

# The BULLETIN

Publication - Pierce County Medical Society



Vol. XIV - No. 1

JANUARY - 1944

## Programs

JANUARY 11

Medical Arts Auditorium — 8:15 P. M.

### SYMPOSIUM ON TUMORS OF THE BREAST

- Tumors and Clinical Differentiation.....George Kunz, Jr.  
(20 to 30 minutes)
- Therapy of Breast Tumors.....F. J. Rigos  
(20 to 30 minutes)
- Diagnosis of Breast Tumors.....C. B. Ritchie  
(20 to 30 minutes)

# Pierce County Medical Society

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The end of 1943, the beginning of 1944. How the years skim by as one gets older, the same year which, in youth, dragged along apparently without end. Most men, with consciences, in appraising the past year or years, think with regret of the wasted opportunities, the wrong decisions, the errors they have made, with the futile wish that they might have the chance to do it over again. Greater knowledge, greater experience, would make them decide more wisely, so that case they lost might have been saved; that financial opportunity might have been handled more expertly; that enemy they made might have been turned into a friend, with a bit more tact. Being human, we shall undoubtedly go on in the future, meeting the same type of circumstances as we have met in the past. May we hope that, this year, we will avoid the same mistakes we made in previous years?

Nineteen forty-four will see many momentous events arise for our decision. The question of socializing medicine will come up and have to be decided. Pre-paid hospital care will have to be worked out. With many, military life will still be a necessity and later will come the readjustment to civilian living again. The change of the nation from war-time to peacetime, the metamorphosis of war-time industry in beating the sword again into the plow-share, the decrease in incomes which will necessarily deflate the happy squandering of our industrial workers, all of these will influence us too, and we must learn to trim our sails to catch the passing breeze.

General Eisenhower tells us that Germany will be defeated in 1944. That, of course, will be the first step toward world peace. After that, there will still be the problem of cleaning up the European mess and beating the Japanese. Our newspapers publish daily accounts of our victories over these orientals, ships sunk, planes shot down, air fields taken and still, looking at the map, the conquered territory resolves itself into some infinitely small pin-points on some very small islands. At this writing, it looks as if ninety-eight per cent of the job is still to be done. Can we do it in 1944?

In the meantime, we can do certain things.

We can, and must, support the war effort by buying bonds to finance all this. We must save our fats, our paper and all other materials which are scarce and needed. We can avoid unnecessary spending to insure ourselves against inflation. We can grow bigger and better gardens to help out the food shortage and best of all, we can maintain a courageous outlook toward the future, believing still in the might and strength of our nation to overcome all difficulties and bring us through to a secure and lasting peace.

During November, 1943, there were 500 strikes, involving 100,000 men and resulting in over 2,800,000 lost man-hours of work. These are the same union which voluntarily promised to have no strikes during the war.

### New Hospital in Bremerton

*The following article, from the Seattle P-I of December 30th, is worth reproducing here. It shows how we are being hemmed in, as Wilmot Read was telling us at our last meeting.*

Facilities for ministering to the sick in Bremerton were more than doubled yesterday with the opening of the new Franklin Delano Roosevelt Hospital in that city. It has a maximum capacity of 150 beds—as compared with only 108 beds previously available in Bremerton.

Built, equipped and supplied with government funds, it will be operated by a non-profit corporation with a board appointed by the Kitsap County commissioners. It will be under the Blue Cross prepaid hospitalization plan, which provides all hospital expenses except the doctor's bill for everything but mental diseases and tuberculosis.

Dr. Russell Wilson, loaned by the United States public health service for duty as county-city health officer in Bremerton, who promoted the hospital plan, said he believes the new institution will take care of all the needs of the navy yard unless there is an unexpected increase in illness.

Dr. Wilson said for the present only maternity cases will be accepted, pending receipt of

full supplies and the completion of the staff under Mrs. Genevieve Hilger, superintendent.

Dr. S. M. Rabson, formerly a pathologist in the office of the medical examiner of New York City, has arrived to take charge of the hospital's diagnostic laboratory.

This is the first time civilian residents of Bremerton have had the services of a full-time pathologist, according to Dr. Wilson.

The hospital has a well equipped operating room, and Dr. Wilson said its nursery is the last word, following a plan originated by the children's bureau of the department of labor which provides for the complete isolation of every infant.

When fully staffed, the hospital will have 85 nurses, 4 laboratory and X-ray technicians and 3 full-time anesthetists.

It will have an outpatient clinic, operated by the county-city health department, which has its offices in the hospital.

### MINUTES OF THE REGULAR MEETING OF THE PIERCE COUNTY MEDICAL SOCIETY

December 14, 1943

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Auditorium on December 14, 1943, with Dr. S. F. Herrmann in the chair. Minutes of the previous meeting were read and approved.

Dr. E. W. Janes gave the paper of the evening, which was a comprehensive review of recent medical literature in regard to several of the newer drugs.

Dr. W. D. Read then gave a discussion of the plans of the various bureaus for the establishment of a statewide hospital insurance plan. Details of this plan are not yet ready for general information, as they have not been completed. Dr. Read gave a report of what is known as the Blue Cross Hospital Plan and a report of the present status of other plans, as nearly as could be judged from their recent advertisements. The following members discussed various phases of the matter: Drs. Sleep, Rigos, and Verhalen.

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## Les Baskin on Leave From Alaska

We just had a nice visit with Les Baskin, down from the Aleutians for a fifteen day leave. Les has been up there for a year and during that time he has not had a drink of fresh milk or a hot tub bath, so the first thing he did was to drink a quart of milk and take three hot baths in succession, soaking for two or three hours altogether. He said it was even a pleasure to push the button and listen to the sound of the toilet flushing, for where he is stationed, they only have the old style privies. Their water system, originally just a hole chopped in the ice and dipping out a bucketful, has been improved by piping a supply, the piping being aluminum pipes of varying sizes, salvaged from wrecked planes.

They live in Neissen huts, which are not uncomfortable, except on one occasion, when an eighty mile gale blew the hut away and scattered their belongings all over the landscape. The weather is about what we read of, mostly fog, rain, snow, sleet and cold, so a man has to maintain a wardrobe of some two hundred pounds weight to be comfortable. Food and supplies are adequate, most of them coming in by air, as is practically all passenger travel.

Since fighting has ceased in the Aleutians, they have plenty of spare time which is used in making things for their additional comfort, so they learn to be carpenters, plumbers and general utility men through force of necessity. They have a small radio station, which broadcasts from recordings, so they get all the programs we do, only a week or a month later. All of which helps to keep up morale, a very essential thing under such a way of life.

In making one call, to set a fractured arm, Les had to travel part way in a bull-dozer and then hike the rest of the way over the tundra, which can only be traversed in rubber boots or galoshes. With a truck-driver for an anesthetist and a former jewelry salesman as assistant, Les got the arm in a cast. All this in a canvas tent with the usual weather howling outside.

Les is the air base surgeon. Attached to his outfit is Capt. Bill Warn, ex-interne at Tacoma General, who is squadron flight surgeon. Al Ehr-

lich is also somewhere up there. Les is a captain, looks fine but has lost considerable weight, as might be expected from the strenuous life he leads. He's on the way back to the post now, a good soldier, doing a distasteful job with a laugh, keeping up the courage of the weaker ones and hoping some day to be through with it and back home again, to stay. Hoping it won't be long now, we wish you good health and good luck, while it lasts, Captain Lester Baskin.

## Dr. Daniel Hughes Bell Dies

Dr. Daniel Hughes Bell died December 29th, after a long and successful career as one of our leading eye and ear specialists. Dr. Bell had been ailing for some time and was retired from active practice. He and Mrs. Bell were world travelers, having visited most of the continents of the world at sometime or other, and bringing back colored motion pictures which we later enjoyed at various times. Our sincerest sympathy goes to Helen Bell, who has certainly done her part, these last few years, as a loving and faithful wife.

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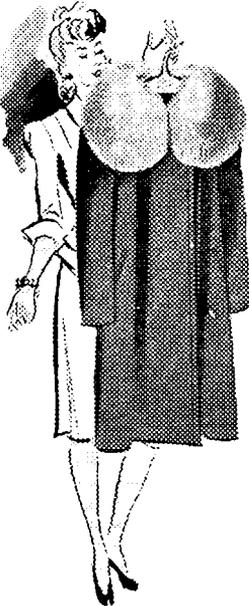
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Hygiene.....	Mrs. R. H. Rea
Medical Society Attendance.....	Mrs. S. F. Hertzmann

The Auxiliary will meet for luncheon at the home of Mrs. C. G. Trimble, 620 South Union, on Thursday, January 13, at 12:30. Take the Sixth Avenue bus and get off at Union.

Members are asked to bring their own sandwiches. Coffee and dessert will be supplied.

Dr. Lewis Hopkins will discuss important medical legislation.

A meeting of the Board has been called for 12 o'clock.

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## *A Dividend of Two Million Babies in Ten Years*

Without the propaganda and pressure which have characterized the intensive campaigns of the Axis countries for more babies, the birth rate in the United States has been moving upward quite steadily from the minimum point it had reached in 1933. At first the rise in the birth rate was slow, paralleling the gradual recovery of the country from the depression of the early 30's. Between 1933 and 1939 the number of babies born in the United States increased only from 16.6 per 1,000 population to 17.3 per 1,000. Since then, however, as national income has climbed with the acceleration of wartime industrial activity, and as the marriage rates have increased to unprecedented high levels, the birth rate has risen rapidly. By 1942 it had jumped to 20.9 per 1,000. When the accounts are closed for 1943, the indications are that the rate may reach about 24 per 1,000, the level prevailing during the first World War. Because of the increase in population during the past quarter of a century, the actual number of babies born in 1943 will far exceed that for any previous year in the country's history.

The increase in the birth rate since the low of 1933 has yielded substantial dividends in babies born. To arrive at the total figure, the number of births recorded in each year was compared with the number that would have been observed if the rates of reproduction according to age of mother had continued as they were in 1933. It is clear from the chart on page 5 that the gain in the number of births each year has varied considerably up to 1940. The gain in 1936, for example, was barely 9,000; in 1938 it amounted to 113,000. But beyond 1940 the excess of babies born over the number that the birth rate of 1933 would have provided, has grown progressively and by wide margins. The rise in the birth rate in 1941 contributed an additional 280,000 babies, virtually doubling the gain for the previous year. The gain was again doubled in 1942 when the excess births numbered 560,000, or an increase of 25 per cent over the number that would have

been born had the level of 1933 prevailed. If we add together the gains for each year from 1933 to 1942, the total comes to one and one third million; the three years 1940 to 1942 contributed one million of this total. When the contribution from 1943 is included, the gain comes to about two million births during the last decade.

The question naturally arises as to the probable future course of the birth rate in this country. May we expect the relatively high rates now prevailing to continue for any considerable length of time? It is reasonable to believe that with millions of men withdrawn from civilian life, the birth rate will probably go to lower levels in the near future. This would be in line with the experience of the belligerent countries in the first World War, and with the record for Germany and Italy in the present conflict. On the other hand, there is the recent experience of England and Wales. There the fall in the birth rate from 14.9 per 1,000 population in 1939 to 14.2 in 1941 was followed by a sharp rise to 15.8 per 1,000 in the following year; records available so far this year indicate that there will be a further rise in the rate for 1943. Thus, it does not always follow that prolonged participation in war is inevitably followed by a decline in the birth rate. Account must be taken of the circumstances pertaining to individual countries.

It would appear, then, that the birth rate in the United States will continue at a high level for the rest of the current year, and even for a good part of the coming year. However, a decline in the rate may be expected as an increasing number of men leave the country for military service in foreign lands. A counter-balancing force, however, is the relatively high income of those working in war industries at home. It appears very unlikely, even though the country should remain at war, that the birth rate will, within the next few years, return to the low point of a decade ago. This is reassuring for the future of our Nation. If the con-

*(Continued on Page 15)*

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## Personals

Cecil Hurst has closed his office and is awaiting his orders from the Army, in the meanwhile taking a little vacation to Victoria.

☆ ☆ ☆

Sydney MacLean has also been vacationing in Victoria for a week's rest.

☆ ☆ ☆

Manny Fewell, the expert denture maker, is moving into the Medical Arts Building January 7th, from the Jones Building, where he has held forth for many years. Welcome to the fold, Manny.

☆ ☆ ☆

Glenn Steele has gone south to Casa Grande, Arizona, for a rest and to recuperate from an attack of flu, which has proved stubborn. He will be gone most of the month of January, maybe longer, depending on his recovery.

☆ ☆ ☆

Weldon Pascoe is off on his winter vacation, this time to Mexico. Pretty good idea, escaping the worst weather by vacationing now.

☆ ☆ ☆

George Marshall Whitacre, Horace's son, has been given his degree as M.D. at Northwestern University. Plans uncertain, with the Army beckoning.

☆ ☆ ☆

Joe Hansen has taken his physical exam at Fort Lewis for the Army. That was two or three weeks ago. Has heard nothing further since.

☆ ☆ ☆

The B. N. Ootkins, at Dupont, are welcoming the arrival of a young visitor, a girl, Joan, their first-born, on December 14th. Congratulations.

☆ ☆ ☆

Guy Griffith is in Los Angeles taking P. G. work in bronchoscopy, Mrs. Griffith in the meantime visiting her people in Kentucky. They expect to be back about the middle of February.

☆ ☆ ☆

Don Willard arrived on December 24th to spend Christmas with his family. He will be located shortly at the Station Hospital, Pyote, Texas. Capt. Willard says he enjoys the *Bulletin* and even reads the advertisements.

## Tacoma Department of Health Summary of Vital Statistics

(Non-residents excluded)

I. Mortality and Natality		1943	1942
Births .....		3296	2687
Deaths .....		1306	1287
Infant Deaths (under one year)....		85	59
Stillbirths .....		38	49

### II. Ten Chief Causes of Death

1. Heart Disease .....	327	317
2. Cancer .....	164	169
3. Diseases of veins and arteries..	152	168
4. Cerebral Hemorrhage .....	104	105
5. Diseases of early infancy.....	65	46
6. Diabetes .....	58	35
7. Nephritis .....	56	66
8. Violent deaths .....	53	63
9. Broncho Pneumonia .....	53	64
10. Senility .....	34	42

### III. Communicable Diseases Reported

Chickenpox .....	456	748
Diphtheria .....	22	5
Erysipelas .....	3	0
German Measles .....	138	34
Gonorrhoea .....	292	181
Influenza .....	8	5
Measles .....	513	1089
Meningitis, spinal .....	21	2
Mumps .....	431	1244
Poliomyelitis .....	18	1
Scarlet Fever .....	180	61
Syphilis .....	280	288
Tuberculosis .....	58	46
Undulant Fever .....	2	17
Vincent's Infection .....	10	0
Whooping Cough .....	105	91

### IV. Deaths From Communicable Diseases

Scarlet Fever .....	0	1
Diphtheria .....	1	1
Erysipelas .....	1	0
Influenza .....	11	5
Measles .....	1	0
Poliomyelitis .....	1	0
Syphilis .....	7	10
Meningitis, Cerebrospinal .....	1	0
Tuberculosis .....	31	29

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## Medicine and the Press

Relations between medicine and the press always have been bad or worse than bad. The doctor has felt, rightly or wrongly, that he would be crucified by the press if he so much as uttered a word. His statements would be exaggerated: "probably" would become "certain," and "improvement" would miraculously become transformed into "cure." Many poor souls would be led to believe that at long last there was hope for them, only to have this hope blasted when they went to see their physician. If the doctor's name appeared in the paper, he was accused of advertising and self-advancement by his colleagues. The press, on the other hand, charged the medical profession with non-cooperation and with attempting to hide the facts. The threat of unfavorable publicity hung over the medic who was even willing to talk to the reporters. An excellent example of this attitude is the attack by several large metropolitan newspapers on the Surgeon General of the Army in connection with the jaundice following yellow fever vaccination. The members of the Medical Corps of the Army and Navy were doing everything possible to learn something of the cause and nature of the condition. Today the relation of the two is still not certain, yet fifteen months ago the office of the Surgeon General was accused in the newspapers of secrecy to cover their own mistakes.

