correctly. Some listen more readily than others. It is to those who have not heard to whom we must direct our efforts.

—Milwaukee Medical Times



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TACOMA

DR. BROWN—UPSTAIRSby *Larry Flint*

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Through wintry gale, 'neath suave and summer sky.

And generations, glibly passing by,
Have viewed the words that weathered shingle
bears

In uncouth letters: Doctor Brown—Upstairs.

The old pass by, the chic and haughty dame,
The young man coy and spry, the aged, lame,
The carefree, and the grave, in varied gangs,
Stroll past the corner where that shingle hangs,
Each little thinking that he owes—nor cares—
His being there to: Doctor Brown—Upstairs.

The neighbors of the avenue will tell
Of how an old man, bent and aged well,
When fever wrought its havoc and its woe,
Trudged here and there, through wintry gale
and snow,

To save, as only one heroic dares.
For such a man was: Doctor Brown—Upstairs.

And all too often, when his work was done,
His only pay was love that he had won.
And while in state the city surgeon rode,

THOMAS MOONEY

938 Pacific Avenue

It will do you doctors good to walk down
town at noon. Try our noon lunches. Our
hot baked ham sandwich is the finest on
Puget Sound.

He, moved by his old, tattered horse that
strode

Before a shattered shay, dispensed the wares—
The priceless wares—of: Doctor Brown—
Upstairs.

Today a molded tombstone marks his bed,
And myrtle vines profusely o'er their dead
Climb here and there, and find his spirit gone
To some new plane. Yet that same sign waves
on.

And we who knew him know that now it
bears

A truth undoubted: Doctor Brown—Upstairs.

—Bulletin of the
Mahoning County Medical Society,
Youngstown, Ohio

LIEN & SELVIG

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MAin 7314

1026 Tacoma Avenue

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—BULLETIN ADVERTISING DEPARTMENT.

HEALTH MAXIMS

(The following contribution of rules of health has been awarded first prize in the recent contest among Academy (of medicine, Cleveland, O.) members—These maxims were submitted by Dr. Joseph L. Feterman and are entitled "Mental Health Rules.")

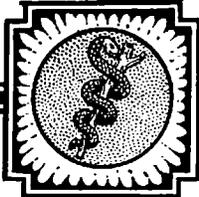
1. Have a Hobby: Acquire pursuits which absorb your interest; sports and "nature" are best.
2. Develop a Philosophy: Adapt yourself to social and spiritual surroundings.
3. Share Your Thoughts: Cultivate companionship in thought and feeling. Confide, confess, consult.
4. Face Your Fears: Analyze them; daylight dismisses ghosts.
5. Balance Fantasy with Fact: Dream but also do; wish but build; imagine but ever face reality.
6. Beware Alluring Escapes: Alcohol, opiates and barbitals may prove faithless friends.
7. Exercise: Walk, swim, golf—muscles need activity.
8. Love, but Love Wisely: Sex is a flame which uncontrolled may scorch, properly guided, it will light the torch of eternity.
9. Don't Become Engulfed in a Whirlpool of Worries: Call early for help. The doctor is ready for your rescue.
10. Trust in Time: Be patient and hopeful, time is a great therapist.

—Pittsburgh Medical Bulletin

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BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

Vol. VII.

OCTOBER, 1937

No. 7

P R O G R A M S

MEDICAL ARTS BUILDING

8 P. M.

OCTOBER 12

Insulin Shock Treatment of Psychosis.....Dr. Frederick Lemere

Discussion.....Dr. A. C. Stewart, Dr. C. C. Carlson

• • •

OCTOBER 26

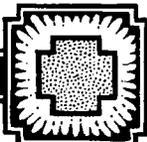
Some Technical Causes of Persistent Pain

Following Spinal Fusion.....Dr. Harry L. Leavitt
Department of Labor and Industries,
Olympia.

Discussion.....Dr. Harry B. Allison

Auditorium Telephone BRoadway 3166

TACOMA, WASHINGTON



IDING HUMANITY

THROUGH SCIENCE

Pierce County Medical Society

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Dr. R. D. MacRae	Dr. A. W. Howe
Dr. L. J. Hunt	Dr. W. W. Mattson

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There is no doubt that the people are interested in public health. This is attested by their enthusiastic reception of medical or health programs presented to them. The general public are interested not only in a passive way, but are doing active work for the betterment of community health. Many of these activities are not understood or appreciated by the members of the medical society. It is the purpose of The Bulletin to make a brief survey of these extra-society endeavors, so our readers may be informed. In our last issue we gave a review of the work of The Foundation for Research in Medical Care and with this publication an outline of the work of the Public Health Council.

As usual, Pierce County was a pioneer in this work and formed the first Public Health Council in the State. Early in 1934 the City of Tacoma entered into a contest for the city in the United States which presented the greatest probability of making improvement in its public health program, as a result of a survey. This was conducted by the American Public Health Association. Tacoma was given the prize of a free health survey which was made by Dr. Carl E. Buck in September, 1934.

In his report he says "several agencies are interested and engaged in public health work. As a whole they are doing creditable although inadequate individual pieces of work. There is a decided lack of co-ordination, an integration of work and a lack of community planning and unified leadership," and he advised the creation of the Public Health Council.

The Tacoma Chamber of Commerce presented the report to the Mayor of Tacoma and called upon him to create a Public Health Council in compliance with the recommendation made in the report. The Mayor appointed one representative from each organization concerned with public health as charter members of a Public Health Council, then asked these representatives to elect officers, define objects and purposes and adopt a constitution.

It was understood that the Tacoma Public Health Council was to be independent of the city government except as the City Health Department and the School Board were represented in the Council.

The Organizations represented were the Tacoma Health Department, City Commissioners, the Pierce County Health Department, the county hospital, private hospitals, Pierce County Medical Society, Tacoma District Dental Society, Public Health Nursing Association, Red Cross, Junior League, Family Welfare Association, Federation of Social Agencies, Tuberculosis League, Tacoma District Nursing Association, Tacoma public schools, Parent-Teachers Association, Woman's Auxiliary to the Pierce County Medical Society, Y.W.C.A., Y.M.C.A., Osteopathic Society, Washington Emergency Relief Administration, President's Council, State Welfare Administration, State Child Welfare Division, National Youth Administration, Metropolitan Park Board, Tacoma Orthopedic Society, Catholic Societies of Tacoma, Tacoma Milk Distributors, Foundation for Research in Medical Care, Metropolitan Life Insurance Company, Tacoma Chamber of Commerce, Western State Hospital, U. S. Veterans Hospital, Juvenile Court, and labor organizations.

Committees on co-ordination, standard records, city and school health departments, public health education and legislation were appointed.

Broadly speaking, the objectives were: (1) The development of a voter consciousness of

the economic and human value of a city health department and a voter willingness to demand a health budget that will make it possible for our city health department to give to the City of Tacoma all of the protection that modern science is able to give in environmental sanitation. (2) To bring the city health department and the school health department into full co-operation on a common problem, and endeavor, insofar as is possible, to relieve private agencies of actual public health work. Private agencies were found to be doing forty percent of the public health work, whereas they should be doing demonstration and educational work only. (3) The development of a general educational program that would demonstrate to the public (a) the citizenship co-operation necessary for effective city health department work, and (b) ways in which the individual himself can protect his health and keep well.

As a result of good committee work, a fine spirit of concentration by all constituent organizations, a continued interest by the Mayor of the city and the real interest of the people, a long list of accomplishments can be cited.

That the Council has fully justified its existence is shown by its accomplishments.

The City Health Department has its budget increased by over 20%.

The Vital Statistics Department is now 90% efficient.

There is a trained food inspector and dairy herds are tested for tuberculosis.

(Continued on page 7)

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THE BUSINESS BUREAU

BALANCE SHEET

PHYSICIANS AND DENTISTS BUREAU

August 31, 1937

ASSETS:

Current Assets:

Bank	\$ 302.51
Cash	206.22
Accounts Receivable, Misc.	898.89
Savings & Loan Stock	75.00
Inventory	642.06
Deposit on Meter	15.00

\$2139.68

Fixed Assets

Furniture & Fixtures

1467.82

\$3607.50

LIABILITIES:

Current Liabilities.

Accounts Payable, Doctors	\$2890.33
Accounts Payable, Dr. Davics	1874.03
Accounts Payable, Miscellaneous	183.13
Accounts Payable, Att's Crippen	50.00
Contracts Payable, Notes	1250.00
Contracts Payable, Furn. & Fixt.	77.00

\$6324.49

Accrued Interest

57.43

\$6381.92

Surplus

\$2968.46

Net Profit Jan., '37 thru Aug., '37

194.04

\$2774.42

\$3607.50

The Balance Sheet listed above shows the condition of the Bureau. Notice that although the Bureau has approximately \$12,000.00 assets in the form of notes, judgments, etc., that these are not carried on the Balance Sheet. On the contrary, the policy has been to hold the assets on the Balance Sheet to a minimum and to write a portion of these off each year.

Commissions on collections are bringing in an average of \$1020.00 per month and other income brings the total revenues to approximately \$1500.00 per month. Expenses are slightly over \$1400.00 per month. A glance at these figures makes it perfectly plain that the Business Bureau could easily prove to be a very good financial investment for doctors if it enjoyed the patronage of the entire profession.

LIBRARY

HOURS 11:00 A. M. TO 3:30 P. M.
TELEPHONE - BROADWAY 3166
BLANCHE L. DEWITT, LIBRARIAN

RECENT ACCESSIONS

If all the articles on what is wrong with the practice of medicine written by earnest laymen who know nothing whatever about the subject were laid end to end they would reach—goodness knows how far! In the two volumes of American Medicine 2200 American physicians have availed themselves, at long last, of the opportunity of setting forth what the medical man himself thinks about the matter. Conflicting as these opinions are, the two volumes furnish a wealth of material on a subject of vital importance to the profession. American Medicine was presented to the library by Dr. W. D. Read.