As long as the medical profession and the press continued a private war, the public at large was not interested, but now the charge of exaggeration and varnishing of the news by the press comes from other quarters. It is stated that the facts of the war are not being reported accurately. Difficulties are glossed over and a difficult invasion is described as a picnic. One weekly magazine goes so far as to say, "The sum of their (soldiers') abrupt observations has been that they have lost faith in the veracity of the U. S. radio and in the U. S. press." This is a sorry state for a truly great and necessary part of America.

A healthy fourth estate is an integral part

of a democracy. The people of America deserve to be told how to prevent disease, and there is no group better prepared to tell them than the medical profession. But both medicine and the press must mend their ways. Medicine must be willing to release information on the cure and prevention of disease as rapidly as the facts are known. The press must give some visible expression of confidence in the medical profession and must observe scrupulously the important difference between proved facts and experimental presumptions. Together they can accomplish great things for the general welfare. All that is needed is the development of a technic of writing which combines the cold factual logic of science and the readable style of the newspaper.—*Journal of the Missouri State Medical Association.*

### Lowe's Rest Home for Elderly People

The beautiful Wallace Estate  
10 lovely bedrooms  
5 bathrooms  
Large Yard and Flowers



All guests have private rooms; a home in which your parents receive the personal care we gave our own. We pride ourselves upon the food served—  
all tray service.



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**The rooster's legs  
are straight.**

**The boy's are not.**



**The rooster got plenty of vitamin D.**

---

Fortunately, extreme cases of rickets such as the one above illustrated are comparatively rare nowadays, due to the widespread prophylactic use of vitamin D recommended by the medical profession.

One of the surest and easiest means of routinely administering vitamin D (and vitamin A) to children is MEAD'S OLEUM PERCOMORPHUM WITH OTHER FISH-LIVER OILS AND VIOSTEROL. Supplied in 10-cc. and 50-cc. bottles. Council Accepted. All Mead Products Are Council Accepted. Mead Johnson & Company, Evansville 21, Ind., U.S.A.

## Popular Quackery

It is most unfortunate that the editors of our national lay magazines permit the publication of articles of medical science or medical economics without a thorough investigation of the merits of all statements and the qualifications of the writer. The growing trend towards popular medical literature is being accompanied by an increasing deviation from accuracy, by careless expression of medical ethics, and by greater emphasis on the more sensational aspects of the topics discussed.

The results are distinctly unfavorable to medicine and at the least, confusing to the public. Tulsa doctors are often informed by their patients of new and miraculous cures of which they have read in a popular magazine. Further investigation by the physician often reveals that a medical reporter has enhanced a basic and incomplete laboratory experiment by publishing it as an accomplishment of medical science. The doctor, through such articles, is hindered from the resulting suggestions of patients, and the latter often entertain an idea that the doctor is not exactly on his toes as a result of his apparent lack of knowledge in the new discovery.

Similarly, there are many articles dealing with medical economics which are published in lay magazines suffering from a lack of understanding of the principles of medical ethics and the operative methods of the medical profession. Too much attention is often devoted to apparent results with no mention of the dark features of the matter. The impression is often gained that a deliberate coloring of the subject matter is made in an effort to create a better story.

Finally, there is considerable doubt as to the competence of many such medical reporters. A few, namely Greta Palmer and J. D. Radcliff, are fair-minded and reliable both in their attitude toward the profession and medical science. Others, such as Paul de Kruif, are known enemies to the profession, rabble rousers, and spellbinding demagogues who are making their living at the expense of medicine. They are careless in reporting medical progress, inaccurate, known for half-truths, and masters of insinuation. It is to be hoped that the editors of

lay magazines will take it upon themselves to investigate the motives behind their medical articles, the integrity of their medical reporters. —*Bulletin of Tulsa Co. Medical Society*, Tulsa, Oklahoma.

## A Dividend of Two Million Babies

(Continued From Page 9)

ditions of fertility and mortality prevailing in this country during 1933 had continued without change, our population would have eventually decreased at the rate of 6 per cent from one generation to the next. On the other hand, the conditions of 1942, continued unchanged into the future, would lead us to a population eventually increasing at the rate of 18 per cent per generation.

During the past decade the birth rate in the United States has exhibited remarkable resiliency. But even more important, the greater fertility has been the voluntary expression of a free people who have faith in the future of their country.—*Statistical Bulletin, Metropolitan Life Insurance Co.*

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## Fe, Fi, Fo Fum

The idea has long been current that if members of the human race—essentially an omnivorous species—wanted good, red blood, they must eat good, red meat. It is a simple, chromatic idea, based on the assumption that like begets like: the closer the color of the meat is to blood, the better the blood it builds. How beef cattle get such good, red blood from the grass they eat is another story; their domestic economy is of a different nature and they are put on earth for man's service.

At any rate, the belief persists that since beef is meat, meat must of necessity be beef. Mutton is a poor substitute and under suspicion, being not usually of a red color when cooked, and pork, of course, is pork. These are peasant foods and, presumably, not alone capable of preserving the virility of the descendants of the pioneers who first broke the soil of our great democracy.

With war, however, has come the rationing of many things, including food—not entire for the sake of increasing, with beef, the bellicosity of our armed forces or of overstuffing our British allies, who for four long years have kept alive the flickering flame of freedom. It is mainly that, with limited production, the available supplies should be evenly apportioned and that each should have no less than his share because another wanted more.

To one group of persons special dispensation has been granted, as was their due. This group consists of those afflicted with certain chronic illnesses who would suffer peculiar hardships from accepting the dietary limitations to which the rest of the country has acquiesced. The stewardship of their rations has been placed, logically, in the hands of the medical profession, and already several thousand physician's certificates of patient's necessity have been granted in Massachusetts, the majority of which call for extra meat rations.

It might seem that, among the other great upheavals of the war, the fixed idea that meat must be red could also be uprooted. We are, indeed, reliably informed that lamb, pork, poultry, milk, eggs, cheese and even the lowly fish contain and furnish the same dozen essential

amino acids as does good sirloin and that nutritionally these animal protein foods are practically identical—and half of them are not yet on the ration lists. Evidence seems even to be accumulating that man can exist and function on far less than his daily traditional 70 grams of protein. Add to these iconoclastic innovations the eruption of that complete food, the soybean, over the length and breadth of the land, like the dragon's teeth that Cadmus sowed, and roast beef may well go entirely on the luxury list.—*The New England Journal of Medicine.*

We have received a copy of the *Clovis Compass*, published at the base in Clovis, New Mexico, where our own volatile Chris Reynolds is V. D. Control Officer and Convalescent Training Officer at the Station Hospital. We append some of the jokes culled from this worthy sheet.

First Wife: Does your husband snore in his sleep?

Second Wife: I don't know—we've only been married three days.

Hubby (answering phone): No, no, this isn't the weather bureau. You've got the wrong number.

Wife: Who was that, honey?

Hubby: Oh, some sailor. He wanted to know if the coast was clear!

Fashion Note: The most popular shades this season, like always, will be the ones that are left up in the gal's bedroom window.

Lana Turner's nothing to rave about. Take off the sweater and what has she got?

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## Mortality Statistics in World Wars I and II

There is no such thing as a nice war, and the allied powers have given up any idea of concealing its horrors from their people, but one particular horror of past wars has been reduced to a minimum in this one. The wounded soldier has a better chance.

The miracles performed by Army and Navy doctors and laboratory scientists have been mentioned before, and Rear Admiral Ross T. McIntyre, Surgeon-General of the Navy and personal physician to President Roosevelt, has given some new information concerning them.

In the last war, 7 per cent of the men wounded in action died; in this war barely more than 2 per cent. That means that a wounded man has forty-nine chances to one in his favor in his fight to recover. And "recovery" means more than just living. Admiral McIntyre says that, of the compound fracture cases in the last war, 12 per cent died and almost half were permanently crippled, while in this war not more than one per cent die and only 10 per cent will be disabled.

Blood plasma, sulfa drugs, penicillin, and speedy treatment tell the story, according to Admiral McIntyre. They do not end the horror of war, but they are saving the lives and health of thousands of wounded who would have died or become helpless invalids in past conflicts.

It might not be a bad idea for the American public to be informed also that the Medical Corps recruited largely from the ranks of old-fashioned doctors with training given in old-fashioned American Medical Schools imbued with old-fashioned principles isn't so bad after all. It's cutting the baloney pretty thin to say that our record can be improved on to a great extent if these figures can be beaten. It's like clipping a tenth of a second from the mile-run—*Bulletin of San Diego County Medical Society.*

## The Lost Art of Contemplation

To those physicians in this modern world who are so busy making a living we bring this word of caution: Slow down in your race against time and set aside a portion of each day for

relaxation and contemplation,—a period of self-evaluation or communion with your soul,—if you do not care to join those who are passing out of the picture via Coronary Thrombosis. You not only owe it to yourself and family but you also owe it to your patients. We have lost something that may be vital to man's entire makeup, something that the old timers had which we do not have today, and that is contemplation. The old farmer who hitched his team of horses to a wagon to drive four or five miles to town had little else to do while on the road but contemplate. The old horse and buggy doctor likewise had long drives to make which gave him hours to think things through. The old preacher or circuit rider had the same privilege while visiting the members of his parish. We need not tell you how such men go their rounds today, we cannot describe what we really mean because of our poor literary skill but the point we hope to make is that you should plan your day in such a manner as to have at least one half hour all alone in a quiet place if possible to thoroughly relax and think about yourself, your family, your patients and your future. Every physician should have a study or library where he could seclude himself for a period of time each day in order to develop his mind and ability to its utmost.

Don't invite coronary thrombosis, don't hurry from one appointment to another without taking time out for relaxation, don't expect one afternoon of golf a week to give you this needed relaxation. You should realize this better than other men who have not studied medicine, yet more physicians die from heart disease than any other class of citizens in this country.—*Oakland County Bulletin, Pontiac, Michigan.*

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## Ertron

As a result of the appearance in the November *Reader's Digest* of an article by Paul de Kruif on the use of ertron in arthritis, physicians will be asked about the value of the preparation by patients suffering from various forms of this affliction.

From the tone of the article the uninformed individual might be led to believe that here is the long-sought solution of the arthritis problem. While it is true that the claim of 100 per cent cure is not made, the impression is given that here is a remedy overlooked by the profession in general, and it has been left to de Kruif to tell the world.

The makers of ertron claim that it is irradiated ergosterol specially prepared by a new electric process. It is put out in capsules each containing 50,000 U.S.P. units of Vitamin D. It was on the market as far back as 1935, and has been offered to the profession with most extravagant claims. Of late the literature sent the profession has been more insistent, and has been

accompanied by reprints in proof of its value.

The use of Vitamin D in the treatment of arthritis is not new. Many physicians have used it and have used this special preparation known as ertron with indifferent results. As far back as 1937 the Council on Pharmacy and Chemistry investigated the preparation, although the manufacturers had not submitted it to the council.

In their refusal in 1937 to accept ertron for inclusion in New and Non-Official Remedies, the Council called attention to the danger of relying too much on improvement in subjective symptoms as reported by patients in estimating the value of a remedy used in a disease subject to remissions. At that time the critical examination of the reports of the value of Vitamin D in this treatment of chronic arthritis revealed little to warrant the belief that the beneficial effects claimed were specific and the Council deprecated the unwarranted exploitation of ertron to the profession. There is room for considerable doubt whether more recent experience with the drug warrants any change in its status.  
—*Minnesota Medicine*.

CARL E. WALLACE, B. S.  
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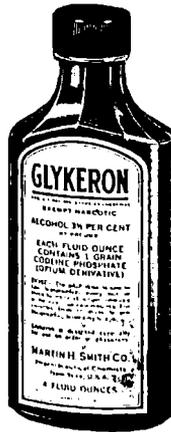
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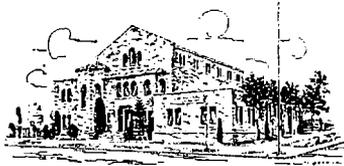
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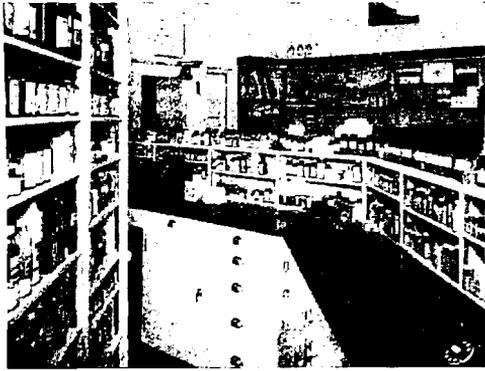
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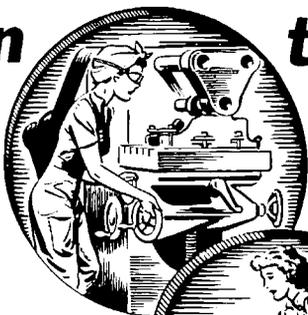
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**VOL. XIV - No. 2**

**FEBRUARY - 1944**

*Programs*

**FEBRUARY 8**

Medical Arts Auditorium — 8:15 P. M.

Diagnosis and treatment of acute and chronic Brucellosis  
Christen Quevli

Discussion ..... W. W. Mattson

Case report ..... J. W. Gullikson

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December 21, 1943

TO ALL LABOR UNIONS, FARM, PENSION, PROGRESSIVE, DEMOCRATIC and REPUBLICAN PARTY GROUPS, and OTHER ORGANIZATIONS IN THE STATE OF WASHINGTON.

Greetings:

Your organization is invited to send representatives to a conference for the purpose of bringing together all groups interested in the passage of S 1161 to form a permanent Washington State Social Security Council and to consider the advisability of a State Wagner-Murray bill to be passed as an initiative in the 1944 election.

THE MEETING WILL BE HELD AT 10:00 A. M., SUNDAY, JANUARY 16 at the EAGLES AERIE ROOM, 7th & Union, Seattle.

Since the conference in October at which provisional officers were elected, work has been under way on the draft of state legislation which will be presented to the conference for its consideration, including:

FOR RETURNING SERVICE MEN AND WOMEN: Free Tuition and Scholarships in the State Institutions; Liberalized Unemployment Compensation, and other benefits.

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With the United Nations advancing on every battlefield, and with the historic Moscow and Tehran conferences charting the path to Victory and to a just and enduring peace, it is of major importance that in every way possible the home front unitedly back the fighting fronts.

Faternally,  
 (signed) MANDEL NEIDER,  
 Executive Secretary.

☆☆☆

We are printing the above letter in full as an example of certain elements to get aboard the

band-wagon of the "something for nothing" group. With a set-up such as these lads expect, there will be jobs for administrators. Gov. Langlie has accumulated a nice surplus in the State treasury for post-war employment, which has a tendency to breed schemes like this. One more move in the encirclement of the medical profession.

☆ ☆ ☆

Headlines in the local papers indicate that the venereal disease situation is not so good. This fact is borne out by the City Health Department, where 201 cases of infectious syphilis and gonorrhea were reported in 1942 and 340 in 1943. The venereal rate of military personnel in the Puget Sound area appears close to the top of the national list. The military authorities are concerned.

Among others, we physicians can help correct this situation. We can take a little more time to elicit the "source" and "sex contacts" of our cases, and report this information to the health department, along with the case, which need only be reported by number.

As recently pointed out by Dr. Pelouse, we must remember that gonorrheal infectious foci may persist for four months or longer after the disappearance of the urethral discharge.

Information pertaining to "third persons" acting as "facilitators" of sex contacts, in any guise whatsoever, would be most acceptable to the health authorities.

☆ ☆ ☆

Among other governmental literature, we are this month in receipt of a letter from the OPA, urging us to use judgment in making out certificates of necessity for invalids to have their fuel oil rations increased on account of sickness. When the patient gets well, we are supposed to cut down on the oil again, as this is "a war of petroleum products," to quote the letter. So you big-hearted lads take notice.

☆ ☆ ☆

The 18th annual meeting of the Conference on Medical Service will be held on February 13th in the Red Laquer Room of the Palmer House in Chicago. This group discusses and recommends to the AMA whatever its members approve. Any doctor who plans to be in Chi-

cago at that time, may be made a delegate. So, if you are going, please let us know.

☆ ☆ ☆

Now that we are told we have a paper shortage, the number of advertising brochures, all on heavy paper, 8 by 12 inches or more, from our drug manufacturers, seem never to have been so numerous. Why, they even seem to have more paper than the government bureaus. And here we are baling up old newspapers to help the shortage. Makes us dizzy, trying to figure it out.

☆ ☆ ☆

Mrs. I. P. Balabanoff has been busying herself writing to senators and congressmen about the Wagner bill. She has received many replies, all of them very conservative about any action these gentlemen may contemplate. Well, at least, she is keeping the boys stirred up. Good work, Mrs. B.

Dr. S. S. Thordarson is in Los Angeles, attending the annual session of the Research Study Club in EENT, to be gone about three weeks. Same place Guy Griffith is studying.

Dr. A. C. Leslie spent a short vacation in the Cascades, up around Index, during January. Just to rest and sleep.

Millard Nelsen has been resting in California, part of the time at Palm Springs.

### Attendance at Meetings

If every member would vision in his mind how it would be if there were no Medical Societies—local, state or national—no organization of any kind to help in the advancement of medical science and its business, we are sure that the absentee members would be among the first to complain.

It is the faithful few of any organization that have caught this vision.

Fellow members: If ever we, each one of us, needed to make a new vow in this coming year of our society's existence, to put our shoulder to the wheel and lend all encouragement to the new officers and committees of our fine medical society, and attend each and every meeting unless prevented by some absolutely unavoidable reason, the *Time is Now!* — Now, when we

*Continued on Page 19*

# OUR FRIENDS, THE ADVERTISERS

## **AMBULANCE SERVICE**

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Federal Bakery

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Porro Biological Laboratories

Tacoma Medical Laboratories

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Medosweet Dairies

Sanitary Infant Dairy

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Rankos Pharmacy

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Lowe's Rest Home

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Halco Sanitarium, Alcoholic

Shadel Sanitarium, Alcoholic

Puget Sound Sanitarium, Nervous  
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Electronic Laboratories

## **SURGICAL BRACES**

Tacoma Brace Shop

## **SURGICAL SUPPLIES**

Shaw Supply Co.

Roger B. Molt

## Scarlet Fever

By C. R. FARGHER, M. D.

The reported incidence of Scarlet Fever has increased to the extent of an epidemic. Thirty-five (35) cases were reported in November, ninety-seven (97) in December and two hundred sixty-seven (267) in January, eighty-eight (88) cases being reported the past week. Due to mild and atypical symptoms, fully one-half of the cases are not recognized as Scarlet Fever.

Records in the Health Department show that there has not been a widespread epidemic here for several years, indicating that there is a high proportion of susceptibles, and this factor together with the recent epidemic of influenza can well explain the occurrence of the prevailing epidemic. Influenza or other similar respiratory infection lowers the resistance of the respiratory mucous membrane to the invading streptococci. In addition the cough and increased secretions of influenza and colds serve as a spreader of pathogenic throat bacteria.

Toxin-producing hemolytic streptococci are the cause, and most cases during an epidemic, are due to one predominating strain. Medical research indicates that in addition to producing scarlet fever the same strain may cause erysipelas, septic sore throat, puerperal fever, wound infections and other streptococcal clinical entities.

There are two components in the pathogenesis, one the *septic* due to the invasion of the streptococci as it extends along the air passages. Pharyngitis, otitis and mastoiditis are manifestations of the septic process. The second component is the *toxin* which produces the eruption and other symptomatology, including glandular enlargement, arthralgia and nephritis. The body builds up an immunity to the toxin, but not to the streptococci (septic manifestations), so that an individual may experience repeated attacks of the septic process but rarely more than one of the toxic. This explains the presence of so many atypical cases (at least 50%) during an epidemic; the atypical cases which show only a sore throat in addition to the constitutional symptoms of headache, fever

and malaise, the typical eruption being absent. This mechanism also explains the ineffectiveness of isolation and public health control of the cases showing the toxic (those with eruption present) manifestations. This also explains the futility of immunization with toxin, because immunity to the septic process is not produced.

Throat cultures for diagnosis and release from quarantine are not used in public health practice, due to the presence of numerous strains of hemolytic streptococci that are not associated with Scarlet Fever.

Due to the ineffectiveness of preventive measures, clinical management of the recognized cases is of paramount importance. Anti-toxin given early to the extremely toxic patient is efficacious. The sulphonamides, though apparently not as effective in Scarlet Fever as in most other clinical streptococcal entities, should be used. All supportive measures certainly are indicated.

Because of the exceptionally high incidence of reported cases, a correspondingly high proportion of complications are expected in the prevailing epidemic.

The most common complications are: otitis and mastoid disease, acute nephritis, arthritis, heart lesions, broncho-pneumonia, pleurisy with effusion, cervical adenitis, septicemia and meningitis. Other streptococcal manifestations, including wound infections, infected burns, erysipelas and puerperal sepsis might well be kept in mind.

### FOR SALE

1 Surgical Chair, upholstered in red leather, chrome trim, adjustable to any position, older model, fine condition. Also surgical instruments, etc.

Call for appointment, 7 to 9 p. m. week days only, MAin 1073; or write A. Youngberg, 938 So. Grant, Tacoma 6, Washington. Instruments may be seen at Medical Library.

# A COMPLETE LINEN SUPPLY For DOCTORS and DENTISTS

LINEN SUPPLIES

NURSES' UNIFORMS

PAPER CUPS (*We furnish fixtures*)

## CASCADE LINEN SUPPLY

2011 South Tacoma Way

Garland 5521



Once you've tried this new kind of cleaning, you'll never go back to ordinary dry cleaning. It's that much better . . . and it costs no more!



MAKES YOUR GARMENTS . . .

- Stay Clean Longer
- Look Better Longer
- Wear Longer
- Hold a Press Better
- Resist Spotting

**AT NO EXTRA COST!**

**PANTORIUM CLEANERS  
TACOMA-OLYMPIC LAUNDRY**

Garland 4433

# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

**OFFICERS**

President.....	Mrs. C. G. Trimble
President-Elect.....	Mrs. Miles Parrott
1st Vice President.....	Mrs. Lester Baskin
2nd Vice President.....	Mrs. S. F. Herrmann
3rd Vice President.....	Mrs. Clyde Gray
4th Vice President.....	Mrs. George Smith
Secretary.....	Mrs. S. S. Thordarson
Treasurer.....	Mrs. L. E. Skinner

**COMMITTEE CHAIRMEN**

Program.....	Mrs. T. H. Duerfeldt
Social.....	Mrs. J. W. Gullikson
Publicity.....	Mrs. J. B. Robertson
Cancer.....	Mrs. Clifford Halvorsen
Historian.....	Mrs. Lester Baskin
Telephone.....	Mrs. Clyde Gray
National Bulletin.....	Mrs. L. A. Hopkins
Membership.....	Mrs. H. F. Griffin
Hygiene.....	Mrs. R. H. Rea
Medical Society Attendance.....	Mrs. S. F. Herrmann

The February meeting of the Auxiliary will be a luncheon at Dalhem, 212 North Tacoma Avenue at 12:30 on the 8th. All doctors' wives are urged to make reservations with the Telephone Committee.

Lieut. Mills Collins, Military Intelligence, will come from Seattle to speak on "Security of War Information." Dr. C. R. Fargher, Director of the Public Health Department of Tacoma, will also speak.

**STANDARD BURNER OIL**  
 THE BEST OIL FOR YOUR HOME  
 Distributed by  
**Fuel Oil Service Corp.**  
**MAin 3171**  
 816 A STREET TACOMA

**PUGET SOUND**  
**SANATORIUM**  
 FOR MENTAL AND NERVOUS CASES  
 A. C. STEWART, M. D., Supt.  
 OFFICE  
 1318 Medical Arts Bldg.  
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**Oakland Drug Store**  
 Complete Prescription Stock  
 ☆  
 Pharmacist in charge has had 17 years' experience in Prescription Work.  
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 We always co-operate fully with the Physician and Patient  
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 PAUL L. MICKENS  
 3852 Center Street  
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*"The Better Way"*  
**TACOMA MAUSOLEUM**  
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**Karen Rynning**  
 PHYSIOTHERAPY  
 Member of  
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 REFERRED WORK ONLY  
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# HALCO SANITARIUM

Exclusively for the Treatment of  
**CHRONIC ALCOHOLISM**

By **CONDITIONED-REFLEX METHOD**

THOS. H. LONG, M. D.

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## The HALCO Alcoholic Treatment

has brought RELIEF TO HUNDREDS of men and women oppressed by liquor used beyond control.

*We respectfully solicit the co-operation of the family physician.*

1415 North 5th St.

MAin 5302

TACOMA

24-Hour Service

# Minutes of the Regular Meeting of The Pierce County Medical Society

January 11, 1944

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Building on January 11, 1944. In the absence of the president, Dr. Ludwig opened the meeting. Dr. Herrmann took charge later. Minutes of the previous meeting were read and approved.

The Secretary stated that the Trustees had approved the report of the Treasurer for 1943 and the proposed budget for 1944 and that they would be published in the Bulletin.

The following program was then presented:

Breast tumors and clinical differentiation, George Kunz, Jr. Dr. Kunz discussed the various forms of breast tumors, cysts and inflammation, with differential diagnosis.

X-ray therapy of breast tumors, by F. J. Rigos. Dr. Rigos opened his paper with a discussion of recent experimental work in various forms of cancer in experimental mice.

Surgery of breast tumors, C. B. Ritchie.

These papers were discussed generally by various members of the society and they will be published in Northwest Medicine.

Dr. Hopkins presented the following report of the voluntary fund raised by donations from members of the Pierce County Medical Society, to be used as a hospital fund for the families of members who are in the service:

Receipts from doctors from October.

1942, to date .....	\$2,669.00
Interest .....	11.29
<hr/>	
Total receipts .....	\$2,680.29
Hospital bill payments.....	157.54
<hr/>	

Balance on hand .....

\$2,522.75  
Funds deposited in United Mutual Savings Bank.

Adjournment.

## We See By the Papers

The Zenith Radio Corporation has brought out a "hearing aid" to sell at forty dollars. Judging by the illustrations of this device, it has all the trimmings of the hundred dollar outfits. Quite a cut in price. This should revolutionize the sale of these contraptions. Might even boost the price of Zenith stock.

\* \* \*

Our friend, Lyle Lemley, head of the Secretarial School in the Medical Arts Building and David Tuell, the funeral director, have filed for election to the School Board. Election March 4th. Judging by the continuous squabbles in the present Board, a little new blood in that organization might be a good idea.

\* \* \*

February first is the deadline for 1944 automobile licenses, in case you have forgotten. All gas ration stamps must have your car's license number and the name of your State,

written on each stamp, in ink. Inspectors are now going the rounds, checking up on the observance of this regulation. You may be asked at any time, any place, to show your gas ration book. If the stamps are not properly marked, the inspector simply pockets the book and you may make such outcry to the Rationing Board as you see fit. Better mark your stamps, now. The wife of one of our doctors has already had this experience, so we know they're not fooling.

\* \* \*

Invitations are out for the annual dinners and clinics of the Seattle Surgical Society and the Puget Sound Surgical Society, the clinics to be held in the King County Hospital, February 11th and 12th, the dinners at the Rainier Club. We note Walt Woodward will preside at the first of these dinners which should be worth the price alone. The program of clinics and papers seems an excellent one and undoubtedly will draw a good attendance from Tacoma.

# RANKOS PHARMACY

*Prescription  
Druggists*



We Carry a Complete Stock of  
Biologicals and Pharmaceuticals



"When Moments Count"

## MAin 0524

PROMPT . . . FREE DELIVERY



Stadium Hi District  
25 North Tacoma Avenue  
Tacoma, Washington



The policy of *fairness to  
all and for all* explains  
why Tacoma families turn  
to *Lynn's* with complete  
confidence



## C. O. Lynn Co.

### Mortuary



*"Distinctive Funeral  
Service"*



717-719 South Tacoma Ave.  
Phone MAin 7745

## Our Boys in Service

Bill Norton, looking large and handsome, was in Tacoma on January 8th, on a short leave. He has now been in the Army 14 months. At present attached to an outfit which examines cadets for the air service, as a psychiatrist. Very important job, as the rate of rejection in this branch is four psychiatric to one physical. Bill has been in the Army fourteen months, looks well, big and handsome as ever. Expects to get a captaincy, maybe, in another four months. Still at the Air Base at Santa Ana, California.

Major Bob Read, Wilmore's other son, the dentist, at the Station Hospital, Pueblo, Colorado, became the father of a boy, Jan. 3rd. Both parents and baby all doing well.

A letter from Charley Larson, who left here to become pathologist to a hospital group, says he is in England, but not permanently located yet. Still thinks he is a captain, although we noted his promotion to major in Army orders lately. He says, "There is not much entertainment here except card games and an occasional visit to the Pubs for a glass of warm beer. Guess they sold all the Scotch whiskey to you fellows, as we don't find it here." What's the matter with the lab still, Charley, that you can't make a little boot-leg stuff? Your V-mail letter reached here in 12 days. Write again, please.

Les Baskin, home on a fifteen-day leave, from the Aleutians, has had about a month here now, due to no transportation going his way. Lucky break for him. He's swigging milk by the quart to make up for a year or more without any.

Bob Brooke has been home on leave, preparatory to being shipped off to duty, we have not learned where.