Osgood, of Portland, has given us, as he says in his preface to Atlas of Hematology, a book for the clinician, student and technician, rather than for the hematologist. The author emphasizes the facts that correct diagnosis must precede proper therapy and that diagnosis will usually be aided by a study of the patient's blood.

The Larynx and its Diseases by Chevalier Jackson and Chevalier L. Jackson has, of course, its main appeal for the specialist. It is a complete presentation of the subject and is the last word in this field.

Outstanding among books on general medicine is Emerson's Textbook of Medicine, both for the quality of its content and for the unique way in which the material is presented.

The Thyroid and its Diseases by Means is a varied yet concise presentation of diagnosis and treatment of thyroid dysfunction, based upon the author's wide experience.

Another addition to our section on thyroid is Hertzler's Diseases of the Thyroid Gland.

Troncoso, in his Internal Diseases of the Eye and Atlas of Ophthalmoscopy, stresses

the relation between general disease and pathological lesions of the eye.

In the three volumes of Surgical Treatment by Warbasse and Smyth the entire field of surgical therapy is covered.

Gifts recently received by the library include Archives of Otolaryngology, American Journal of Ophthalmology, Laryngoscope and Eye, Ear Nose and Throat Monthly, from Dr. Bell; Radiology and Northwest Medicine from Dr. Fishel; Laryngoscope, American Journal of Ophthalmology and Archives of Ophthalmology from Drs. Cameron and Hillis; American Journal of the Medical Sciences, Medical Clinics of North America, Journals of the A.M.A. and Hygeia from Dr. Gullikson; Northwest Medicine and International Surgical Digest from Dr. MacLean; Surgery, Gynecology & Obstetrics from Dr. Gammon; Surgery, Gynecology & Obstetrics and Annals of Surgery from Dr. Schaeffer; Annals of Surgery, A.M.A. Journal and Northwest Medicine from Dr. McNerthney; Journal of the American Dental Association from Dr. Taylor; Proceeding of the Mayo Clinic and Northwest Medicine from Dr. Dodds; Journals and Northwest Medicine from Dr. Mattson; Life, A.M.A. Journal and Northwest Medicine from Dr. C. F. Engels. Thank you very much!

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The October meeting of the Auxiliary will be at the home of Mrs. Leo J. Hunt, 701 North J Street, on Thursday, the 14th. On the program will be Mrs. Otis Floyd Lamson, of Seattle, who will review "The Romance of Medicine" by Clendening. There will also be a program of music. Mrs. Lawrence Joers is chairman of the tea and she will be assisted by Mesdames Burton Brown, Edwin Carlson, Samuel Creswell, Josiah Davies, Darcy Dayton, Edgar Dodds, Treacy Duerfeldt and William Monroc.

In her inaugural address at Atlantic City last June, Mrs. Augustus Kech, President, said in part:

"The profession of medicine as we know it today is at the most critical period of its history. During the last few years distress and privation have fostered a world-wide attitude of dissatisfaction and have made this

period a particularly auspicious time for the introduction of new and novel theories and practices. No group in the world has been more ready to accept constructive change than the medical profession. * * * But it is a significant fact that all of those changes, without an exception, have arisen out of the profession itself. They have been voluntarily applied by physicians. Doctors have ever been in the forefront in seeking to improve the health and insure the security of mankind. But many of the present so-called reform movements of a medical or quasi-medical nature—far from being sponsored by the medical profession are proposed by lay groups and in many cases actively opposed by the profession. This is not the place to discuss in detail the controversial matters that must be faced throughout the coming year, but it is the place to pronounce the policy of thought and action with which we propose to face these problems. Believing, as we do, that the medical profession has always adopted and always will adopt as its program any plan reasonably conducive to the betterment of the health and welfare of humanity and that, conversely, it has always opposed and will in the future continue to oppose any plan allegedly for the welfare of humanity or the public weal, if that plan be ill-conceived, impractical of operation, or otherwise subversive to the welfare of the people, then our duty lies clear before us. We must in conjunction with the American Medical Association support those measures that stand the acid test of public welfare, and relentlessly oppose all others.

"To all of you I say, study legislation in your respective states, pertinent to health and welfare. Be prepared to intelligently answer the questions of laymen on these subjects. But I caution you, you must have the light of knowledge yourself before you can impart it to others.

"In conclusion, let us again be reminded that we are an Auxiliary. Our activities must ever be subordinate to the parent body. We must act officially only with the approval of our advisory committee, County, State or National, as the case may be. It is difficult for some of us in this position but it is my belief that the day we fail to accept it our usefulness to the parent body is at an end."

EDITORIAL

(Continued from Page 3)

Additional nurses are employed in the Venereal Clinic and in Public Health Nursing.

Teaching of public health and hygiene in the public school has been re-organized and text books recommended by the medical profession adopted.

A public health reference library has been established in connection with the County Medical Society library, with a full time secretary.

The Speakers' Bureau lists forty physicians, ten dentists and many technical experts in other sciences. Three hundred and sixty-five social organizations are listed in a card index file for the purpose of being ready for any engagement.

Recently the Council has made an active study of the County health program in collaboration with the County Commissioners and the State Board of Health, announcement has just been made that Pierce County will employ a full time health officer with an enlarged and adequate budget, without extra cost to the County.

Among the noteworthy accomplishments is the support given the health exhibit at the Western Washington Fair. This was initiated by the Pierce County Medical Society several years ago, and has been most ably assisted by the Public Health Council. The trustees of the fair have been generous in

the exhibition space allotted. This year a WPA project was formed and almost one thousand dollars of work done on the exhibit. This was not only a great material help to the display but gave needed work to the unemployed. The Council and County Medical Society each contributed one hundred dollars.

The showing this year was the best ever made. The mural paintings of Jenner, Harvey and Pasteur and the paintings illustrating the first anaesthesia and other subjects created a great deal of interest.

Medical hygiene and preventive medicine in all their branches were presented in a graphic manner with models, pathological specimens, X-Ray pictures and descriptive displays. In the various booths were placards with terse sayings, such as "a foreign body in the eye may cost your sight" in the eye section, and "soap is the best beautifier" and "there is no such thing as skin food" in the care of the skin booth.

The Western Hospital for Mental Disease had an exhibit in an adjoining room and their wonderful collection of pathological specimens formed a part of the health exhibit.

Many new features have been added each year until today there is a fine permanent display, which has been loaned throughout the state to various educational institutions. Means should be found to secure some place in downtown Tacoma where this may be available as the nucleus of a permanent museum of health.

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RECEPTION ROOM MAGAZINES

All M. D.'s know that certain magazines for lay use are notorious in their inaccuracies about medical subjects, while others are flagrantly dishonest in their sponsorship of quackery, both editorially and in their advertisements. Although this knowledge is widespread, it is extraordinary to see how frequently the reception rooms of doctors' offices have these selfsame offensive magazines available for their waiting patients. We help to maintain quackery and dishonest advertising and we help in the spread of nostrums by our seemingly endorsement when we keep such magazines on the tables of our reception rooms.



Their covers may be pretty, but under the surface there is dirt. The obvious duty of physicians is to discard such magazines and to put in their place others of a more worthy character. Surely no reception room table should lack that well written and authentic little lay magazine on health *Hygeia*.

—Bulletin of the San Francisco County Medical Society.

✓ ✓ ✓

Our September issue carried an abstract of a paper, On Giving an Address by Dr. W. A. O'Brien, of the University of Minnesota. This paper appeared as a leader in the August 25, 1936 edition of the Bulletin of the Hennepin County Medical Society. We wish to thank this excellent bulletin for the use of their material and apologize for our oversight in not giving them credit when the abstract was published.

✓ ✓ ✓

Patient: "The other doctors don't make the same diagnosis of my case that you do."

Doctor: "Tut! Tut! The post mortem will show that I'm right."

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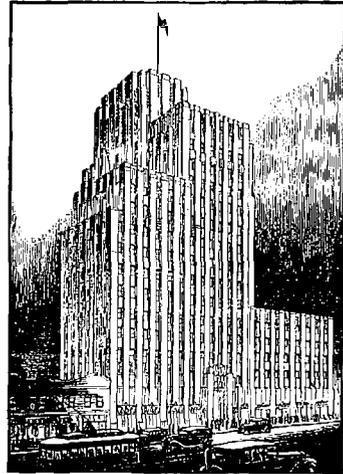
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TACOMA GENERAL HOSPITAL

The Superintendent of the Tacoma General Hospital was honored at the convention this month in Atlantic City by being appointed as official Pacific Coast regent and delegate for two years by both the American College of Hospital Administrators and the American Hospital Association.

Miss Laura Gibson, Director of Nurses, reports that the affiliation of the School of Nursing with the College of Puget Sound, under the supervision of Miss Cleda Harvey, Director of Education continues to progress.

An oxygen unit for the incubators, a new type spotlight and an electric stethoscope have been added to the hospital equipment.

A complete isolation unit was furnished by the hospital for the Public Health Exhibit, directed by Dr. H. J. Whitacre, demonstrating the care of a contagious case in the home.

Another residence has been added to the Faculty Home group.

A demonstration of X-Ray films was prepared for the Fair by Dr. B. D. Harrington, Director of the Radiological Department.

Medical Clinics are held at 9:30 a. m. this year.

Miss Aetna Timmerman, Assistant Director of Education, has returned from post-graduate work in teaching at the University of Washington during the summer quarter.