Dr. Delaney, recently an interne at Tacoma General, has been ordered to Carlisle Barracks for training as a paratrooper.

We learn Jess Bowen is at Esler Field, an air base, at Alexandria, Louisiana.

Carroll Carlson, who has been ensconced nicely at El Paso, has been moved to the air base at Sioux City, Iowa.

At this writing, Cecil Hurst is still sitting around, awaiting orders.

Hillis Griffin is back from training in tropical diseases in Washington, D. C., and now attached at Fort Lewis.

Gerhard Drucker is located in England, at a beautiful country estate about sixty miles from London.

Jim Fairbourn has sailed, presumably now in England. With all these chaps in England, guess the western front will start soon.

Bill Lewis, now a Lt. Commander, is somewhere in the south seas.

Capt. Edwin Anderson, a qualified surgeon, is busy treating G. C. at Fort Lewis. Sounds like one of those assignments we had in the last war. Gullikson, Beach and Rosenblatt left to run the N. P. Hospital.

Lt. Carl Scheyer is now air base surgeon at Astoria, Oregon. He lives with his family at Seaside, Oregon.

### In Memoriam

#### DR. GRANT S. HICKS

Dr. Grant S. Hicks, probably the oldest practicing physician in the State, died at his home, January 19th, at the age of 79. Graduating in 1887, he had a record of practice of fifty-seven years, all but three of them, spent in Tacoma. He came here at the time the Northern Pacific Railway was built and was surgeon to that corporation all the years he spent here. He was one of the founders of the Union Club and the Country Club. He had a host of friends and patients among the pioneer families, who were the leaders in social and business life of the city. During the first world war he had charge of the medical care of the men who built Fort Lewis and also the ship-yards, the Tacoma Smelter and other industrial groups. His ready smile and cheerful manner were as much a tonic to his patients as any medicine. He had a fund of good stories, culled from his long experience, which made him a favorite speaker before the medical groups as well as business organizations. He remained in harness until a day or two before his death. A long life and a good one. He has earned his rest.

### An Art That Needs To Be Revived

To busy physicians in this war-torn world is brought this word of caution: Slow down in your race against time and set aside a brief period each day for relaxation and contemplation; otherwise, you may too soon join those who are passing out of the current picture by the coronary route. You owe it not only to yourself and family but you owe it to your patients.

We have lost something that may be vital to man's general well-being, something that old-timers had and that we of today are missing, namely, *the art of contemplation*. The old horse and buggy doctor had long drives to make which gave him time to think things through. In spite of war-time demands, and for the sake of better professional service, each busy physician should plan each day so as to have at least thirty minutes alone, away from the radio or other modern distractions, in which to *relax and think things over*.

*Bulletin of Luzerne County (Pa.) Medical Society.*

### Communicable Diseases

JANUARY, 1944

- Chickenpox .....
- Diphtheria .....
- Erysipelas .....
- German Measles.....
- Gonorrhoea .....
- Influenza .....
- Measles .....
- Meningitis, spinal.....
- Mumps .....
- Scarlet Fever.....
- Syphilis .....
- Typhoid .....
- Tuberculosis .....
- Undulant Fever.....
- Vincent's .....
- Whooping Cough.....

Smith: "My hay fever has been driving crazy."

Jones (Taking small box from his pocket) "Try some of this. I have had hay fever for years and never use anything else."

## I'm Sorry---

Sorry my advertisement in the last Bulletin was misunderstood by some, sorry Dr. W. W. Mattson had to do so much explaining.

## Gosh!

All I was trying to say is — that I fix anything electrical (or at least I'll try to), anything from a broken wall plug to your finest apparatus.

Won't you give me a buzz next time you're having trouble? I'll come a running. —

**My Phone Number  
Is PROctor 3373**

(If no answer — call BR 3166)

**JIM GRIFFITH**  
ELECTRONIC LABORATORIES,  
1419 N. Anderson Street,  
Tacoma 6, Washington

**Pierce County Medical Society  
1943**

Balance on hand December 31, 1942,  
including Entertainment and Emer-  
gency Fund .....\$1,214.58

**RECEIPTS**  
Membership dues .....\$3,706.94  
Bulletin advertising ..... 1,884.46  
Hospital Fund collections.. 380.00  
Refund of one-third of  
auditorium expense by  
Dental Society ..... 64.71  
Refund of dues of mem-  
bers in service by State  
Association ..... 8.64  
Rent of auditorium..... 5.00    6,049.75  

---

\$7,264.33

**DISBURSEMENTS**  
State Association dues.....\$1,866.25  
Bulletin expense ..... 1,757.82  
Transfer of Hospital Fund  
collections ..... 562.00  
Portion of librarian's salary  
for other society work.... 600.00  
Social Security ..... 12.00  
Unemployment Insurance.. 16.20  
Income tax ..... 33.00  
Victory tax ..... 8.00  
Better Business Bureau  
subscription ..... 100.00  
Insurance on equipment  
of men in service..... 90.11  
Refund of dues to mem-  
bers in service..... 24.04  
Taxes ..... 36.36  
Telephone ..... 67.15  
Current ..... 61.24  
Steam ..... 41.80  
Janitor service ..... 72.00  
Printing and multigraph-  
ing ..... 20.76  
Postage ..... 20.06  
Lamp replacements ..... 2.50  
Miscellaneous expenses..... 26.05  

---

\$5,417.34

**LIBRARY**  
Salary .....\$533.45  
Social Security .... 13.20  
Victory Tax ..... 7.90  
Income Tax ..... 30.00  
Unemployment  
Insurance ..... 17.80  
Books ..... 71.40  
Periodicals ..... 237.10  
Binding ..... 271.75

Medical Library  
Association  
dues ..... 15.00  
Postage and ex-  
press ..... 30.34  
Supplies ..... 11.25    \$1,239.19    \$6,656.53  

---

\$ 607.80

Less Entertainment and Emergency  
Fund .....\$ 587.12

Balance in General Fund December  
31, 1943 .....\$ 20.68

The following amounts in the above state-  
ment shown as Disbursements were withheld  
from the librarian's salary:

Social Security .....\$12.60  
Victory Tax ..... 15.90  
Income Tax ..... 63.00

Pilot, just after tailspin: I'll bet 50 per cent  
of the people down there thought we were go-  
ing to be killed that time.

Student Pilot: Yes, sir. And 50 per cent of  
the people up here thought so too!

Lowe's  
Rest Home  
for  
Elderly People

The beautiful Wallace Estate  
10 lovely bedrooms  
5 bathrooms  
Large Yard and Flowers

☆

All guests have private rooms; a  
home in which your parents  
receive the personal care we  
gave our own. We pride our-  
selves upon the food served—  
all tray service.

☆

402 North J Street  
MAin 4432

## SHOULD VITAMIN D BE GIVEN ONLY TO INFANTS ?

**V**ITAMIN D has been so successful in preventing rickets during infancy that there has been little emphasis on continuing its use after the second year.

But now a careful histologic study has been made which reveals a startlingly high incidence of rickets in children 2 to 14 years old. Follis, Jackson, Eliot, and Park\* report that postmortem examination of 230 children of this age group showed the total prevalence of rickets to be 46.5%.

Rachitic changes were present as late as the fourteenth year, and the incidence was higher among children dying from acute disease than in those dying of chronic disease.

The authors conclude, "We doubt if slight degrees of rickets, such as we found in many of our children, interfere with health and development, but our studies as a whole afford reason to prolong administration of vitamin D to the age limit of our study, the fourteenth year, and especially indicate the necessity to suspect and to take the necessary measures to guard against rickets in sick children."

\*R. H. Follis, D. Jackson, M. M. Eliot, and E. A. Park: Prevalence of rickets in children between two and fourteen years of age. *Am. J. Dis. Child.* 66:1-11, July 1943.

MEAD'S Oleum Percomorphum With Other Fish-Liver Oils and Viosterol is a potent source of vitamins A and D, which is well taken by older children because it can be given in small dosage or capsule form. This ease of administration favors continued year-round use, including periods of illness.

MEAD'S Oleum Percomorphum furnishes 60,000 vitamin A units and 8,500 vitamin D units per gram. Supplied in 10- and 50-cc. bottles and boxes of 48 and 192 capsules. Ethically marketed.

MEAD JOHNSON & COMPANY, Evansville 21, Ind., U.S.A.

**Budget Estimate for 1944**

Balance on hand December 31, 1943.....			\$20.68
<b>ESTIMATED INCOME</b>			
Estimated net income from membership dues.....	\$2,080.00		
Estimated profit from Bulletin.....	375.00	2,455.00	
			<hr/>
			\$2,475.68
<b>ESTIMATED EXPENSE</b>			
Better Business Bureau.....	\$ 100.00		
Insurance on equipment of members in the service.....	90.11		
Telephone .....	70.00		
Light, heat and janitor service.....	120.00		
Postage .....	25.00		
Printing and multigraphing.....	40.00		
Taxes .....	40.00		
Salary, social security and unemployment insurance.....	628.20		
Miscellaneous expenses .....	35.00	\$1,148.31	
<b>LIBRARY</b>			
<b>ESTIMATED INCOME</b>			
\$10.00 each from 99 members.....	\$990.00		
5.00 each from 16 members.....	80.00	\$1,070.00	
			<hr/>
<b>ESTIMATED EXPENSES</b>			
Salary, social security and unemployment insurance	\$564.45		
Periodicals .....	235.00		
Binding .....	200.00		
Postage and express.....	30.00		
Medical Library Association.....	15.00		
Supplies .....	20.00	\$1,064.45	\$2,212.76
			<hr/>
Estimated balance on hand December 31, 1944.....			\$ 262.92

***The Doctor and the Veteran***

As our injured soldiers are beginning to return to civilian life from the far-flung battlefronts of the world, our country and those who comprise it—lawmakers, industrialists, doctors and home-front workers as well—are facing a test to which all must measure up, or else fail miserably in their obligation to the boys whose lives are irreparably changed because they fought for us.

Rehabilitation is the big problem of the moment and for the doctor especially it presents another challenge to his ingenuity, his warm-heartedness and his skill. Unless we begin immediately to school ourselves to cooperation with industry, labor and welfare organizations and to take the leadership in this task of rehabilitation, the nation will have on its hands a sad situation. Returning disabled men will be forced to spend long months of unnecessary

idleness, with each day's delay increasing their resentment, their mental depression and their worries about the financial status of themselves and their dependents.

There are several steps in the successful handling of rehabilitation. The first necessity is proper medical attention after injury. This, as the profession and the press testify, the boys are getting from skilled physicians in foxholes, at front line first aid stations, at hospitals behind the lines, at base hospitals and government hospitals. Once the injured has been rehabilitated physically as much as is immediately possible by corrective surgery, mechanical appliances and neuro-psychiatric treatment, he should be returned to his home community rather than to linger in a government hospital until treatment is completed. The veteran,

*Continued on Page 17*

## HOMOGENIZED FOR HEALTH

Rich, creamy flavor . . . added digestibility . . .  
economy in use . . . are direct results  
of cream being evenly blended  
throughout an entire bottle  
of Kreamilk.



## MEDOSWEET KREAMILK

MEDOSWEET DAIRIES, INC. — TACOMA, WASH.

## Looking Back . . . with Satisfaction

All too often one looks back many years to one particularly dark day. This memory can be made lovelier, more tender, through the knowledge that the final tribute was as beautiful as it could be made.



## Cassedy & Allen Co., Funeral Directors

1224 So. Eye Street

DALE FORKENBROCK, *Manager*

MAin 5801

## The Doctor and the Veteran

*Continued from Page 15*

especially if his injuries have left visible physical defects, will find this return home distasteful unless a well-worked-out program of rehabilitation awaits him.

The proper handling of the veteran on his return home constitutes the second step in rehabilitation. We believe that the only efficient and satisfactory method of completely returning our boys to normal living is to place them in the hands of their community physicians. After all, it was the community physicians who, at government request, gave of their time and skill gratuitously to decide on the physical fitness of the boys who were inducted. It was the doctor who made the decision as to who was and who was not physically qualified to fight. Is it not then only logical to return the disabled to their doctors, who will exert themselves to the utmost to bring these boys back as close to normal as possible and who will decide just what jobs they can undertake to enable them to return to their self-supporting status of pre-war days.

### PLACEMENT IMPORTANT

The placement of the disabled in business and industry—the right man in the right job—presents the third phase of rehabilitation. Its importance cannot be underestimated. Numerous studies in the fields of rehabilitation, not only of war-injured but also of industrially-injured, show that recovery is always hastened considerably and eventually made more complete by re-employment, even though full work cannot at first be undertaken. Nothing so restores the self-confidence of the injured as the knowledge that he has a job to do and that he is again able to support himself and his family. This mental reassurance is the best medicine we can provide the veteran.

The return of the disabled to business and industry will demand the maximum cooperation between patient, doctor and employer. We strongly urge that our doctors begin now to acquaint themselves with jobs in industry and the physical exertion required for various types of work so that, when our boys begin to return in great numbers, the physicians who will care for

them will be educated to their needs. The doctor should be able to give the injured veteran not only the medical attention he needs, but also good sound medical guidance and advice so that he may be properly placed in the job best suited to his abilities.

Intelligent cooperation between doctor and employer will result, for example, in the placement of a man with only one hand in a tool room where he can easily fill the physical requirements of the job. Crippled men may be successfully placed where working conditions are suited to them. A cripple who needs crutches is provided with wider aisles to and from his working area, a larger working space, a stool and other rest facilities, and material in a convenient location. Men who have lost the power of speech work efficiently under foremen who have learned the sign language. Blind men are suited to many tasks.

### VALUABLE COUNSELLOR

Outside of his own family, the returning disabled veteran will find his doctor best able to give him sympathetic encouragement that he will so greatly need during those difficult days of adjustment to civilian life. The doctor has, in many cases, known the veteran from boyhood; he knows his background and pre-war capabilities; he will be able to help the veteran evaluate the importance of his injury in the scheme of things, neither belittling its seriousness nor building it into undue proportions.

Frequently the doctor who will take over the rehabilitation of the veteran will be a veteran himself, who may have seen service on the same battlefield as the patient, who knows as well as

*Continued on Page 19*

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## The Doctor and the Veteran

*Continued from Page 17*

the injured boy the terror of war and the mental and physical havoc that hard battle can wreak. Who better can treat and counsel the disabled than such a doctor—and there will be 50,000 doctors returning from the war. Some of them may not be able to return to the practices they gave up when they went into service and for them the rehabilitation of their comrades will be a welcome task.

In order that this rehabilitation plan that we so strongly recommend become an effective and efficient program, federal funds must be made available for the physical care of the injured veteran. The long and thus-far unfinished fight to provide adequate mustering-out pay for the discharged veteran indicates that such funds may not be forthcoming without long-drawn-out congressional action. But it is our fond hope that petty governmental jealousies and political maneuvering will soon be cleared away and that sound financial planning will be launched to care for our returning veterans. We do not favor the building of large federal bureaucracies. We believe that a fair and comprehensive program for veterans' rehabilitation should provide a wise distribution of federal funds to the country's doctors for the care and treatment of the sick and injured soldier. The benefit to the government of a plan in which the veterans are turned over to the physicians of the nation is obvious; the veteran will make a better civilian adjustment with less mental-physical illness and therefore less dependence upon governmental subsidies.

—*Milwaukee Medical Times.*

## Attendance at Meetings

*Continued from Page 3*

look about us and see what is happening throughout the world to those institutions that men have loved and cherished. Now, when crack pot legislators arise one after another and try to sweep away from under us, and in the twinkling of an eye, our good democratic way of providing medical services.

Many men today in Germany and other totalitarian countries—and above all, professional men—would give 1,000 times the price of membership or its dues, if only they had a medical society to attend.

Looking at it from any angle, besides the professional and business side, we do need the fellowship and mutual helpfulness of meeting with our doctor friends, many of whom we see only a few times in a year. Your absence may be the reason for another member staying away. All of us, whether we knew it or not, are examples for good or evil to the other members. "Fellow Member, What are You???" Let us all be examples of good—and, good active attenders. Some of our fellow citizens, who are not and cannot become members of our medical society, are watching us.

To stay away may soon become a habit, and to quote: "Habit is a cable: we weave a strand of it every day and at last we cannot break it."

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*Bulletin of Somerset County (Pa.) Medical Society.*

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—*Rhode Island Medical Journal*

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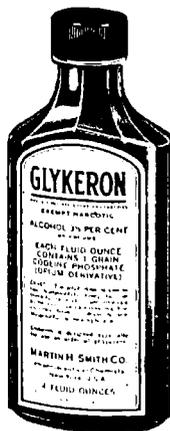
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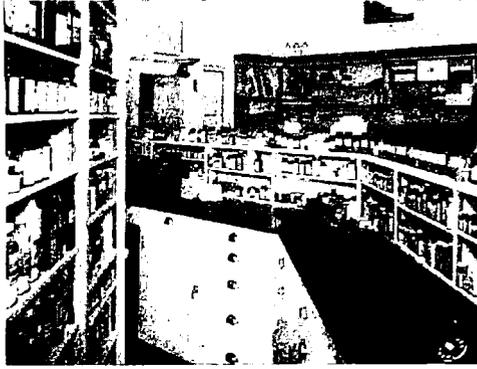
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Publication - Pierce County Medical Society



Programs

NOVEMBER 1944

Volume 10, Number 11

Editorial Board: J. H. ...

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In times of economic turmoil, the people are easily led to subscribe to new systems and new ways. It doesn't matter what the plan is, be, all they want is a change from the existing order. Prohibition was such a change. Having found the evils of prohibition to be greater than the benefits, the people changed it again.

The expenditure of billions of dollars thrown men's minds out of focus, so we had careless scattering of money by military officials, which comes natural in wartime when everything is expendable, as well as poorly advised pouring of money down rat-holes by government, a government composed of men whose minds seem incapable of realizing that the barrel might some day be empty. They had an idea that money is worthless, forgetting that work is the only way to produce it. So that the practice of medicine might be submerged in the wave of socialization boiling through the country, if it can stand the test, it will emerge into its own again when the tide recedes. Even though we may be cramped a time, under political socialization, the great mass of the citizenry will recognize the error of such a system, sentiment will cause a swing in the other direction and we will again resume the practice of medicine as a dignified and scientific profession, instead of the defensive barrier in which we are now engaged.

Dissatisfaction with the methods of the AMA in dealing with the Wagner-Murray-Dingell legislation is beginning to show in the medical profession. On December 11th, 1943, a conference was held in Salt Lake City, to launch a campaign against the Wagner Bill. This rally fizzled out, as there were only a dozen or so physicians who attended, from ten Western States, so it looks as if this effort will die a natural death from anemia.

However, in Gary, Indiana, the Lake County physicians organized the Association of American Physicians and Surgeons and have started out with a newspaper. They say that they are not antagonistic to the AMA nor the National Physician's Committee but will rather supplement the work of these two existing bodies. Their objectives are stated as follows:

1. To organize all ethical physicians and surgeons of the United States and its possessions in an association so established that its members may determine and enforce the conditions under which they will or will not give their services.

2. To prevent participation by a minority of its members in any plan or scheme for the distribution of medical care that is deemed by the majority to be inimical to the interests of the Association and not conducive to the improvement of the public health and welfare.

3. To establish by means of a national assembly of its members, in which all members have both voice and vote, a truly democratic organization of physicians and surgeons that is governed by its members and therefore actually representative of them.

4. Through effective action in the public interest, and under the direction of a qualified public relations counsel, to earn the good public relations and resulting approval and support the profession so richly deserves.

5. To move from the defensive to the offensive in the work toward the actual solution of problems in medical economics and to keep the economics of medicine under the management and control of the practitioners of medicine.

6. By means of adequate organization and competent executive action, to translate into successful accomplishment the decisions of the profession which have heretofore remained only words on the record.

7. To establish a Washington office of the Association for the execution of prompt and effective legislation.

8. To provide a medium of expression for, and actual assistance to, members of the profession in the armed forces, during both the time of their military service and the period of their readjustment to civilian practice.

Dr. G. L. Verplank, past president of the Lake County Medical Society, says, "In one respect, we in Lake County differ from many of our colleagues because here we have had, for five years, an effective organization with three society-owned offices, thirteen full-time employes and an ambitious and thus far, highly

successful program in public relations, medical economics and legislation. Here we have learned by experience that organized medicine can control its own destiny. Here, for five years, we have won every fight against political control of our indigent patients, public health clinics, our sanatoria and the like. Here we have learned, through successful court action, that we can control our own members and that we need have no fears of being in restraint of trade, no worries of reprisal for anything we do, because here we have done what we propose the Association of American Physicians and Surgeons shall do."

Getting the doctors into another national association seems like a tremendous job but if anyone can do it, this militant group of Lake County doctors might be successful. They solicit your membership with a ten dollar annual payment, gratis to the military, internes and students.

Under date of February 10th, we have just received a bulletin from the Council on Medical Service and Public Relations of the AMA, citing some of their activities in combatting the Wagner Bill. We wonder if the Lake County plan has anything to do with this. The AMA committee has at least obtained some definite statements from congressmen and senators, manifesting active opposition to the bill. So far, Mrs. Balabanoff and Fordyce Johnson have only been able to extract from our representatives, vague replies that "they would give the matter their earnest consideration" and similar evasive hog-wash. No one had the guts to come out and say he was for or against the bill. Just the old stall, until after the elections. However, the recent revolt in congress which resulted in the defeat of the president's veto of the tax bill, may be an indication of enough residual courage in the legislators to cause them to stamp on the president's satellite, Senator Wagner, and bury his bill in a deluge of opposition.

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## In Memoriam

HIRAM S. ARGUE

Dr. H. S. Argue died February 5th of pulmonary carcinoma, at the age of 65. He had retired a few years ago but came back into practice solely to help out in the Northern Pacific Hospital during the scarcity of physicians, which might have been a factor in shortening his life.

Graduating at the University of Minnesota in 1905, he came to the Northern Pacific Hospital for his internship and afterwards was for a number of years on the staff. He took up the specialty of urology and was Tacoma's first full-time urologist. He was the first president of the Tacoma Urological Society.

One of his chief characteristics was modesty and shyness. He never felt at ease when addressing any assemblage. At one time, he was offered the presidency of the County Medical Society, but absolutely refused as it would put him in the spotlight of publicity. All his papers and discussions before the Society were brief, for that reason.

He was a man's man, his favorite vacations being on a launch, with a small group of men, exploring the coast of British Columbia, fishing and hunting. He served in the first World War with credit, being stationed mostly in the south of France, in hospital work.

He was a generous man, always one of the first to contribute to a worthy cause, and this trait in him also caused him to give his time and efforts to charity cases and to younger members of the profession during their first years of practice. Professionally, his ethics were so rigid that he almost leaned over backward. Well qualified in his professional work, happy in his home life, he was successful and contented. We shall long remember him as a friend and we mourn his passing.

## In Memoriam

DR. A. C. STEWART

Dr. A. C. Stewart suddenly passed from our midst February 3 at the age of seventy-one. He was a member of the American Medical Association and various recognized neuro-psychiatric societies. He was a member of Washington State Medical Association and Pierce County Medical Society. For the past forty years he has been practicing his profession in Tacoma. For the past several years he owned and operated Puget Sound Sanitorium, Puyallup, and had his offices in the Medical Arts Building, Tacoma, Washington.

Dr. Stewart, in his specialty of neuro-psychiatry, was known to have had enormous experience in private practice, in hospital work, and in the United States Army Medical Corps during the first World War, when he served as a Major overseas.

Coupled with such experience was Dr. Stewart's thorough knowledge of mental diseases. His natural adaptability to this specialty was of the highest degree.

The Medical profession, as well as the public, recognized his value to the community and his aid and advice were eagerly sought.

Besides, he was well informed in world affairs and literature, thus adding greatly to his genial personality; he made many friends and kept them.

He was a hard worker and indefatigable. He was very kind and considerate to those who sought his services.

The Pierce County Medical Society feels the loss of such a good member, and the community of such a splendid citizen.

Dr. Spiro Sargentich  
Dr. W. N. Keller.

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Membership.....	Mrs. H. F. Griffin
Hygiene.....	Mrs. R. H. Rea
Medical Society Attendance.....	Mrs. S. F. Herrmann

Mrs. David J. Lawson, of Mt. Vernon, President of the State Auxiliary, was guest speaker at the luncheon meeting of the local group, at the Dalhem on Thursday, March 9. Mrs. Lawson gave a report on the National Board meeting, held recently in Chicago.

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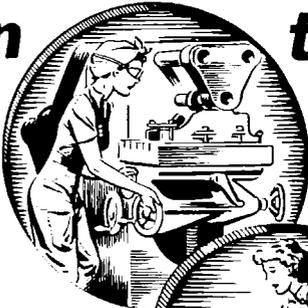


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# Minutes of the Regular Meeting of The Pierce County Medical Society

February 8, 1944

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Auditorium on February 8, 1944, with Dr. S. F. Herrmann in the chair. Minutes of the previous meeting were read and approved.

The application of Dr. George Kunz, Jr., was read and he was elected to membership in the society.

Dr. Herrmann read a communication from the Tacoma Association of Classroom Teachers, asking for representation at a mass meeting to be held to discuss school affairs. Several mem-

bers expressed their desire to attend.

Dr. J. W. Gullikson gave a case report of colonic obstruction due to adhesions following an old hernia operation.

Dr. Christen Quevli gave a paper on "The Diagnosis and Treatment of Acute and Chronic Brucellosis." Dr. Quevli covered in detail the etiology and symptoms of this disease. Because of time limitations he was not able to cover the question of treatment and the society voted for Dr. W. W. Mattson to continue the discussion at the next meeting.

---

## Hurry-Up Medical Education

Some thirty-five years ago medical education in these United States was so inadequate as to constitute a national scandal. There were one hundred and sixty-six medical schools, the great majority of them vicious diploma mills in the hands of unscrupulous and ignorant "Professors", and hardly a tenth of them maintaining decent standards of teaching and training. Then came the devastating Flexner Report, telling the brutal truth, and the diploma mills folded up one by one until the number of recognized schools was reduced to sixty-six—mortality of one hundred!

For many years a steady stream of poorly trained, incompetent men were poured into the medical profession, and much of the severe but just criticism of the profession today can be traced to these disgraceful conditions. Medicine finally cleaned its own house, with the result that, until recently, medical education in this country was the best to be found anywhere throughout the world.

What will be the effect of the present "hurry-up" program of medical education? One need only possess average intelligence to perceive

that this needless "acceleration" of medical training, with only nine months of internship, and this often of the rotating type, threatens to reproduce the highly undesirable conditions of thirty-five years ago. Once in the armed forces, our young physicians will receive, in the vast majority of instances, very inadequate training, and inevitably will return to civil practice poorly equipped to meet the demands of modern medicine.

Furthermore, the hasty training program, with its abbreviated internships and curtailed residencies, will cause a severe deficit in the number of men who in the years to come must furnish our teachers and investigators. The problem is a serious one and deserves the most earnest consideration. Our schools and hospitals must realize that they owe to the inadequately trained men returning to civil life an opportunity to continue their studies, and through a great increase of house-staffs, together with paid fellowships, must seek to mitigate the effects of the disaster which so plainly threatens our profession. The problem is being studied by some of the leaders in medical education, and a solution will be found. It will require the concerted action of every available agency, however, to avert a national calamity.—  
*North Carolina Medical Journal.*

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## With the Service Men

Jim Fairbourn is also in England with Hospital 50, the same group in which Charlie Larson is loafing. Jim is tired of the monotonous waiting too, but admits it isn't as bad as the South Pacific might be. He says the quarters are adequate but dirty from coal dust, the food good, but he isn't toughened to enjoying sleeping on a board bed, covered by a straw tick, with a cylindrical canvas pillow stuffed with straw. However, exploring the antiquities of the area is very interesting, a beautiful old cathedral, ancient Roman walls and ruins, everything acrumble with age. Take it easy, Jim, you lads will see plenty of action as soon as the western front starts moving into Europe. Then, you may see the time when eight hours sleep on a straw tick will seem like Heaven to you. In the meantime, greetings and best wishes from all of us at home.

☆ ☆ ☆

Walter Cameron has been back on a short visit. Walter has probably travelled more miles without leaving this country than any medical officer in the army. He is now at Camp Harvard, Nebraska, for more training and should soon be a flight surgeon. He has been stationed in Texas, Florida, Utah, California, Washington, and now Nebraska. Some of these places more than once. They must be training him to be a general, or something.

☆ ☆ ☆

Marshall Whitacre has finished his Cook County internship and is now in the army at Camp Barkley, Texas. Horace is mighty proud of that boy, and with good reason.

☆ ☆ ☆

The army finally provided transportation for Les Baskin and he is on his way back to the Aleutians, his fifteen-day leave having stretched to nearer six weeks. All fattened up again and ready for another term of duty as army air base surgeon on one of the western-most of the islands.

We have learned Gerhard Drucker's address and his copy of the Bulletin is on its way there. Hope it arrives in good season. We had a letter from him recently, for which, many thanks.

☆ ☆ ☆

We are in receipt of a letter from Fordyce Johnson, still at the Pasadena Station Hospital, reporting his success in making our congressional representatives conscious of our opposition to the Wagner Bill. "Conscious" perhaps, but not yet converted to active cooperation. Keep after them, Ford, if only to keep them on edge. And thanks for the letter.

☆ ☆ ☆

Cecil Hurst has left for a course of training at Carlisle Barracks, which is where they attempt to make military officers out of plain doctors. The usual course is a minimum of six weeks.

☆ ☆ ☆

Cliff Whitaker has been promoted to be a full colonel and is still in charge of a 750 bed hospital in the Southwest Pacific area. Congratulations, Cliff, this makes you the top ranking medico of the Tacoma contingent. You must rate plenty of stenographers by this time, so drop us a line.

### Killed In Action

Steve Hopkins, son of Harry Hopkins and nephew of our own Lewis Hopkins, has been killed in action in the South Pacific and was buried at sea. Just an item in the war news. Just an American boy, giving his life for all of us. It seems a little different when it strikes close to home. We can't do anything now but give a handclasp of sympathy to our dear friend, Lew.

### FOR SALE

American College of Surgeons cap and gown. Perfect condition. Worn twice. Inquire at Medical Library.