Miss Louise Chase has completed the Medical Supervisory Course at the University of Washington and King County Hospital and is now in charge of First Floor. Miss Edith Mars is at present taking this same course.

✓ ✓ ✓

Staff Meetings

TACOMA GENERAL HOSPITAL

Monthly Staff Meeting-----Nov. 2, 8 P.M.
 Tumor Clinics_Oct. 12, 19, 26, Nov. 2, 9. 9:30 A.M.
 Medical Clinics_Oct. 14, 21, 28, Nov. 4, 9:30 A.M.
 Orthopedic Clinics-----Oct. 14, 9:00 A.M.

ST. JOSEPH'S HOSPITAL

Monthly Clinical Meeting-----Nov. 1, 8:00 P.M.

COUNTY HOSPITAL

Monthly Staff Meeting -----Oct. 29, 12 Noon
 Clinical Pathological Conferences-----
 Oct. 14, 21, 28, Nov. 4, 4:00 P.M.

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TACOMA

Communicable Diseases

AUGUST, 1937

Mumps -----	9
Whooping Cough -----	14
Tuberculosis -----	5
Scarlet Fever -----	2
Cerebrospinal Meningitis -----	1

LAST REQUEST

The doctor stood by the bedside, and looked gravely down at the sick man.

"I can not hide from you the fact that you are very ill," he said. "Is there any one you would like to see?"

"Yes," said the sufferer faintly.

"Who is it?"

"Another doctor."

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But the codfish doesn't cackle

To tell you what she's done;

And so we scorn the codfish coy,

While the helpful hen we prize,

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PERSONAL

Our most sincere sympathy goes to Dr. and Mrs. Charles H. Doe in the loss of their son Dick.

Dr. and Mrs. H. G. Willard have returned from a vacation spent in Panama, New York and Chicago. In Chicago Dr. Willard attended surgical clinics with his son Don, who is interning at Cook County. The Willards motored home through Minnesota, Wisconsin and Iowa.

Dr. Grant S. Hicks spent his vacation at Hayden Lake, Idaho. While there he visited with ex-President Hoover.

Dr. W. W. Mattson has sold his yacht and bought a cruiser.

The North Pacific Society of Internal Medicine met at the Empress Hotel in Vancouver on September 3 and 4. Tacoma members in attendance were Drs. E. W. Janes, F. R. Maddison, T. H. Duerfeldt and W. B. Penney. Dr. E. G. Bannick, of the Mayo Clinic, was the principal speaker.

Local medics in this fall's list of "buckshooters" are A. E. Hillis, G. E. Griffith, Clyde Magill, A. W. Howe, K. S. Staatz, W. H. Ludwig and C. S. Pascoe and son.

Dr. and Mrs. Jess Read took an extended motor trip this summer, visiting Banff, Lake Louise, Salt Lake City, Yellowstone Park and Snake River.

Mrs. Weldon W. Pascoe is at home again after three months in the Orient following the wedding of Miss Shirley Pascoe in Manila. Dr. Pascoe met her in Vancouver and accompanied her home.

The Washington Minor Hospital has been completely repainted and new non-draft ventilators have been installed in all the windows. Night nurses at Washington Minor are now on eight-hour duty.

At a recent meeting of the North Pacific Orthopedic Society held in Seattle Dr. W. H. Goering was elected President and Dr. Harry B. Allison Secretary. The 1938 meeting will be held in Tacoma.

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From the minutes of the meeting of the Pierce County Medical Society October 22, 1912: Meeting called to order by the president, Dr. Wilmot D. Read. The society went on record as favoring the establishment of reciprocity between this state and Oregon, Idaho and California. Dr. W. N. Keller, Chairman, gave a report of the committee appointed at the previous meeting to confer with trustees of the Tacoma General Hospital. A Library Committee consisting of Drs. C. S. Wilson, W. V. Gulick, E. A. Montague, J. B. McNerthney and B. H. Foreman was appointed, with instructions to make inquiries as to a suitable location for a medical library. Dr. G. G. R. Kunz gave a talk on his recent trip abroad.

Drs. J. M. Havlina and Jess Read report that their bags have been stolen and Dr. E. F. Dodds' car was broken into and his bag rifled.

Dr. and Mrs. James Egan drove to Seaside, Oregon, and other points along the Oregon coast for their vacation.

It has been rumored that two of our well known eye, ear, nose and throat men have gone into the chicken business.

SPARE THE ROD—

A school teacher, after examination of the pupils in her class by the school nurse, wrote the following note to the parents of a certain little boy:

"You boy, Charles, shows signs of astigmatism. Will you please investigate and take steps to correct it."

The next morning she received a reply from the boy's father who writes:

"I don't exactly understand what Charlie has done, but I have walloped him tonight and you can wallop him tomorrow. That ought to help some."

Doctor: "Did you tell the young man that I think he is no good?"

Daughter: "Yes, but he said it wasn't the first wrong diagnosis you had made."

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Do you fail to attend because you cordially dislike some member or members of the Society?

Do you fail to attend because your card club meets on the same date?

Do you know that the most learned physician may learn something new at each meeting he attends?

Do you know that the most learned physician who may not have heard anything new at a meeting is always stimulated to do better work by what he hears and sees at a medical meeting?

Do you know that it is good for your physical and mental well being to meet the other doctors in your society at least once a month?

Do you know that if there were no medical societies, medicine would cease to be one of the learned professions?

Do you know that it is a great privilege to be the right kind of a member of the medical profession?

Do you know that it is a struggle for even the most talented to be the right kind of a doctor?

—Chicago Medical Society Bulletin.

1 1 1

Smith: "Jones went to see the doctor yesterday."

Brown: "Yes? What seems to be the trouble?"

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Smith: "An uneven movement from bar to bar."

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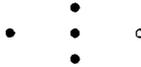
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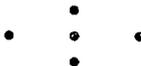
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BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

VOL. VII.

NOVEMBER, 1937

No. 8

P R O G R A M S

MEDICAL ARTS BUILDING

8 P. M.

NOVEMBER 9

SYMPOSIUM ON UROLOGY

Carcinoma of the Prostate.....Dr. H. S. Argue
 Movable KidneyDr. C. S. Pascoe
 Pediatric Urology.....Dr. C. F. Engels
 Bladder Tumors.....Dr. Clyde Magill
 Review of Prostatic Surgery.....Dr. G. A. Moosey

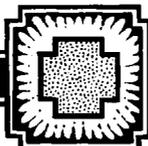
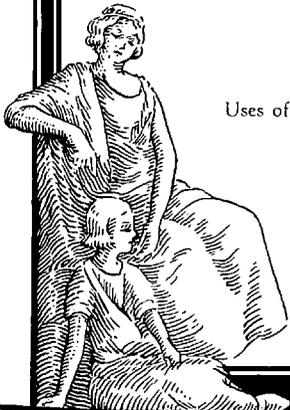
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NOVEMBER 23

Uses of the Gastroscope.....Dr. Roger H. Keane, Portland

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The past few years have made a great change in the practice of medicine. Every doctor must feel cognizant of the different aspect his practice presents. The change, almost imperceptible at first, has slowly but persistently gone on, affecting all his interests, his personal relations with his patients, his fees and his attitude to the community.

Medicine always has been an individualistic profession and the doctor has ever struggled to maintain his individuality. In the early days of modern medical practice the doctor counted his clientele by certain families which he designated as "his families." He brought the babies forth into this world. He cared for them in their infancy and nursed then through their tender years. He cared for their sickness and their accidents and gave them counsel and advice on their worldly troubles. When any of the family were taken sick he was there to do his best to ward off danger, and if his efforts were of no avail he was still there with words of comfort and sympathy for those left behind. From birth unto death it was he, and he alone, who bore the burden of responsibility.

He cared for all his families, rich and poor day in and day out, and bills were given only when asked for or at yearly intervals. Those who had an abundance of this world's goods paid in accordance with their means and everyone expected the doctor to take good care of the worthy poor.

Life was more simple then. The larger number of the population were engaged in agricultural pursuits. They lived on farms and in small country towns. The movement of great numbers of workers from the farm to the large cities had just begun. Mass production was in its infancy. The small town had its own artisans. The butchers, the bakers, the blacksmiths, the wheelwrights, the shoemakers all were substantial citizens, proud of their ability and of their handiwork—individualists also.

The chain store was unknown. All the stores which sold merchandise in the town

were conducted by the proprietor himself, and the grocers, the owners of the hardware stores, the shoe stores, the drygoods houses and little shops, the lawyer, the banker and the parson were all the heads of families from which the doctor derived his patients.

The cost of living was not high. The necessities of life were within the reach of most and the demand for luxuries was not great. The doctor was able to pursue his calling and maintain himself in a decent station among his contemporaries.

With the advent of industrialism and its herding of large numbers of people in crowded cities, with the development of corporations and its removal of personal ownership and management to distant centers, with the founding of chain stores of all descriptions, which removes the head of the business as a responsible property-owner—with all these changes has come a readjustment of society.

The whole economic structure of the country is different. With the loss of personal ownership and the development of distant control men who toil for corporations band themselves together, that their voices may be heard.

Living costs have risen, along with increased wages, and what in the early days were considered luxuries are now regarded as necessities.

The artisans of the small towns have disappeared. Their work is now done by machinery in distant factories. The sturdy, substantial shopkeepers, who were the leaders in community life and invested their savings

in their own hown towns, have been nearly driven out of existence, and the chain stores, with distant ownership, take their places.

Thus a large part of the potential family practice of the physician has been taken from him. The steady working artisan has been replaced by the machine worker and the property-owning storekeeper by a hired clerk.