## *A Message to the Medical Profession*

For thirty-five years we have consistently co-operated with the medical profession of this locality. Advertising during this period of years has always been fully as beneficial to the medical profession as it has been to ourselves.

The prescription business has never been a side line in our store. At the present time we are carrying one of the largest stocks of biologicals and prescription supplies in the Puget Sound area.

Our store is centrally located and easy to

find, and we have five competent registered men in charge. Some of these men are graduates of colleges of pharmacy.

In addition to our prescription department, we have a few other lines which do not conflict in any degree with the medical profession, such as toiletries, sundries, fountain pens and tobacco.

It will always be our policy to continue putting our best efforts into our prescription department.

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## Right Around Home

Now come the annual real-estate and personal property tax bills from our county auditor. We note they are slightly higher than last year, due to the fact that we have voted increased amounts for the schools and other expenditures, and increased amounts for various State boards. All of which seems fairly reasonable when we understand where the money goes. On the other hand, the federal government is still carrying over three million civilian employes with a monthly payroll of over half a billion dollars. That is six billion a year. If one third of these were released to industry, government could still carry on just as efficiently and the released one-third could swell industrial production by 800 million per year in needed output. We can hardly hope for any reduction in an election year.

☆ ☆ ☆

Darrell Running has been given a medical discharge from the army and is back in practice again. Well, he will be a welcome addition to the home group again.

☆ ☆ ☆

Harry Allison has gone to Yuma, Arizona, for a stay in the sunshine in an effort to dodge pneumonia, which has been threatening him ever since the holidays. Cutting out cigs sometimes helps, Harry.

☆ ☆ ☆

Ralph Schaeffer has gone to Los Angeles for a month's rest and to see some of his relatives, at least, that's his story.

☆ ☆ ☆

We learn that a bill, embracing the principles outlined in our last issue, by the group headed by John T. McCutcheon, is ready for the legislative special session, called by the governor to make a law enabling our soldiers to vote. The voting bill was to be the only legislation before this session, but McCutcheon's brain-child, as well as many others, will undoubtedly be in the hopper, only to confuse and block the needed legislation for the voting bill.

The Washington State Medical Association, with the State Board of Health and the State Funeral Directors Association, requests the doctors to fill out two copies of the death certificates immediately after the death of a patient and mail them to the funeral director, thus conserving his gas in coming after it. It seems the funeral directors have had a crimp put in their gas supply and this will be one way to stretch it. Very well, let's help them out.

☆ ☆ ☆

Sig Herrmann was one of the fortunate few who won a trip on the British airplane carrier to Vancouver, B. C. They were royally entertained on the trip and in Vancouver. It's great to be lucky.

☆ ☆ ☆

Glenn Steele is back from Arizona, feeling much better and ready for work again.

☆ ☆ ☆

New internes at Tacoma General are W. P. Hauser, R. P. Snyder and R. M. Reynolds. At St. Joseph's are W. C. Brown and R. B. Merrick. At the County Hospital are C. W. Biedell, R. J. Morton and J. P. Toppenberg.

☆ ☆ ☆

Hinton Jonez was very, very busy, indeed, during the recent visit of Wendell Willkie, who spoke to a triple-overflow audience here in his campaign for the presidential nomination on the Republican ticket.

☆ ☆ ☆

The City Health Department is beginning to take note of the large number of cases of brucellosis in our city. A meeting was held on March 2, to consider ways and means to combat this condition.

☆ ☆ ☆

Well, good old Ab Bergerson has been re-elected in the primaries again as Commissioner of Public Works. Now, if we can elect George Nace's choice, Cliff Erdahl, as Commissioner of Public Utilities, we'll have a fine city council. Also, don't forget to elect some school board members of whom we can be proud. By concentrating on Lemley and Tuell, we might improve the Board. This without prejudice to other good nominees.

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## UNWANTED FREEDOMS

Four freedoms have been widely advertised to the world as having originated in the Atlantic Ocean. Two of these freedoms are positive—Freedom of Speech and Freedom of Religion or Faith. These two freedoms are sufficient for Victory. These two freedoms give the widening perspective and the far view.

Speech gives opportunity for discussion, study, deliberation and argument. It gives latitude to those who teach and those who listen. Faith is a precious quality that lends courage to the possessor. Faith is an important part of every religion. One may have faith without religion but one cannot have religion without faith.

Freedom from want and freedom from fear are negative quantities. There is no glory in these freedoms. There is no particular virtue in them. They may be useful slogans for attracting political support, but they are weak arguments. They may just as well be left in the Atlantic for all the good they will do.

If one indulges in Freedom from Want, he does not strive, think, save, budget, study nor work. One will do all of these things to escape want. Then, why ask for freedom from want?

If one insists upon Freedom from Fear, he can then bury himself in his innocence and indulge in a confident future that planners are willing to arrange without guarantees.

There are two groupings of people who have freedom from want and freedom of fear and have security. Group 1—Those in asylums. They have security, food, bed, clothing. They have no liberty and no chance to move beyond their walls and fences. Group 2—Those in prisons and penitentiaries. They have freedom from want and fear. They have security and all of its

implications. They are guarded in their security. They have no liberty.

Thus, those with no mind and no liberty have security.

Give me want and I will strive for my own security. Give me fear and I will fend for myself. Give me freedom of speech that I may be educated and acquire intelligence and wisdom enough to protect myself and my brother. Give me freedom of faith so that I may pray to be delivered from planners. I will make my own arrangements. The only arrangements willingly left to planners will be my funeral arrangements - for then I will be secure, settled and dead.

*Reprinted from The Kansas City Medical Journal.*

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1 Surgical Chair, upholstered in red leather, chrome trim, adjustable to any position, older model, fine condition. Also surgical instruments, etc.

Call for appointment, 7 to 9 p. m. week days only, MAin 1073; or write A. Youngberg, 938 So. Grant, Tacoma 6, Washington. Instruments may be seen at Medical Library.

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## Another of Our Past Sins?

Before this country's active participation in war and before Pearl Harbor, over 25,000 doctors had examined approximately two and one-half million selectees. The total recompense—not one dollar (none was expected). Just a nation-wide black-eye and a kick in the teeth resulted because of the alleged bad physical condition of the youth in this country! And we were blamed for this.

About twenty-five percent of the rejections in the first million were for bad or sub-standard teeth. Another hefty percentage was disdained because of flat feet, hernia, sinus disease, eye defects, phimosis, hare-lip, etc., etc.—and all of this our fault.

Were we obliged to hog-tie the hernia cases and sew them up? What physician has ever knowingly hexed the squalling brat he delivered with myopia? And doubtless the dentist was warranted in setting up his grinding apparatus outside the little red school-house and forcibly giving prophylaxis to the teeth of youngsters? If he had, the parents would either knock his block off or would not heed the advice which is at least two decades old—to wash the teeth twice a day and visit your dentist twice a year. This latter so ubiquitous that it ranks second only to "Now I lay me down to sleep!"

Why do patients ever visit doctors? Because of pain; because of unbearable discomfort; because of fear; because of defects, remediable or otherwise, which prevent employment or limit their activity; and because of the insistence of friends or relatives.

Why are remediable defects not corrected? Expense; fear of pain and nuisance of operative procedure; lack of strong propelling factors (pain, etc.); no faith in any doctors or no doctor in whom there is any faith; or just plain laziness and procrastination.

Of all these factors there is only one which can be charged against us—expense. This item is doubtless a deterrent to a certain percent of our population. At no time, however, has any one denied that charity has always been available to those deserving it. As for that group which

would spend twenty-five dollars to have their dog spayed, and would not match it to have their kid's tonsils removed—who can argue with that philosophy? The higher strata of the social scale expect to pay for their medical service.

Your humble analyst feels that the last of the reasons described in the preceding paragraph is the principal reason why more remediable defects are never corrected.

The medical profession is ready now as in the past to do its part. It has no legal course to force corrective treatment on our youth. With exceptionally high examination standards we may still be proud of the health of our average youngster.

If we had health "truant" officers we should be ashamed. As it is even without this legal *armamentarium* the proportion of physical cripples is not greater than the illiterate body of which our great free educational system does not boast—and which our Army does not accept.

—*Jackson County Medical Society Bulletin.*

### Heard In Our Billiard Room

Teacher: "Johnny, tell me the difference between concrete and abstract. Concrete is something you can see and feel, abstract you cannot see or feel."

Johnny: "My pants are concrete, yours are abstract."

Mrs. Gabber: "Doctor, why does a small cavity feel so large to the tongue?"

Dentist: "It's just the natural tendency that your tongue has to exaggerate."

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## Medication Ration

Oh, I used to call the doctor at the slightest provocation.

A headache or a stomach-ache would cause me consternation;

The faintest cough brought visions of advanced tuberculosis,

Oh, before I called the doctor, I had made my diagnosis!

It was doctor this, and doctor that, and "Doctor, I'm so nervous";

Now it's "Do without the doctor, for the doctor's in the service"!

An earache was a mastoid, or a tumor on the brain

(And some illnesses I'd heard of when there wasn't even pain);

A case of overeating was a cardiac condition.

Results of too much dieting I labeled "mal-nutrition"!

It was doctor this, and doctor that, and "Doctor, hurry, please";

Now it's "Do without the doctor, for the doctor's overseas"!

Oh, I loved to take my medicine in large or little pills,

I was a willing victim to all of mankind's ills. If I heard of any symptoms with which my friends had trouble,

I'd promptly call and have the same—but I would have them double!

It was doctor this, and doctor that—"Oh, Doctor, come home—quick."

Ah, how I miss those dear old days—

Those days when I was sick!

*The Kalends*

## Essential Status of Doctors' Assistants

Recently a Washington physician reported to the secretary of the Medical Society that he had employed a secretary without investigating her previous employment. He had been notified that this young lady had been employed in a doctor's office in Miami, Florida, and that she had failed to obtain a written release as required of essential workers under the regulations of the War Manpower Commission. The doctor was certain that most physicians were

unaware that the regulations applied to their office help and suggested that they be informed of the requirements in these columns.

Your Observer called the United States Employment Service and was told that offices of medical doctors were included in the list of essential activities by order of the War Manpower Commission. Doctors who employ help of any kind should therefore ascertain if applicants have previously been engaged in an essential activity within a period of sixty days prior to their making an application. He should also learn if they are from out of town. In this event they must be cleared through the local United States Employment Service. If physicians fail to make such inquiries, they may be violating Government regulations.

If an individual employed by a physician desires to leave she must obtain a written release regardless of the kind of employment she seeks.

There are many categories of essential employment. For example, anyone working in a defense plant is an essential worker and must have a written release. The safe thing for the

*(Continued on Page 21)*

## Carbon Trouble?

## Try Triton Motor Oil

**Triton Motor Oil—100% pure paraffin base — 100% pure lubrication — so pure, in fact, that even the little carbon it does form is practically harmless. Triton means better all-around performance—reduced engine wear.**

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## I'm Sorry---

Sorry my advertisement in the January Bulletin was misunderstood by some, sorry Dr. W. W. Mattson had to do so much explaining.

## Gosh!

All I was trying to say is — that I fix anything electrical (or at least I'll try to), anything from a broken wall plug to your finest apparatus.

Won't you give me a buzz next time you're having trouble? I'll come a running. —

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## The Role of the Physician in Conserving Nurse-Power

The shortage of nurses may be expected to become much more serious early in 1944, as a result of the present recruiting campaign for the Army and Navy Nurse Corps.

A Procurement and Assignment Service for Nurses has been organized and has reviewed the status of some 4,000 graduate nurses of various ages and conditions, known to be residing in Westchester.

The principal sources from which Army and Navy nurses can be drawn are the ranks of private duty nurses and nurses employed in hospitals.

The cooperation of practicing physicians will be necessary in aiding the proper use and conservation of available nurse power in the civilian communities.

Physicians must be urged once more, wherever possible, to discourage the unnecessary use of private nurses by patients under their care. Hospitals may have to learn to use a single private duty nurse for a group of private patients. Physicians may also consider the use of visiting nurses on hourly duty for patients in their homes, instead of hospitalizing the patient in order to obtain the service of hospital nurses.

Floor nurses may find it necessary to organize their time more effectively and occasionally a physician may have to make rounds without being accompanied by a nurse.

The County Medical Society has recommended that each hospital establish a committee representing the hospital administration, the nursing staff, the Board of Trustees, and the medical staff, to explore and exploit every possibility of economizing the services of available professional nurses. This suggestion is most appropriately renewed at this time.

*Westchester Medical Bulletin.*

Nurse: "Whom are they operating on today?"

Orderly: "A fellow who had a golf ball knocked down his throat at the links."

"And who is the man waiting so nervously in the hall? A relative?"

"No, that's the golfer. He's waiting for his ball."

## Essential Status of Doctors' Assistants

*(Continued from Page 19)*

physician to do, therefore, is to ascertain the essentiality of the worker in her previous employment by calling the United States Employment Service. Where the individual has not been employed in the previous sixty days no release is necessary.—*Medical Annals of the District of Columbia.*

Marine Corporal (at party): Do you know that ugly sap of an officer standing over there?

Gal: Do you know who I am? I am that officer's daughter.

Corporal: Do you know who I am?

Gal: No.

Corporal: Thank goodness.

Mother (entering room unexpectedly): Why, I never . . . !

Daughter: Oh, Mother, you must have.

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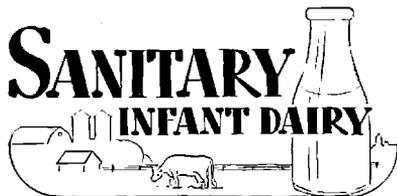


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**BULLETIN**

*Publication - Pierce County Medical*



## In Memoriam

HORACE J. WHITACRE

The doctors of Tacoma and the State of Washington lost their best friend in the death of Horace J. Whitacre, March 10th, 1944, at the age of 74. He had had a long life and a full one. Always active in medical matters, he played a leading part in the formation of the Pierce County Medical Bureau and the Physicians and Dentists Business Bureau. He was an authority on medical economics and worked long and faithfully, sometimes in the face of opposition, for the improvement of medical practice. About two years ago, he gave up his private practice and took a position as medical consultant to the Department of Labor and Industries, to organize throughout the State, a system of treating injured workmen, which resulted in a great improvement in their care, with also considerable saving to the State. This change was made at marked financial decrease in his income.

For several years he was District Governor of the American College of Surgeons and did much to standardize hospital practice and improve the practice of surgery. He was also the local representative of the American Society for the Control of Cancer and devoted much time and effort in spreading information to combat this disease. Following fifteen years teaching pathology, he was not only an outstanding surgeon himself but was assiduous in teaching this science to others. For the annual clinic of the Tacoma Surgical Club, he would personally make clay models of surgical and pathological conditions, to be shown at the clinic. He also presented many papers before the North Pacific Surgical Society, at the annual State Association meetings and in the County Society.

A man of boundless energy, he was interested in every phase of human life. His ethics were of the highest and he lived up to them himself

and was always surprised and not a little pained when he would observe the failure of others to do so, too.

In civic matters, he took an active part, having been president of the Chamber of Commerce, an active Rotarian and a supporter of the Community Chest, the College of Puget Sound, Y.M.C.A., Boy Scouts, Congregational Church, to all of which he contributed liberally in work and money. He was always willing to subscribe to any worthy cause and his contributions were much larger than the average. In many activities brought him in contact with great numbers of people throughout the State and the nation and he was undoubtedly the most widely known physician.

During the First World War, Dr. Whitacre volunteered at once, was commissioned a lieutenant and started work in a few weeks at what is now Fort Lewis. Later, he was advanced to the rank of Lieutenant Colonel and placed in charge of a base hospital in France. He served as president of the Washington Medical Association and of the Pierce County Medical Society, being the nominee selected by both nominating committees. At one time he was voted Tacoma's most valuable citizen in an annual selection by the Chamber of Commerce.

At his funeral, his pastor related how he and Dr. Whitacre were walking through West Park when he found a large limb of a tree obstructing the path. The clergyman stepped over it but Dr. Whitacre, with some effort, hauled it off the path, remarking that this would be a typical example of his way of life, trying to make the way easier for those who might follow after him. Truly a good man. A leader in his profession, a model citizen, a Christian gentleman and a grand friend, it will be long before we see his like again.

## Well, the Lawyers Seem to Be With Us

At a meeting of the American Bar Association in August, 1943, the House of Delegates adopted the following resolution:

"Resolved, that the House of Delegates is opposed to any legislation, decree or mandate that subjects the practice of medicine to federal control and regulation beyond that presently imposed under the American system of free enterprise."

The Bar Association also appointed a committee to study, analyze and investigate Senate Bill 1161 (the Wagner bill) and to give publicity to the committee's findings. This committee has taken the Wagner bill apart, studied the various sections of the 90 page document, shown that it is not at all what Wagner claims, that it will not do the things intended, that the cost will be enormous, that it will put in one man's hands despotic authority over doctors and hospitals, a man moreover, not elected by the people, from whose decisions there is no appeal and who would have the power arbitrarily to make rules and regulations having the force and effect of law, which would directly affect every home.

Since lawyers constitute a large percentage of both houses of Congress, it is to be hoped that they will be influenced by their committee's findings and smother the Wagner bill and its author for good.

## Survey Results Published

The National Physician's Committee has just sent out a pamphlet based on the results of a national survey to determine what people in general think of prepaid medical service as well as other phases of medical practice. Queries elicited that the majority of people thought prepaid medical care would be a good thing to have but preferred private arrangements to government management. There seemed to be satisfaction with their doctors in most cases, both as to the management of the case and the payment. Asked whether it would be good or bad for the government to assume control of churches, schools, the medical profession and labor unions, the votes were about three to one,

against federal control of schools, ten to one for churches, almost three to one for the medical profession but for labor unions, the majority thought the government should control them.

This booklet contains a number of interesting facts which will be of value, not only in the fight against the Wagner-Murray-Dingell bill but also in building the structure for prepaid medical care, which now seems inevitable on a State-wide plan, here in Washington as in other States. We understand the State Medical Association is incorporating a non-profit insurance company, to handle this business legally.

## Plague Suppression In Tacoma

The recently augmented program of the City of Tacoma to control rats began in October of 1942. Just prior to this, a field crew of the U. S. Public Health Service, on a routine reconnaissance survey, isolated plague germs from Tacoma rats for the first time. Plague in both rats and humans has previously been found in other Puget Sound areas, the coasts of Oregon and Washington, and the inland territory.

When the last plague infected specimen was recovered in May of 1943, a total of 81 positive "pooled"\* specimens had accrued. This was the largest focus of Plague uncovered for several years by the U. S. Public Health Service. All places sampled on the waterfront revealed a heavy infestation of Bubonic Plague infected rats. The threat to Tacoma's human population was so serious that all interested health agencies, the U. S. Public Health Service, the State Department of Health, and the Tacoma Department of Health pooled resources of men and money to bring this death-dealing danger under control. At one time as many as 25 men were employed on the project, including engineers, inspectors, biologists, and trappers. The augmented program produced the desired results; it prevented the spread of the disease from rats to humans, as not a single human case has been reported. Tacoma should profit from this experience by resolving to maintain a continuous rodent control program in the future.

\* Specimen containing numerous fleas or organs from several different rats.

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## Nominees For Officers For 1944-1945

The Nominating Committees elected at the last meeting have selected the following two groups as nominees for the election at the April meeting of the County Medical Society:

### *Ticket No. 1*

President Elect .....	W. H. Ludwig
Vice President .....	R. D. Wright
Secretary-Treasurer .....	W. B. Penney
Trustees .....	C. F. Engels
	L. A. Hopkins
	A. H. Buis
Delegates .....	C. R. McCreery
	E. W. Janes
	C. F. Engels
	R. D. Wright
Alternates .....	S. M. MacLean
	Clyde Magill
	C. V. Lundvick
	T. K. Bowles
Business Bureau Trustees....	W. B. Penney
	Clyde Magill
	L. A. Hopkins
	S. M. MacLean

### *Ticket No. 2*

President Elect .....	W. H. Ludwig
Vice President .....	P. C. Kyle
Secretary-Treasurer .....	W. B. Penney
Trustees .....	C. F. Engels
	S. E. Light
	Clyde Magill
Delegates .....	C. R. McCreery
	W. W. Mattson
	E. W. Janes
	C. F. Engels
Alternates .....	C. V. Lundvick
	S. M. MacLean
	Clyde Magill
	T. K. Bowles
Business Bureau Trustees....	C. B. Ritchie
	W. A. Niethammer
	M. R. Hosie
	R. D. MacRae

(Hold-over trustees are Janes, MacLean, Bowles and Wright.)

(Hold-over Business Bureau Trustee, W. D. Read.)

While the above are the selections of the Nominating Committees, any member of the Society may be nominated for any of these offices in the usual manner. The Nominating Committees are usually influenced to select candidates who show sufficient interest in Society affairs by attendance at meetings of the Society, of the various Boards of Trustees, at the State Association, all time-consuming and often associated with some expense. Some have a flair for this sort of work, others dislike it. Electing men to office, who only seek the honor and have no interest in the drudgery, gives a poor result at the year's end. This is probably an explanation of the multiple nominations of the same men in the list above.

## The Red Cross

Of all the different sums we contribute to government in the form of local and federal taxes, the purchase of war bonds, gifts to charitable organizations, probably none is more wisely spent than our donations to the American Red Cross. This year, their need is greater than ever, what with getting comforts of clothing, food and medicine to our nationals who are prisoners of war, helping behind the front lines in battle areas, supplying surgical dressings, blood plasma and such necessities to our fighting men, all these activities need money in large amounts.

Formerly, we used to give a dollar to the women who had small tables in the lobbies of our business buildings and that paid for a membership for a year. Unfortunately, some of our citizens still think in terms of that dollar-a-year subscription. What are needed now are fifty and one hundred dollar subscriptions. We feel sure that the profession will respond adequately if they just get this straight. Remember, you can deduct this from your taxable income, and you will get much more satisfaction from giving voluntarily to the Red Cross than having Mr. Morgenthau wring it out of you. From the amount of work our men are doing

(Continued on Page 17)

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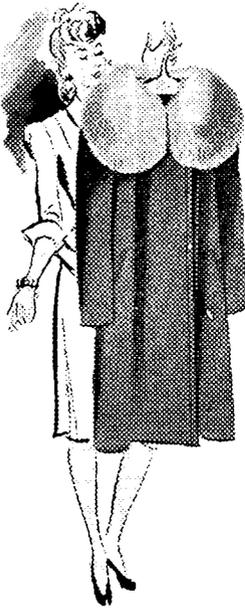
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1st Vice President.....	Mrs. Lester Baskin
2nd Vice President.....	Mrs. S. F. Herrmann
3rd Vice President.....	Mrs. Clyde Gray
4th Vice President.....	Mrs. George Smith
Secretary.....	Mrs. S. S. Thordarson
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**COMMITTEE CHAIRMEN**

Program.....	Mrs. T. H. Duerfeldt
Social.....	Mrs. J. W. Gullikson
Publicity.....	Mrs. J. B. Robertson
Cancer.....	Mrs. Clifford Halvorsen
Historian.....	Mrs. Lester Baskin
Telephone.....	Mrs. Clyde Gray
National Bulletin.....	Mrs. L. A. Hopkins
Membership.....	Mrs. H. F. Griffin
Hygiene.....	Mrs. R. H. Rea
Medical Society Attendance.....	Mrs. S. F. Herrmann

The April meeting of the Auxiliary will be held on the evening of the 14th at Weyerhaeuser Hall at 8 o'clock.

April having long been designated as cancer month, the meeting will be devoted to a discussion of that subject. Mrs. T. H. Duerfeldt, Program Chairman, and Mrs. Clifford Halvorsen, Cancer Chairman, have arranged for a talk entitled "Treated in Time, Cancer Can Be Cured," by Dr. S. F. Herrmann, and a film, "Choose to Live," will be shown.

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# Minutes of the Regular Meeting of The Pierce County Medical Society

MARCH 14, 1944

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Auditorium on March 14, 1944, with S. F. Herrmann in the chair. Minutes of the previous meeting were read and approved.

Motion was made, seconded and passed to transact the business portion of the meeting before taking up the scientific program.

Members nominated and elected for Nominating Committee No. 1 were Dr. T. K. Bowles, Chairman, and Drs. P. C. Kyle and W. D. Read; Committee No. 2, Dr. C. R. McCreery, Chairman, and Drs. E. W. Janes and C. V. Lundvick.

A letter from the Home Service Department of the Red Cross was read, asking that members give home service to families of service men on a fixed fee basis, and it was moved and passed that the recommendation of the Trustees that the state fee schedule should be used as a maximum fee basis be approved and put into effect.

A letter from Rietha Hicks Kachlein, thanking us for the flowers sent to the funeral of Dr. G. S. Hicks, was read.

The scientific portion of the program was opened by a case report by Dr. S. F. Herrmann, who showed a man who had had a linitis plastica type of carcinoma of the stomach, with complete gastrectomy. The patient is now living and well, eats six or seven times a day and apparently digests his food well, in spite of the fact that he has very poor teeth. The history of this case went back fifteen years and demonstrated that a slow-growing cancer is the best subject to cure by removal.

Dr. W. W. Mattson showed a man of 68 in whom Brucellosis was complicated by arthritis. He originally had to come in in a wheel chair, but after a course of treatment is now active and well content with the treatment.

Dr. Mattson, continuing the subject of Brucellosis, said that this was a surgeon's subject as well as being one in which the specialist should be interested. He recited his experience with

these cases since 1941 and showed a diagram of the findings on 31 cases. The outstanding features of most of his cases were an ashy skin, with pale countenance, marked elevations of temperature daily and general lassitude. The other diagnostic features were the blood picture, skin test, the opsonic index and the response to treatment. For the reduction of the fever the sulfa products apparently worked well. The opsonic index is a measure of the phagocytic power of the cells and is an indication of the response of the patient. In some cases transfusions of immune blood have been very effective. In practically all cases of Brucellosis there was a history of the ingestion of raw milk by the patient during a longer or shorter time previous to becoming ill.

Dr. Mattson had obtained positive cultures of Brucellosis from prostatic secretion, among other sources. He described in detail his original and later experiences with these cases, illustrating his statistics by the blackboard presentation.

Dr. J. W. Kalkus, formerly Professor of Pathology at the Washington State College and now Superintendent of the Western Washington Experimental Station at Puyallup, gave the second paper on Brucellosis, particularly as found in domestic animals. He described in detail the efforts that the Experimental Station had been making to obtain definite information as to the course of this disease in animals and its transmission to man. The agglutination test in cattle apparently was the most reliable. A cow that becomes a carrier usually remains a carrier for life, as the demonstration of the organism in the milk proves, even though the cow may appear well.

In reply to questions, Dr. Kalkus stated that the Brucella organism does not live more than 24 hours in sunlight and for that reason the unwarranted fear of contamination from eating

(Continued on Page 21)

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BRoadway 2166

## Here And There

The Joe Turners have been taking a vacation most of the month of March to give Joe a much-needed rest. Part of the time was spent in a visit to their son, Richard, now in the Army, stationed in Eastern Washington.

☆☆☆

Walter Cameron is probably on his way to the Mediterranean area by this time as last reports from him indicated his outfit was all ready to hop off from Florida.

☆☆☆

Warren Penney has returned from a trip to New York where he was in attendance as a delegate to the Tuberculosis League. He probably indulged in other activities but we haven't had the opportunity to pry the details out of him, at this writing.

☆☆☆

John Verhalen and the Missus took a belated honeymoon to San Francisco, Los Angeles and Albuquerque, New Mexico, during the month. Naturally, their eight kids were left at home. You just can't take eight kids on a honeymoon, it doesn't look right. Anyway, John's arthritis is improved since he returned.

☆☆☆

Our newest addition to the profession is Dr. James L. Vadheim with offices in the Medical Arts building. He comes to us after four years in surgery at the Mayo Clinic. He has been looking after Sig Herrmann's work while Sig has been on a trip to Victoria, for a rest.

☆☆☆

The Charlie Fishels are wintering in Arizona. Pretty soft, being a so-called invalid, with an insurance company to take care of the bills. Pretty soft, indeed.

☆☆☆

The Carroll Carlsons' new address is Station Hospital, Drew Field, Tampa, Florida. Whether this indicates another move nearer the front in the immediate future, we do not know yet.

☆☆☆

Lt. James A. LaGasa, Jr., has recently completed basic officer's training in the Marine Corps and is now taking advanced training.

Lt. B. J. Pipe, formerly of the Western Clinic, who has been stationed in Alaska, was a Tacoma visitor last week.

☆☆☆

Lt.-Commander W. E. Lewis, who is apparently somewhere in the Hawaiian Islands, says he is well and very busy and wishes he could come home.

☆☆☆

Congratulations to Dr. C. R. Fargher on the valuable little periodical going out each month from the City Health Department, called Tacoma Health Bulletin, which gives information concerning health matters in Tacoma.

From now on, don't forget it takes a three-cent stamp on all letters, including local ones; air mail eight cents instead of six.

A good physician is like a good father. — Tamil proverb.

A farmer, delivering vegetables to Bill Keller's famous institution at Fort Steilacoom, was engaged in conversation with one of the inmates.

Inmate: "I used to be a farmer once."

Farmer: "Is that so?"

Inmate: "Ever try being crazy?"

Farmer: "No."

Inmate: "Beats farming all to hell."

Soldier (in South Sea area): "You're drunk!"  
Cannibal: "Never tushed a drop. Hic! I just ate W. C. Fields."

### RIGGS OPTICAL CO.

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Optical Prescriptions

Established in 54 Cities



MEDICAL ARTS BLDG.

TACOMA

## *A Message to the Medical Profession*

For thirty-five years we have consistently co-operated with the medical profession of this locality. Advertising during this period of years has always been fully as beneficial to the medical profession as it has been to ourselves.

The prescription business has never been a side line in our store. At the present time we are carrying one of the largest stocks of biologicals and prescription supplies in the Puget Sound area.

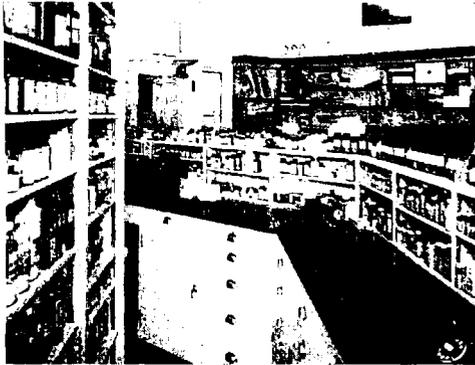
Our store is centrally located and easy to

find, and we have five competent registered men in charge. Some of these men are graduates of colleges of pharmacy.