All this has produced a pronounced effect upon the doctor's outlook. He finds the field of his endeavors growing more and more constricted. Large groups of workers receive their medical services through contract with other doctors. Some are cared for by lodges and beneficial associations. The Federal Government cares for the Army and the Navy and Marine Service. The State assumes the care of those injured in industry. Free clinics and free services for sundry diseases are on the increase.

In addition to the present limitation of the field of practice, there are movements of various groups of society to place the practice of medicine on an insurance basis or under the direction of the State. These groups are not antagonistic. On the contrary, they recognize the achievements of scientific medicine and feel that its benefits will be shared by greater numbers with less cost to the individual under some such arrangement.

As the physician cannot meet this pressure singly, he must perforce join with his fellows to study out what is the best procedure to follow that will give good service to all without an undue financial burden, and at the

(Continued on Page 8)

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THE BUSINESS BUREAU

THE VALUE OF PERFORMANCE

There are six collection agencies in Tacoma, Washington, competing for the collection business of the medical profession. Only one of these is a professional bureau, and the remainder are privately owned and operated businesses.

At first glance one does not see the important difference between a private business and a professional bureau. This difference is not obvious, and yet it is very important. To understand this difference, it must be remembered that over a period of years a collection agency accumulates a large quantity of accounts, as many accounts are not paid for years after they fall into the hands of the collector. Thus it happens that after a collection agency has been in business for a few years, its files are filled with hundreds of thousands of old accounts.

The private agency which is in business for profit speedily discovers which accounts can be collected at a profit, and the remainder are filed away. No one who is in business to make money likes to waste his time or his money on unprofitable business merely for the sake of service.

In the collection business the profitable thing to do is to work the accounts over when they come into the office, use whatever means will result in the speediest collection of those that are immediately collectible, and file the rest away. The collector is then at liberty to go out and solicit a new batch of accounts in order that he may repeat the same process. Some very sizable fortunes have been made in the collection business in this way. There is no lack of new business for the enterprising collector.

The Business Bureau, on the other hand, is a non-profit organization, the purpose of which is to collect as many of the bills as possible

over the longest period of time. Here it must be recognized that there is a certain parallel between treating the sick and collecting medical bills. Surgical methods are sometimes cheaper and quicker than long months or even years of treatment, yet the interest of the patient may be permanently injured by such a procedure. In the long run, the best interest of the doctor is to have his accounts handled like he handles his patient, that is, to use surgery when indicated and treatment when indicated, never giving up a case so long as there is a hope of result.

To do this requires a conscientious personnel, not only trained in the collection business but also in the ideal of service.

The Business Bureau has such a personnel. The staff of the Bureau has learned from experience that honesty and fair dealing can send satisfied patients back to the doctor. The Bureau staff has had ample opportunity to learn that the patients judge the doctor partly by the methods which he uses to collect his bills.

At the same time, many bills, chiefly those for people who have been long unemployed, can only be collected by tact and persuasion. No one likes to be forced to pay a bill, and the methods used to collect accounts reflect upon the creditor. Creditors who do not care what the patient thinks of them will be indifferent to the methods of collection used by the Bureau. Others who desire to retain the good will of the patient will agree that the method by which collection is secured can make or break the patient's good will attitude.

Success in this endeavor is only possible with a permanent organization enjoying the support of the majority of its clients. To be effective, this method must be sponsored by the reputable members of the profession. With this sponsorship a great deal of good can be done

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BLANCHE L. DEWITT, LIBRARIAN

Now in November do we extend thanks to the following for their generous gifts to the library: Eye, Ear, Nose & Throat Monthly and Northwest Medicine, Dr. J. A. Johnson; American Journal of Cancer and Surgery, Gynecology & Obstetrics, Dr. S. M. MacLean; Journal of Social Hygiene, Western Journal of Surgery, A. M. A. Journals, Northwest Medicine and reprints from Dr. H. J. Whitacre; Annals of Internal Medicine, Northwest Medicine and Proceedings of the Mayo Clinic from Dr. F. R. Maddison; Medical Record, Shaw Supply Company; Surgery, Gynecology & Obstetrics and Annals of Surgery, Dr. R. C. Schaeffer; Medical Clinics of North America, Northwest Medicine and several books and pamphlets from Dr. W. B. Penney; Proceedings of the Mayo Clinic, Dr. E. H. Dodds; Northwest Medicine and A. M. A. Journals from Dr. A. W. Howe; Northwest Medicine, Dr. S. S. Jones; Hygeia, Journals and Life, from Dr. C. F. Engels; Radiology from Dr. C. R. Fishel; Northwest Medicine, Dr. H. J. Hards; Urologic & Cutaneous Review and various reprints, Dr. H. S. Argue.

Recognizing that doctors must "read up to keep up," members have recently asked the library for information on the following subjects: perinephritic abscess, peripheral neuritis, fracture of jaw, chorea, pituitary dysfunction, sympathectomy, the use of raw apple in diarrhea, transurethral resection, backache, psittacosis, lichen planus, meningitis, diabetes in children, dislocation of the shoulder, chlorine poisoning, pellagra, protamine insulin, the muscular dyscrasias, laminectomy, diagnosis of obscure fever, relapsing fever, agranulocytosis, morphine addiction and the incidence of tuberculosis and cancer of the lung in the same patient.

As an example of what your library has to offer in the different specialties, the following articles are submitted:

Pediatrics

Human convalescent serum in the prevention and modification of measles, Clarence M. Hyland; American Journal of Diseases of Children 54:277-287, August, 1937.

Symposium on anemias of childhood; In-

ternational Medical Digest 31:245-252, October, 1937.

Acute appendicitis in childhood, Randolph Jones, Jr.; American Journal of Surgery 37:446-454, September, 1937.

Eye, Ear, Nose and Throat

Malignant tumors of the throat, C. L. Martin; Surgery 2:381-400, September, 1937.

Recent advances in ophthalmologic surgery, A. D. Ruedemann; Surgical Clinics of North America 17:1355-1367, October, 1937.

Two common complications of ear infections, P. E. Ireland; Canadian Medical Association Journal 37:256-260, September, 1937.

Obstetrics

The endocrines in toxemias of late pregnancy, Evan Shute; Surgery, Gynecology & Obstetrics 65:480-484, October, 1937.

Rupture of the membranes in relation to labor, J. C. Goodwin; Canadian Medical Association Journal 37:243-250, September, 1937.

Visscher-Bowman test, J. F. Sheeham; Surgery, Gynecology & Obstetrics 64:806-810, April, 1937.

Neurology and Psychiatry

Recent advances in technic in neurologic surgery, W. J. Gardner; Surgical Clinics of North America 17:1341-1348, October, 1937.

Parkinson's disease, William Allan; Archives of Internal Medicine 60:424-436, September, 1937.

Tumors of the spinal cord, A. T. Bunts; Cleveland Clinic Quarterly 4:261-269, Oct., 1937.

Urology

The prostate and the endocrines, Ruscoe Clarke; British Journal of Urology 9:254-271, September, 1937.

Some aspects of malignant tumors of the kidney, Edwin Beer; Surgery, Gynecology & Obstetrics 65:433-452, October, 1937.

Hunner's ulcer, R. H. Herbst; American Journal of Surgery 38:152-172, October, 1937.

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November 11, the regular meeting day, being Armistice Day and a legal holiday, the November meeting of the Auxiliary will be cancelled.

THE DOCTOR'S WIFE

Reprinted from The Reed & Carnrick
House Magazine

In these rather crowded and stressful days, there are lots of nice girls who would consider the job of being a doctor's wife as a practical equivalent of being sold down the river. And then again, there are girls who belong to an entirely different breed, and the young physician who manages to hook up with one of these is a very lucky fellow, indeed.

One of this other kind of girls, who has been married to a doctor for ten years or so,

got confidential the other day, and we acquired some of the inside dope on why her husband has been coming right to the front in his profession. This girl loved the man she married and she had enough common sense to keep her nose out of his business, in the gossipy sense of that phrase.

But a doctor's wife needs uncommon sense, and this young lady had that, too, in sufficient quantities to realize that her husband's success meant hers also, and that the job of doctor's wife is a highly technical one, requiring a great deal of study, keen observation, and prayerful mediation to get away with it creditably.

She also knew how most of us crave companionship, and could imagine how lonesome a midnight drive can be, especially in the winter; so she got up and went with him—not to talk, unless that was what he wanted, but just to be there. Wrapped up warmly, she waited in the car while he made his call; and when they got home she prepared hot tea for him while he was undressing. She had a chance to make up her lost sleep during the next day, but he didn't.

Realizing that it was a terrible bore to him to be called out just when they were going to a show or a party, she resolutely refrained from adding to his grouch by bemoaning the upset of their plans—and that was some help!

Being a woman of uncommon sense, she was aware that everybody except the real morons needs a certain amount of solitude, so she fixed up a room for him the way he wanted it, where he could "sport his oak" and be alone, when he felt that way.

It didn't take her long to discover that a whole lot of doctors are wise dubs, who may know a heap about their profession, but not much about anything else. Not wanting her hubby to sog down into that class, she made a diplomatic point of getting him into his glad rags every now and then, to go to the opera or a party or something; and when she threw a party—as she did with reasonable frequency

—she didn't consult his visiting list nor the roster of the medical society when sending out her invitations. In this way she kept him in touch with interesting people who knew something about other matters besides medicine.

To some folks these matters might seem insignificant, and the doing of them a senseless drudgery; but to this little lady, who did a lot of other "little" things along similar lines, and who appears to have raised the vocation of a doctor's wife to the dignity of a profession, the whole thing was a game, and she got quite a kick out of playing that game well, to say nothing of the perquisites which began to trickle along as her husband's practice grew and he began to pull down substantial fees.

So, once again, it is demonstrated that two heads are better than one, and that when a man and a woman are real partners in the business of living, they make an unbeatable combination.

Yours for more wives like her.

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THE COMMUNITY CHEST

The Community Chest campaign is now on. Criticism has been offered that in the past the doctors as a group have not contributed their share.

This year a hard-working medical financier has taken over the job of soliciting the doctors as a group. His efforts have been rewarded, as now, for the first time, the great majority of doctors are giving and increasing their pledges.

It will be a pleasure to contributors to know that this year we are approaching the carrying of our share of this load.

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EDITORIAL

(Continued from Page 3)

same time sustain the independence of the profession. The national and various state societies and local organizations have devoted considerable attention to the economic side of medicine during the past few years. The Washington State Committee on Economics has done a good work and Pierce County has been outstanding in the efforts to know the facts upon which any program must be based. The society has found it necessary to establish headquarters with various departments to carry on and co-ordinate all its activities. It has entered into relation with the county and state in an effort to supply suitable care to the needy at low cost to the taxpayer. It has established medical and surgical bureaus to give service to the low wage group at monthly rates, preserving for the patient the free choice of physicians and retaining the individuality of the doctor.

The actions of the various committees and the conduct of the different bureaus are for the benefit of each member of the society. Each committee and each bureau is but a part of the whole, and each should work in co-operation with the others. The members of the society entertain many divergent views about how the doctor should conduct his affairs himself, and how the duties of the society shall be fulfilled. This is but natural, but out of these different views must come some thought common to all. There must be some ground upon which all may stand.

Recent action has been taken by the officers of the society and certain of its members which will go a long way to clear up some bitterness of feeling and misunderstanding and restore the harmony and good fellowship which is desired by all.

This action is exceedingly gratifying, for never before has it been more necessary for medical men to maintain their position of solidarity. The profession must know what it wants, must know the course to pursue, and, firm in that knowledge, must present a united front.

DR. W. A. MONROE

Dr. W. A. Monroe, who died suddenly at his home on October 11, was elected to membership in the Pierce County Medical Society on April 21, 1908 and served as its president in 1921, retiring from active membership in 1935 on account of ill health.

Dr. Monroe was born in Memphis, Mo., on September 28, 1880, and was brought to Tacoma at the age of eight. He attended school here and later enrolled at the University of Oregon Medical School, receiving his degree in 1906.

Besides his widow, Dr. Monroe is survived by a daughter, Mary Louise, and five sisters, Mrs. N. E. Walton, Miss Anne Shannon Monroe, Mrs. L. E. Story, Miss Margaret Monroe and Mrs. G. A. Libbey.

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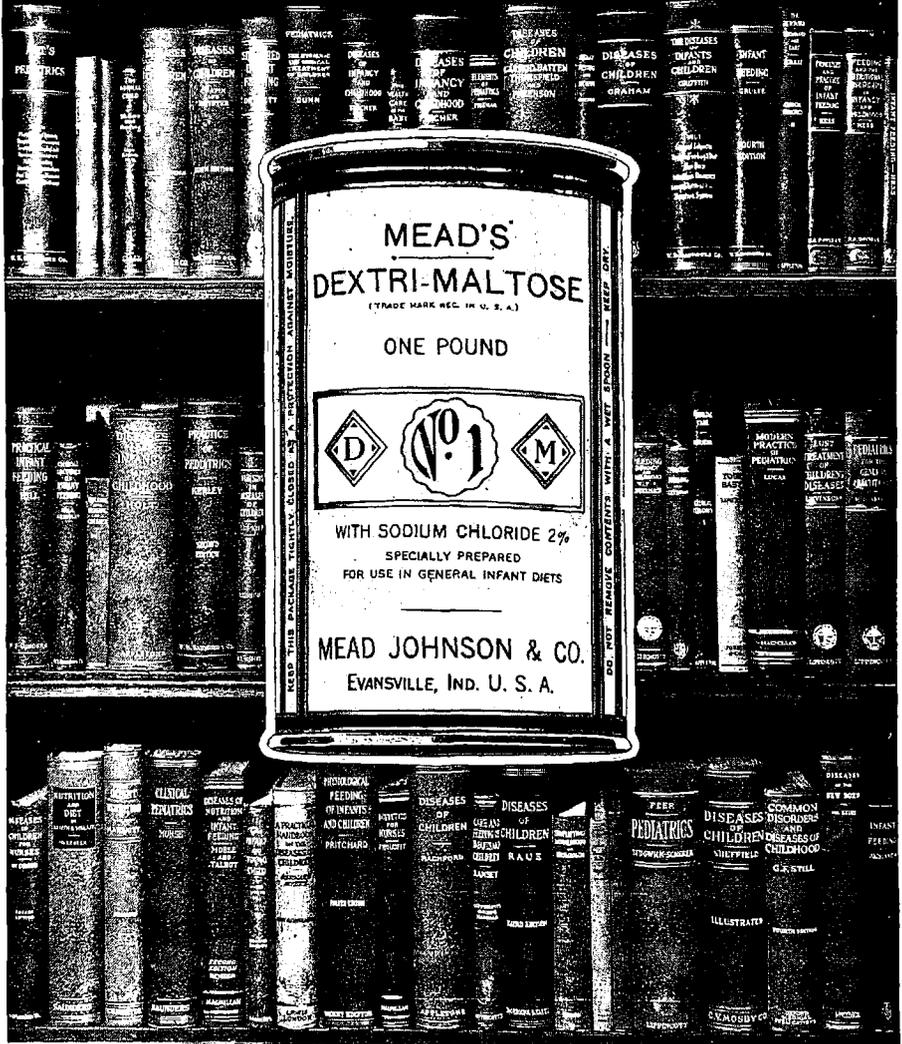
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SMALLPOX

On October 18, 1937 the first of a series of cases of smallpox was reported to the City Health Department. Tacoma has been relatively free from this disease for a period of three years. To November first a total of twenty cases had been reported. All but two of these cases have been confined to students attending the Jason Lee junior high school. The source of the outbreak was traced to a girl who had attended school October 4 at a time when she was ill with a headache and fever and later broke out with a few spots, similar to smallpox. The source of her infection could not be determined.

Following the report of the first case October 18, the newspapers were immediately notified, urging the public to become vaccinated as rapidly as possible, to avoid undue spread of the disease. The public was urged to go to the office of their private physician, who would render them the service for a standard fee of one dollar. If anyone was unable to pay they were advised to consult their physician anyway, and he would advise them how it could be secured. This public request was greatly aided by the Tacoma Public School Health Department, who sent out notices to the individual students of the school involved and to other schools nearby. By November first, 3,185 vaccine points had been given out to physicians. This is certainly evidence that this phase of public health can be adequately carried out in the office of the cooperative private physician to the mutual advantage of everyone. The City Health Department welcomes criticism as to how this type of immunization program can be improved to the point of the highest possible efficiency.

TACOMA INTERNISTS' SOCIETY

November 16 Tacoma Hotel 6:15 P. M.
Present Trends in the Control of
Syphilis.....Dr. S. M. Creswell
The Present Status of Sulfanilamide
Therapy.....Dr. T. H. Duerfeldt

STAFF MEETINGS

Tacoma General Hospital

Monthly staff meeting----December 7, 8 p.m.
Tumor clinics--Nov. 9, 16, 23, 30, 9:30 a.m.
Medical clinics --Nov. 11, 18, 25, Dec. 2,
9:30 a.m.
Orthopedic clinic-----Nov. 11, 9 a.m.

St. Joseph's Hospital

Monthly clinical meeting----Nov. 5, 8 p.m.

County Hospital

Monthly staff meeting-----Nov. 26, 12 noon
Clinical pathological conferences -----
Nov. 11, 18, 25, Dec. 2, 4 p.m.

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PERSONAL

Our most sincere sympathy is extended to Dr. R. E. Morton, of Sumner, upon the recent death of his wife. Besides her husband, Mrs. Morton is survived by an infant son.

Drs. H. J. Whitacre, R. C. Schaeffer and F. L. Scheyer were in Chicago last week for the twenty-seventh clinical congress of the American College of Surgeons.

New members recently welcomed by the Pierce County Medical Society are Drs. W. E. Lewis, Rush, 1932, Fay M. Nace, University of Oregon, 1936, Chris C. Reynolds, Northwestern, R. E. Morton, Indiana University School of Medicine, 1936, C. C. Carlson, University of Oregon, 1933, J. E. Harris, Rush, 1898 and Carl G. Scheyer, University of Louisville, 1936.

Dr. and Mrs. A. W. Howe have returned from Chicago, where Dr. Howe attended the meeting of the American Academy of Eye, Ear, Nose and Throat. They also visited Dr. Howe's people in St. Paul.

Also at this meeting was Dr. C. V. Lundvick. He was joined in Chicago by Mrs. Lundvick, who has been in the East since September, and they returned home by automobile.

Dr. D. H. Bell has recovered from his illness and resumed his practice.

EXPERT MANUSCRIPT TYPING; FAMILIAR WITH MEDICAL TERMS. Mrs. Carol Jabush, MAin 7836 or MAin 8224.

Mrs. Frank Norris, of San Francisco, with her little daughters, Kathleen and Helen, is visiting her parents, Dr. and Mrs. W. B. McGreey.

Representing Tacoma at the meeting of the Washington State Obstetrical Association in Spokane on October 2, were Drs. S. S. Jones, J. M. Haylina, A. B. Heaton and P. C. Kyle. Dr. and Mrs. F. C. Willson, of Buckley, also attended, going to Spokane by plane.

Dr. and Mrs. Chris C. Reynolds are receiving congratulations upon the birth of a

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daughter at Tacoma General Hospital.

Dr. and Mrs. S. M. Creswell have returned from New York, where Dr. Creswell attended the meeting of the American Public Health Association.

Mrs. Lawrence McNorthney and her small daughter, Mary Helen, are visiting relatives in Cozad, Nebraska. Later, they will be the guests of Dr. McNorthney's sister in Omaha.

Dr. George R. Kingston, a graduate of Rush, who interned at Swedish Hospital, Seattle, has established offices at the Lakewood Community Center. He is residing at Steilacoom City.

henceforth on Thursday at 9:30 A. M. There is a section on medical cases, a pathological demonstration and a section on tumor cases. The first meeting was held on October 21 and the second on October 28. A large group of doctors attended.

The Tacoma General Hospital Cancer Clinic continues on the approved list of the American College of Surgeons, one of three in the state. The other two are the King County Hospital and Swedish Hospital, Seattle.

The Senior Class gave a Hallowe'en party and Scavenger Hunt October 28. The members of the Faculty were invited. The evening afforded a great deal of lively fun.

COMMUNICABLE DISEASES

September, 1937

Measles -----	1
Scarlet Fever -----	7
Mumps -----	8
Whooping Cough -----	16
Chickenpox -----	2
Tuberculosis -----	5

TACOMA GENERAL HOSPITAL

Dr. B. D. Harrington, Radiologist, has just returned from the International Radiological Congress in Chicago. This is the fifth congress of its kind and the first time it has been held in the United States. Thirty nations were represented. Dr. Harrington states that the next congress is planned for 1940 in Berlin.

A combined clinic to be called the Tacoma General Hospital Clinic will be held weekly

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ST. JOSEPH'S HOSPITAL

The annual dinner and business meeting of the staff of St. Joseph's Hospital was held Wednesday evening, October 13. Drs. A. G. Nace, W. B. McNerthney and T. B. Murphy were elected as members of the Governing Board for a two-year period.

Dr. T. B. Murphy gave an interesting resume of his recent trip to Europe. He first visited in Dublin during the European Obstetrical Congress, later visiting hospitals in Liverpool, Austria, Germany, Hungary and Italy. Dr. Murphy stated that hospitals in these countries are not as well equipped as in America. He found that equipment in Austria, Germany and Hungary was very good if it were of a military and reconstructive nature, while for other types of cases it was very poor. Italian hospitals, he said, were better equipped than those of other European countries, but still did not come up to the high standards in equipment or personnel of those of the United States.

The Sisters of St. Francis were given a vote of gratitude for their earnest cooperation with the staff members during the past year. Men-

tion was made of the numerous improvements made in the hospital during the past year. Among these were new Roentgenographic machines and two new Scanlan Morris Multibeam surgical lights. These lamps have twelve distinct rays, which will allow the surgeon to operate with an absence of shadow. They have a double intensity bulb and can be used for a flood light or a spot light. The hospital has changed over its lighting system from its own generating plant, which was direct current, to the city light and power. Radios can now be used through any part of the building. It has also eliminated the use of fuel oil by installing stokers.

On October 20, St. Joseph's Hospital was singularly honored by a visit from Mayor George A. Smitley, who presented Sister M.

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The next Clinical meeting of the staff of St. Joseph's Hospital will be Friday evening, November 5, at 8 P. M. This will be a very interesting meeting, due to the fact that Dr. G. F. Cooper, of eastern medical centers, will give a moving picture demonstration and lecture on pneumonia, including diagnosis, treatment and care, as handled by newer methods of eastern hospitals.

Apoligies to Joyce Kilmer

I think that I shall never see
 A plant untidy as a tree,
 A tree which drops its leaves all day
 For us to rake and take away,
 A tree which wears in summer heat
 A coat of green from head to feet,
 But when the winter breezes blow
 It lets its fancy raiment go
 And welcomes bitter season's weather
 By going nudist altogether,
 So leaves are raked by fools like me,
 To tidy up beneath a tree.

Teacher: "Willie, what is a skeleton?"

Willie: "A man with his inside out and his outside off."

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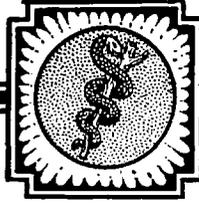
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BULLETIN

OF THE
PIERCE COUNTY MEDICAL SOCIETY

VOL. VII.

DECEMBER, 1937

No. 9

PROGRAMS

FORT LEWIS HOSPITAL
8 P. M.

DECEMBER 14

Clinical program furnished by the hospital staff, followed by a buffet lunch.

• • •
DECEMBER 28

No Meeting

MERRY CHRISTMAS AND HAPPY NEW YEAR

Keeping Christmas

It is a good thing to observe Christmas Day.

The mere making of times and seasons when men agree to stop work and make merry together is a wise and wholesome custom. It helps one to feel the supremacy of the common life over the individual life. It reminds man to set his little watch now and then by the great clock of humanity.

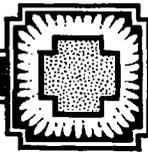
—Henry Van Dyke.

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Editor.....Dr. W. G. Cameron
 Business Manager.....Dr. A. W. Howe
 News.....Dr. P. C. Kyle

The foundation of our Government was laid in the town hall of the early settlers. Living far removed from the seat of their government, our forefathers were confronted with situations requiring prompt action. They met in their various communities and adopted measures to regulate their local affairs. In this way each community developed an independent spirit and the habit of themselves attending to those common occurrences of life which affected their happiness and well-being.

Oppressive and unworkable laws were formulated in the mother country, which could not be observed by the colonies or enforced by the agents of the king. Parliament was far away. Months would elapse before a protest was sent to England and a reply was received. As a consequence, the people early acquired the habit of ignoring these unjust or unenforceable laws and making others to suit the needs of the country.

Thus, very soon in the life of the colonies there developed a distrust of a highly centralized government. There was a growing conviction that in most matters of life those on the spot could decide the course of action better than those residing at a distance, surrounded by a different environment.

The settlers were acutely aware of the tyranny and of the oppressive laws under which they had lived before coming to this country. Over here they had tasted a freedom greater than any of which they had ever dreamed. Also, they were inheritors of the spirit of the nobles who had wrested Magna Charta from King John and of the parliaments which took arbitrary power from the kings.

The delegates from the different states who gathered together to form a constitution for the government of all were imbued with the feelings of independence and the rights of individual activity. They were fearful of the power of a strong national government and very jealous of the rights of the smaller units. The preponderant and prevailing

thought throughout the constitutional convention was directed toward devising a system whereby the control of most of the activities of life was left in the hands of the state, leaving for the Federal government those things which were the common concern of all.

In this spirit they adopted the Constitution. The state was supreme and had sovereign rights upon which the Federal government could not impinge and boundaries it could not pass.

This doctrine of states' rights was held by all of the original states and has been of common acceptance since, but in the past decade the states have gradually yielded much of their former power to the central government. Legislation has been passed surrendering the liberties of the individual to obtain government funds or to accomplish some reform or change of procedure.

Notable among these and of doubtful value are the amendments creating the income tax, the control of suffrage, the election of senators and, distinctly disastrous in its results, the eighteenth amendment, regarding the control of alcoholic beverages.

With the power of taxation, the Federal government has been able to create huge powerful bureaus covering all sorts of subjects, and each holding out some bribe to give to the state if it will surrender a little more liberty.

Under the guise of interstate commerce and the general welfare clause, the courts have rendered decisions giving a highly centralized, distant government more and more control over the daily lives of the individual citizen. Pressure groups are urging the passage of special legislation to suit their needs, giving away the control which resides in the state. The constitutional amendment regarding child labor may be the entering wedge of the control of all labor. Educational groups are advocating legislation giving Washington the supervision of the schools. The hours and wage bill and the farm bill now being debated in Congress are steps in this same direction.

These measures do not affect the doctor

directly but their passage and the interpretations of the laws by the courts tend to create precedents which may be used to take the security of the state laws from medicine and leave the doctors at the mercy of a Federal bureaucracy.

The United States Government concerns itself with public health, and rightly so. It maintains the Public Health Service and supports hospitals, keeps statistics, does research work and disseminates a wealth of useful information. It is concerned in the control of contagious disease and the spread of epidemics from one state to another. All these activities are highly commendable and necessary for the good of all, but the United States Government is constantly trying to extend its power and authority. This is well illustrated by the attitude taken in the enforcement of the Harrison Law.

In a recent speech Senator J. Hamilton Lewis said that unless the medical profession adopted a program which met with the approval of the Government the doctors of the whole country would be mustered into the Public Health Service and would take orders from the Surgeon General.

Happily, at present such a dream is not possible of realization, for each state retains the right to regulate the practice of medicine and surgery and the sale of drugs and medicines. Each state adopts its own standard of qualifications for admittance to practice and is the sole judge as to who shall continue in such practice.

This condition is not likely to be changed by vote so long as the people are informed against a surrender of their rights, but the situation may be changed with an altered public opinion and a different judicial decision upon the Constitution.

The control of the practice of medicine by the state is a bulwark against any great national movement to socialize medicine. If the doctors wish to retain their liberties and to have local government prevail in the things that concern their practice, they should strive to maintain the remaining rights that are left to the states and guard against any further encroachments of the Federal power.

THE BUSINESS BUREAU

As the Business Bureau nears its seventh anniversary the Trustees, many of whom have served for seven years, feel that a report should be made to the membership of the Bureau.

The value of the accounts assigned to the Bureau for collection now stands at \$591,051.00, of which has been collected \$158,569.00. A total of 24,557 accounts has been assigned for collection since the Bureau began to operate. At first glance these figures are very imposing and suggest that the Bureau is doing an excellent piece of work. In the collection business it would be considered a conspicuous performance to have collected twenty-five per cent of all assignments of the last seven years. This is especially true when it is remembered that the Bureau has been obliged to operate during these years without capital.

In spite of this apparent good performance, it is felt that the Bureau is only doing half a job. Although there were more than 24,000 accounts assigned, it is estimated that this represented probably not more than seventy per cent of the accounts assigned altogether, the other thirty per cent probably going to commercial agencies. Although for four years the Bureau has maintained more than 100,000 credit records and has sent out more than 30,000 credit reports, a comparatively small number of members make regular monthly use of that department. Approximately one-fourth of the members of the Bureau assign accounts for collection each month, and less than that number are uniformly faithful in preparing lists for credit information.

It has been felt that the apparent indifference of the membership is caused by two things: (1) Lack of appreciation of what the Bureau can do for the individual doctor. (2) The feeling that because of the Bureau's modest financial position there might be some delay in securing financial return from accounts sent in for collection. The facts concerning these two difficulties are as follows: The amount of money which the Bureau owes to physicians is less than two per cent of the amount collected, and the amount of money which physicians owe to the Bureau is more

than half of that amount. Collections made and unremitted never amount to more than two per cent of the total collections made by the Bureau, and these are kept from accumulating by constant payments which the Bureau makes from month to month as fast as funds are available to do so. No doctor has been or can be seriously inconvenienced by this condition which does not and never has represented a very large proportion of the total business.

Credit information supplied by the Bureau annually brings about the collection of accounts valued at many times its cost. This is known from reports made to the Bureau in subsequent months. In addition to this, the Bureau has been able to make use of its own credit information in obtaining payment on accounts assigned for collection. The collection totals per month have been enormously increased by reason of the credit information made use of by the Bureau. Any member of the medical or dental profession who will systematically use the credit service can be sure in the course of a year of a sufficient increase in collections to repay him very handsomely for his trouble.

The Bureau is now collecting per month approximately three hundred per cent more than the average monthly collections at the time the credit service was established. Prompt reporting to the Bureau of credit lists and prompt assignment of accounts for collection from the entire membership would pay substantial dividends to everyone.

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BOOKS FOR THE DOCTOR'S CHRISTMAS

The offering of books with a medical flavor has been large this year, and the puzzled gift-seeker could hardly go astray in choosing one of the following for a doctor's Christmas gift:

The list should undoubtedly be headed by "A Woman Surgeon" by Rosalie Slaughter Morton, which ranks with Victor Heiser's "An American Doctor's Odyssey," a best-seller of last year. A distinguished surgeon, world traveller and humanitarian, Dr. Morton gives in her autobiography a fascinating account of her life in America abroad, her acquaintance with Tolstoi, Ibsen and others of the world's great, her war experiences and her work in educating Serbian students in American colleges. Publishers are Frederick A. Stokes Company, New York, and the price is \$3.00.

The individual interested in travel (and who is not?) will delight in "Skyways to a Jungle Laboratory" by Grace Crile. Mrs. Crile gives lively descriptions of an airplane trip into the heart of Africa, the food and accommodations along the way, the "jungle laboratory," staffed by Dr. and Mrs. Crile and half a dozen others and the hunt for animals to be dissected. The book is published by W. W. Norton & Company, New York, and the price is \$2.75.

Back in the year 1758 Elizabeth Drinker, of Philadelphia, began a diary, which she kept for the next fifty years, and from which her great-grandson, Cecil Kent Drinker, of Harvard Medical School, has assembled extracts dealing with her impressions of early American medical practice and the great medical figures of the day. He has called the book "Not So Long Ago." It is published by the Oxford University Press and is priced at \$3.50.

For those who like a "medicated novel," as Oliver Wendell Homes called them, is "In the Lives of Men," by Alan Hart. The setting is in the Pacific Northwest and the story deals with professional secrecy involving a doctor and his son, also a doctor. It is published by W. W. Norton & Company, New York, and the price is \$2.50.

"Life and Death," by Andrea Majocchi, lover of the arts, humanitarian and Italy's foremost surgeon, is the colorful story of a poor boy, winning success in the profession of medicine. Knight Publications, New York, are the publishers, and the price is \$2.75.

In these days of much talk concerning the business side of medicine, perhaps the book bearing that title, by Theodore Wiprud, would be indicated. This is a very usable book for any physician. It gives suggestions for organizing his time, systematizing his office, keeping his records and handling his patient's accounts. It is published by W. B. Saunders Company, Philadelphia, and is priced at \$2.50.

Set in a locale familiar to many of us, written by a woman well known in Tacoma, is "Mansions in the Cascades" by Anne Shannon Monroe, Macmillan Company, New York, \$2.50. It is the story of a doctor, broken by sorrow and overwork, who seeks healing through a year spent in the mountains.

"Medicine and Mankind," edited by Iago Galdston, is a collection of papers, some scholarly, some merely entertaining, concerning various phases of a doctor's relation to his patients. D. Appleton-Century Company, New York, are the publishers, and it is priced at \$2.00.

Still another novel with a medical background is the much-discussed "The Citadel" by A. J. Cronin. Hailed by the critics as an outstanding novel, it is from a medical point of view an unfair picture of the profession as a whole. It is published by Little, Brown & Company, New York, and the price is \$2.50.

"Medical Morals and Manners" by Hubert A. Royster, is a collection of papers and essays written by the author during forty years of practice of medicine. University of North Carolina Press published this book and it is priced at \$2.50.

Lloyd Thompson has given us in "Wide Is the Gate" a lively account of charlatanism, particularly in the United States. The book is informative and withal excellent reading. It is published by the Macaulay Company, New York, and the price is \$2.00.

WOMAN'S AUXILIARY

to PIERCE COUNTY MEDICAL SOCIETY

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Mrs. D. M. Dayton, Chairman
Mrs. Scott Jones

Hopkins, Charles Hunter and Edwin W. Janes, Mrs. C. J. Cummings and Mrs. A. H. Buis will preside at the tea table.

RADIO COMMITTEE

The Radio Committee is happy to announce that the health broadcasts sponsored by the American Medical Association may now be heard over Station KOMO at 11 A. M. each Wednesday. It appeared for a time that these programs would not be released in Seattle, owing to the fact that the period had been leased to a local concern, but pressure was brought to bear through correspondence and personal solicitation, with the result that the time was allotted to the health broadcasts.

Members of the Auxiliary are urged to call the attention of their friends to these programs. There is no subject upon which the public is more eager for information than the subject of health and none upon which it receives more misinformation. Newspapers, magazines and radio are widely used to disseminate propaganda concerning products that are of questionable value or actually dangerous. The A. M. A. programs are designed to present accurate information on all phases of health and a much larger audience will hear them if we keep it in mind to speak of them whenever the opportunity presents.

The American Medical Association provides the broadcasts; it is for us to popularize them.

MRS. E. F. DODDS, Chairman.

COMMITTEE ON PUBLIC RELATIONS

Again this year the Auxiliary is very happy to be able to present the Public Library with more new books, to be placed upon the shelves with the other medical books used in circulation. This list is not complete as yet but will be before the end of the year and be in circulation most of the time. The other medical books on the shelves are one and all on the approved list of medical books.

The National Health Council Bulletins, fourteen in number, have proven very satis-

The regular meeting of the Woman's Auxiliary to the Pierce County Medical Society will be held Tuesday evening, December 14, in the recreation hall of the Tacoma General Hospital. Mrs. John Steele, president of the Auxiliary, announces the brief business meeting for 8 o'clock, with the program and luncheon to follow.

Guest of honor for the evening will be Mrs. R. E. Mosiman, of Seattle, president of the State Auxiliary, who will give her official message to the group. Mrs. Edwin W. Janes will present Christmas readings and Stanley A. Johnson, of Puyallup, tenor soloist, will sing Christmas songs. Group singing of Christmas carols will close the program.

Hostesses for the refreshment hour are Mrs. C. V. Lundvick, chairman; Mesdames John Gullikson, Eugene Hanson, H. J. Hards, John Havlina, A. E. Hillis, S. R. Herrmann, L. A.

factory. These books have titles such as "The Common Health," "The Human Body" and "Tuberculosis" and are all written by doctors. After these books were placed on the shelves, within three days eleven were taken out.

As a committee, we feel this is a very worthwhile project and hope it will be carried on in the years to come.

Respectfully submitted,

MRS. R. D. MACRAE,
MRS. DAVID JOHNSON.

List of books from the Woman's Auxiliary in the Public Library:

Black's Dictionary, John D. Comrie, 14th ed.

"How We Came by Our Bodies," Charles Benedict Davenport.

"How Life Begins," by George Lloyd Baird, 1935.

National Health Council Bulletins (14 books).

STATE HYGEIA ACTIVITIES

Mrs. John Arnason Johnson, State Hygeia Chairman, recently attended a meeting at the home of Mrs. R. E. Mosiman, Seattle, President of the State Auxiliary, called to discuss Hygeia matters. Also present were Mrs. S. H. Tasian, Hygeia Chairman for Seattle, and Mrs. W. Ray Jones, President of the Seattle Auxiliary.

On November 1 Mrs. Johnson went to Bellingham with Dr. and Mrs. Mosiman and Dr. and Mrs. R. W. Perry, of Seattle, where they attended a banquet at the Leopold Hotel, given by the County Medical Society. Mrs. Mosiman and Mrs. Johnson spoke following the

banquet and also at the Auxiliary meeting later in the evening.

At the home of Mrs. Chauncey Jones, Everett, a tea was given on November 4 by the Snohomish Auxiliary, honoring Mrs. Mosiman, at which both Mrs. Mosiman and Mrs. Johnson were asked to speak.

On December 6 the Christmas program of the King County Auxiliary was given in the Medical-Dental Building. Mrs. Johnson was a speaker at this meeting also, suggesting various methods for increasing Hygeia subscriptions.

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DR. J. L. RYNNING

Dr. J. L. Rynning died at his home, 8005 Pacific Avenue, on November 7, at the age of 78.

Dr. Rynning received his degree from Rush Medical College in 1892, coming to Tacoma shortly thereafter. He was elected to membership in the Pierce County Medical Society on May 15, 1896.

Kindly, quiet and unassuming, Dr. Rynning will be greatly missed by his colleagues and by his patients.

Besides his widow, Mrs. Marie Rynning, he is survived by a son, L. E. Rynning, of Nome, and three daughters, Miss Karen Rynning and Miss Emma Rynning of Tacoma, and Mrs. H. M. Xavier, of Kotzebue, Alaska.

DR. CHRISTEN QUEVLI

Dr. Christen Quevli, who became a member of the Pierce County Medical Society in 1889 and served as its president in 1904, died in a Seattle hospital on December 1.

Dr. Quevli was born in Oslo, Norway, on June 29, 1864, and came to America with his parents in early childhood. The family settled in Minnesota, where he attended school and college and received his medical education. He came to Tacoma in 1888 and entered into a practice which made him an outstanding figure in the community, not only as a physician but as a humanitarian and leader in health matters as well.

Dr. Quevli's particular interest was in diseases of the chest, and he served as President of the Washington State Tuberculosis Association from 1911 to 1921 and Vice President from 1921 to 1931 and was Superintendent of the Lakeview Sanatorium for several years. Much of the state legislation concerning tuberculosis was drafted by him. Always a student, Dr. Quevli took time from his practice for numerous periods of postgraduate work, making several trips abroad for the purpose. During the World War he served as Lieutenant in the Medical Corps.

The passing of Dr. Christen Quevli will be greatly felt by his fellow-Tacomans, by his medical confreres and by his patients, who had a particularly warm feeling of confidence and affection for him. An example of this is a remark of one of them: "At our house we feel as if Dr. Quevli is next to God."

Dr. Quevli is survived by his widow, Mrs. Marie Quevli, a son Dr. Christen Quevli, Jr., and three daughters, Mrs. Mina Morgan, Miss Marie Louise Quevli, and Mrs. Kathryn Mann.

PUBLIC OPINION AND THE DOCTOR

MRS. JOHN ARNASON JOHNSON,

State Hygeia Chairman,

Woman's Auxiliary to the Washington
State Medical Association.

Is public opinion an important factor in medical practice? Does the doctor of today inform the public sufficiently on health matters in order that necessary health legislation may be passed and public health safeguarded? What interest has the physician in public opinion?

Is he not the man of science, educated to search for truth and trained to apply his findings, gained in research, to the prevention and cure of disease? Certainly, the public should realize his thorough training and preparation, his adherence to professional ethics, and his high ideals of service to suffering humanity. However, the ethical doctor, engrossed in the routine of his daily work, while also attempting to keep abreast of the latest discoveries in his own field, finds little time to inform his patients on health lore.

Meanwhile, bombarded on every side by apparently plausible but nevertheless unscientific theories on health and disease, the average citizen is informed and entertained by the highly commercialized quacks, cultists and

patent medicine venders of the day. Training in salesmanship and in the psychology of suggestion prove their most effective means of molding public opinion. How may this deluge of misinformation be counteracted and the truth made known?

Since the ethical physician does not advertise, there still remain lectures, radio talks, articles and books as effective means of informing the public on matters of health. Foremost of these publicity agents is Hygeia, which should be found in every physician's office. Articles in Hygeia may be marked and placed in the hands of patients interested in certain symptoms, or in childhood and adolescent problems. Almost every article advises those having certain symptoms to consult their doctor. Such articles as "Optometry on Trial," by Roger William Riis, in the August Reader's Digest, would have reached the public long ago had Hygeia been more widely distributed. Hygeia may well be called a servant of the medical profession for it interprets the scientific truths of medicine in terms easily understood

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TACOMA

by lay people. Advertisement in Hygeia are approved by the A. M. A. and are therefore dependable. If the physician would seek to interest the young, inexperienced mother in this health magazine he would be repaid by her gratitude and co-operation in health education. This attitude would find expression not only in her home contacts, but also in Parent-Teacher and Pre-School groups.

Since the House of Delegates of the A. M. A. has urged the Woman's Auxiliary to have as one of its chief activities the promotion and distribution of Hygeia, it is the desire of the Woman's Auxiliary that the physicians aid in every way possible in the fulfillment of the objective asked by us by their own members.

PROPOSED CHANGES IN BY-LAWS

That Article 3, Elections, Section 1, be changed to read as follows: "The nominations for an election of President, President Elect, Vice President, Secretary-Treasurer, Trustees and Delegates to the Washington State Medical Association shall be made in the following manner, to-wit."

That Article 3, Section 5, be changed to read as follows: "The Board of Trustees shall consist of the number of members as set forth in Article 4 of the Constitution and in addition thereto the President, President Elect, Past President, Vice President and Secretary-Treasurer shall be members ex-officio."

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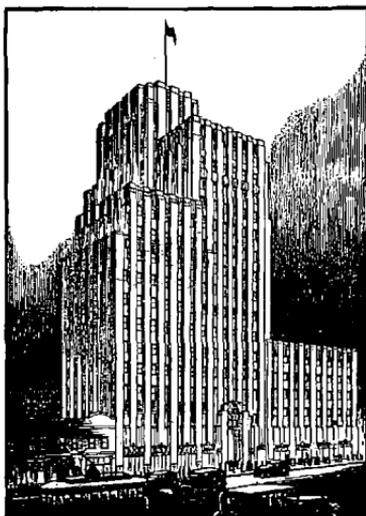
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TACOMA GENERAL HOSPITAL

The increased interest in the Combined Clinic held each Thursday morning, and the monthly Clinical-Pathological Conference, has been very gratifying. Instead of the previous method of taking attendance by counting the doctors present, one now need only count the few remaining empty seats. Doctors Harrington, Terry and the others who have appeared on the program have indeed made it worthwhile for the doctors attending. If the interest in the programs continues in 1938 as it has recently, the Tacoma General Hospital will feel well repaid for its share in the preparation for the meeting.

The personnel of the Tacoma General Hospital, at this holiday time, wish the doctors and their families a very Merry Christmas.

Doctor: Your cough is easier this morning.
 Patient: It should be. I practiced all night.

TACOMA INTERNISTS' SOCIETY

Tacoma Club December 21 6:15 P. M.
 Coarctation of the Aorta.....Dr. W. B. Penney
 Syphilis of the Heart.....Dr. J. F. Steele

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PERSONAL

Dr. R. H. Beach has been elected president of the Tacoma Country & Golf Club.

Dr. S. E. Light and Miss Ruth Grandy were married at a simple but beautiful ceremony on November 20. They are now in Hawaii and are expected home before Christmas.

Dr. G. R. Kingston has been elected a member of the Pierce County Medical Society.

Let's have a good turnout at the Fort Lewis meeting on the 14th. Those who would like to inspect the hospital may come early and guides will show them through. The clinical program will be followed by a luncheon. There will be plenty of parking space and cars will be kept under guard. Let's all turn out.

Dr. and Mrs. Charles McCreery have returned from New York after an absence of several weeks.

Are your County Medical Society dues paid? According to By-laws adopted last year a member who has not paid his dues by December 31 is held suspended from membership in

the county and state societies and reported to the state association as a non-affiliating physician.

Don't forget to remind your patients of the A. M. A. health broadcasts each Wednesday morning at 11, over KOMO.

COMMUNICABLE DISEASES

October, 1937

Poliomeylitis -----	1
Cerebrospinal meningitis -----	1
Mumps -----	2
Smallpox -----	18
Whooping cough -----	25
Scarlet fever -----	11
Chickentox -----	20
Tuberculosis -----	3

Patient: "I have an awful rumbling in my stomach, Doctor."

Doctor: "Hmm! Probably that truck you ate last night."

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STAFF MEETINGS

Tacoma General Hospital

- Monthly staff meeting-----January 4, 8 p.m.
- Tumor clinics-----December 14, 21, 28,
January 4, 9:30 p.m.
- Medical clinics-----December 16, 23, 30,
January 6, 9:30 a.m.
- Orthopedic clinic-----December 9, 9 a.m.

St. Joseph's Hospital

- Monthly clinical meeting---January 3, 8 p.m.

County Hospital

- Monthly staff meeting--December 31, 12 noon
- Clinical pathological conferences -----
December 16, 23, 30, January 6, 4 p.m.

Sign in a doctor's office
Man is made of dust;
Dust settles.
Be a man!

WHAT KIND OF A MEMBER ARE YOU

- Are you an active member, the kind that liked so well,
 - Or are you just contented with the badge on your lapel?
 - Do you attend the meeting and mingle with the flock?
 - Or, brother, do you stay at home and criticize and knock?
 - Do you take an active part to help the work along,
 - Or are you satisfied to be the kind that just belong?
 - Do you ever go and visit that brother who is sick?
 - Or leave the work to just a few, then talk about the clique?
 - Come out to the meeting, help with hand and heart.
 - Don't be just a member, but take an active part.
 - Think this over, brother, you know right from wrong,
 - Be an active member instead of "just belong."
- Exchange.

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