In addition to our prescription department, we have a few other lines which do not conflict in any degree with the medical profession, such as toiletries, sundries, fountain pens and tobacco.

It will always be our policy to continue putting our best efforts into our prescription department.

**McMILLAN BROTHERS, Inc.**  
955 BROADWAY, TACOMA, WASHINGTON



## **LAKWOOD PHARMACY**

Lakewood Center - Tacoma, Wash. - Phones Lakewood 2191-2192

## Rehabilitation and Re-employment

The number of men rejected by the armed forces or honorably discharged with a "certificate of disability" is already great and will, of necessity, increase to an extent that may make it a difficult task for the civil community to absorb them adequately and gainfully. The proper rehabilitation and re-employment of these men is of the utmost importance if we are to avoid the tragic aftermath of the last war, and much of the responsibility for any future program rests on the civilian physician—for to him the discharged soldier will and should turn for help, guidance and assurance.

It is well to remember that the primary if not the sole objective of the induction stations of the armed forces is to procure a sufficient number of men who are physically fit for the rigors of general military service. The rejection of a selectee does not imply that he is incapable of living a normal existence or of being a useful civilian in his community, as he may well have been in the past. In a similar way, men are discharged from the armed forces with a "certificate of disability" because, for one reason or another, they are no longer able to stand the extreme stress and strain of modern warfare. Again there is no necessary implication that these men cannot return to a useful civilian life; they have been discharged solely because they are not fit for combat duty. It has not, however, been sufficiently stressed or publicized that many men are rejected or discharged for defects entirely compatible with normal civilian life. The man who has been rejected by an induction station or discharged from the armed forces may have a previously undiscovered disease that can and should be treated by his own physician. On the other hand, it must be emphasized that chronic diseases, either mental or physical, that have previously been known should gain no new significance or importance when the soldier returns to his home. The mere fact that he has been rejected or discharged must neither be a stigma against the man nor a cause of special anxiety to his family and friends, though all

too frequently it is. The high-strung, tense person with frequent gastric complaints without organic basis presents no new problem when he returns home with the diagnosis "psycho-neurosis, anxiety type." If he was an acceptable and useful member of society before, there is no reason why he should not continue to be such, provided his problem is understood and he himself is helped.

A man may have been gainfully employed for a period of years and yet be rejected by the armed forces for some psychiatric trait that makes him inefficient as a soldier; this fact renders him no less efficient as a civilian employee. Personality disorders that might well disqualify a man or cause his subsequent discharge again acquire no new significance. What may upset the family and may prejudice a future employer is that traits which had in civil life been regarded as erratic conduct or personal peculiarities were considered by the medical officers to be disqualifying for combat service. A man may be rejected for "healed tuberculosis," yet this diagnosis may thoughtlessly be translated into "tuberculosis," with all its implications, and thereby the man's chances of future employment are materially lessened.

In short, the rehabilitation and especially the re-employment of the rejected selectee or the soldier or sailor discharged for medical reasons should be considered in the light of the fact that many men can function usefully in civilian life even though they cannot be effectively used in the armed forces. The chief role of the physician after determining that no previously unknown disease has been uncovered is to reassure the man, his family and his employer so that he may return to a useful function in civil life. This principle must likewise be appreciated by the man's friends and relatives and by the community at large. If it is not recognized that the physical and mental standards of the "fighter" are different from those of the civilian, we shall, once more, have the picture of the soldier or sailor who has fought for his country and returned only to be regarded as an outcast, a man who fought for a country existing only in his memory.

—*New England Journal of Medicine*

## Immeasurably Consoling . . .



J. J. MELLINGER, Pres.

in time of need is the knowledge that the final tribute will be a perfect one. The Staff of the C. C. Mellinger Co. is always ready with services of individual beauty . . . at always moderate prices.



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- Cathedral Organ

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*Tacoma's Leading Funeral Directors*

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# BRALEY'S, Inc.

## PRESCRIPTION DRUGGISTS

*Catering to the Doctor and  
his Patient*

Free Delivery

Medical Arts Building  
MAin 8116

# A Challenge

Suppose the Wagner-Murray-Dingell bills are killed in committee in the present Congress. Is it not reasonable to assume that similar legislation will be introduced in the next Congress unless the social schemers have their thunder stolen by the elimination of the basis upon which such legislation is predicated? Those who are sponsoring S. 1161 and H. R. 2861 are probably secretly expressing satisfaction over the publicity this social security proposal is receiving. This publicity is being secured primarily through the efforts of the opponents and consequently the proponents are gaining extension of their socialistic ideas at the expense of those groups opposing a trend toward state socialism. Surely those individuals who instigated these bills do not expect, at this time, such drastic legislation to be enacted. However, they probably do anticipate the extensive opposition to S. 1161 and H. R. 2861 indirectly to gain support for future socialistic proposals by bringing the ideas before many easily convertible persons. A part of the success of any advertising campaign is gained from a constant repetition of the advertiser's name and product, regardless of the quality of the product.

Granting that the Wagner-Murray-Dingell bills are not passed by the present Congress, it would follow that constructive offensive action by the medical profession of this country to meet the problems encountered in delivering medical service to all of those who need it must be taken. Otherwise, powerful future attempts to federalize the practice of medicine may be anticipated. Mere argument against such attempts, by pointing out the wonderful record of medicine in the United States, will not satisfy those who cannot secure, for one reason or another, needed medical attention. Furthermore, no organization can long remain on the defensive—it must sooner or later assume the offensive or lose its effects. The medical profession is no exception to the rule in this respect. Will American medicine meet the challenge? Are prepaid voluntary medical insurance plans, similar to those now being

sponsored by various state and county medical societies, the antidote for socialized medicine?

—*Missouri State Medical Assn. Journal*

## Communicable Disease

### REPORTED CASES FOR FEBRUARY

	1944	1943
Chickenpox .....	87	35
Diphtheria .....	1	4
German Measles .....	5	3
Gonorrhea .....	29	14
Measles .....	38	168
Meningitis, spinal .....	3	5
Mumps .....	11	79
Scarlet Fever .....	238	1
Syphilis .....	18	34
Tuberculosis .....	12	0
Undulant Fever .....	48	0
Whooping Cough .....	8	0

\* \* \*  
MARCH, 1944

Chickenpox .....	121
Diphtheria .....	4
German Measles .....	9
Gonorrhea .....	21
Measles .....	32
Meningitis, spinal .....	2
Mumps .....	19
Scarlet Fever .....	305
Syphilis .....	21
Tuberculosis .....	8
Vincent's .....	1
Whooping Cough .....	6
Undulant Fever .....	9

Our idea of an optimist is the man who took the marriage vows at the ripe old age of 87 and started hunting for a nice place close to a school.

### FOR SALE

American College of Surgeons cap and gown. Perfect condition. Worn twice. Inquire at Medical Library.



# HALCO SANITARIUM

Exclusively for the Treatment of

## CHRONIC ALCOHOLISM

By **CONDITIONED-REFLEX METHOD**

THOS. H. LONG, M. D.

*Medical Director*

B. H. KENNEDY

*Manager*

**The Halco Alcoholic Treatment** is the medium which has effectively reconstructed the lives of hundreds of men and women oppressed by liquor used beyond control.

*We respectfully solicit the co-operation of the family physician.*

1415 North 5th St.

MAin 5302

TACOMA

24-Hour Service

## The Experiences of a Soldier

I am one of the fellows who will make the world safe for Democracy. I fought and fought, but I had to go anyway. I was called in Class A. The next time I want to be in Class B. Be here when they go and be here when they come back. I remember when I registered. I went up to a desk and the guy in charge was my milkman. He said, "What's your name?" I said, "you know my name." "What's your name?" he barked. So I told him August Childs. He said "Are you alien?" I said, "No, I feel fine." He asked me where I was born and I said Pittsburgh. Then he said, "When did you first see the light of day. I said, "When we moved to Philadelphia." He asked me how old I was, so I told him 23 the first day of September. He said "The first day of September you will be in Australia and that will be the end of August."

A veterinary started to examine me. He asked me if I ever had the measles, smallpox or St. Virus Dance and did I ever take fits. I said no, only when I stayed in a saloon too long. Then he said, "Can you see alright?" I said "Sure, but I'll be cockeyed tonight if I pass. The doctor said he had examined 150,000 men but that I was the most perfect physical wreck he had ever seen. Then he handed me a Class A card.

I went to camp and I guess they didn't think I'd live long. The first fellow I saw wrote on my card, "Flying Corpse." I went a little further and some guy said, "Look what the wind's blowing in." I said, "Wind nothing, the draft's doing it." On the second morning they put their clothes on me. What an outfit. As soon as you're in it you can fight anybody. They have two sizes, too small and too large. The pants are so tight I can't sit down. The shoes are so big I turned around three times and they didn't move. I passed an officer all dressed up with a fancy belt and all that stuff. He said, calling after me, "Didn't you notice my uniform when you passed?" I said, "Yes, but what are you kicking about? Look what they gave me!"

I landed in camp with \$75, and in 10 minutes

*(Continued on Page 19)*

## The Red Cross

*(Continued from Page 5)*

and the way they can afford trips to here and there, it does not seem unreasonable to expect at least fifty dollars from each doctor in the city and county.

So, come on fellows, let's dig down deep into that wallet on your hip. A year from now, you won't even remember the contribution, much less miss it. You'll feel so much better for having done it too. Remember:

*"All you can take, in your cold, cold hand,  
Is what you have given away."*

## Carbon Trouble?

### Try Triton Motor Oil

**Triton Motor Oil—100% pure paraffin base — 100% pure lubrication — so pure, in fact, that even the little carbon it does form is practically harmless. Triton means better all-around performance—reduced engine wear.**

## UNION OIL COMPANY

## SCOTT'S' LUNCH

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Doctors Eat



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MEDICAL ARTS BUILDING  
Tacoma, Washington

# Prescription Optical Company

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Branches in — EVERETT . . . ABERDEEN . . . BREMERTON

# DEAN DRUG CO.

*Professional Pharmacists*

**R**

Phone MAin 2726

2612 6th Avenue

Tacoma, Washington

## The Experiences of a Soldier

(Continued from Page 17)

I was broke. I never saw so many 3's and 12's on a pair of dice. No matter what I did I went broke. Something was wrong, even in cards. I got five aces one time and I was afraid to bid. It was a good thing I didn't; the fellow next to me said, "We're playing pinochle."

Everything was crazy. If you were a watchman, you were made officer of the day. If you were a livery hand, you were put in the Medical Department. I saw a guy with a wooden leg, and I said to him, "What are you doing in the army?" He said he was going to mash potatoes.

Oh, it was nice. Five below zero one A. M. They called us out for underwear inspection. You talk about scenery—red flannels, B. V. D.'s, all kinds. The unionsuit I had on would fit Tony Galento. The lieutenant lined us up and told me to stand up. I said, "I am up. This underwear makes you think I am setting down. He got mad at me and put me to work digging ditches. A little later he passed and said, "Don't throw dirt up there." I said, "Where will I put it?" He said, "Dig another hole and put it in there."

By that time I was pretty mad, so another guy named Jones and myself drank a quart of whiskey. Finally Jones acted so funny I ran down to the doctor and told him we drank a quart of whiskey. So he asked us if Jones saw pink elephants. I said, "No, that's the trouble. They are there and he doesn't see them."

Three days later we sailed for Australia. Marching down the pier I had more trouble. I had a sergeant who stuttered so much and it took him so long to say "Halt!" that 27 of us marched overboard. They pulled us up and the Captain said, "Fall in."

I was on the boat 16 days, seasick 16 days. Nothing going down, and everything coming

up. I leaned over the rail all the time, and in the middle of one of my leans, the Captain rushed up and said, "What company are you in?" I said, "I'm all by myself."

I said to one of the fellows, "I guess they dropped the anchor." He said, "I knew they'd lose it; it's been hanging over the side ever since we left New York." We had a lifeboat drill. They lowered the boat, some of them

(Continued on Page 21)

### PUGET SOUND SANATORIUM

FOR MENTAL AND NERVOUS CASES

R. J. Bennett, M. D., Resident Psychiatrist  
R. C. Stewart, Business Manager

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1318 Medical Arts Bldg.

Office Telephone—Main 1095

TACOMA

Sanatorium Telephone—PcYallup 118  
PUYALLUP

## Lowe's Rest Home for Elderly People

The beautiful Wallace Estate  
10 lovely bedrooms  
5 bathrooms  
Large Yard and Flowers



All guests have private rooms; a home in which your parents receive the personal care we gave our own. We pride ourselves upon the food served—  
all tray service.



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## DAMMEIER Printing Co.

MAIN 1065

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Tacoma

## Tacoma Brace Shop



*Doctor*—We are here to serve you with proper fitting appliances made to your prescription.



BRACES - ARCH SUPPORTS  
TRUSSES - BELTS  
ARTIFICIAL LIMBS



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## Lundberg Drug Co.

W. W. LUNDBERG, Ph. C.

PACIFIC AVENUE &  
AIRPORT ROAD



Complete  
Prescription  
Service



Telephone GRanite 8519

## I'm Sorry---

Sorry my advertisement in the January Bulletin was misunderstood by some, sorry Dr. W. W. Mattson had to do so much explaining.

## Gosh!

All I was trying to say is — that I fix anything electrical (or at least I'll try to), anything from a broken wall plug to your finest apparatus.

Won't you give me a buzz next time you're having trouble? I'll come a running. —

**My Phone Number  
Is PRoctor 3373**

(If no answer — call BR 3166)

**JIM GRIFFITH**  
**ELECTRONIC LABORATORIES,**  
1419 N. Anderson Street,  
Tacoma 5, Washington

## The Experiences of a Soldier

(Continued from Page 19)

spilled out over the side. The Captain said to pull them out of the water by the hair. I was struggling with them when one fellow with a bald head yelled, "Pull me out!" I said, "Go down and come up the right way."

Well, we landed in Australia. We were immediately sent to the trenches at Darwin. After three nights in the trenches, the cannon started to roar and the shells started to pass about us. I was shaking with patriotism. I tried to hide behind the trees, but there weren't enough for the officers. The Captain came around and said, "Five o'clock and over the top we go." I said, "Captain, I'd like a word with you." He said, "Haven't you any blood in you?" I said, "Yes, but I don't want to see any of it." He said, "Where do you want to go?" I said, "Anywhere where it is warm." He told me where to go.

Five o'clock we went over the top. Ten thousand Japs came at us. The way they looked at me you'd think I started the war. Our Captain yelled, "Fire at will." But I didn't know

any of their names. I guess the fellow behind me thought I was Will. He fired his gun and shot me in the excitement.

On the way to the hospital I asked a fellow where they were taking me. He said, "You're going to the morgue." I said, "There's some mistake. I'm not dead." He said, "Lie down. Do you want to make a fool of the doctor?" Finally a pretty nurse came in and said, "Move over." What am I saying? That was another story.

Yours for Victory,

AUGUST CHILDS.

## Minutes of Regular Meeting

(Continued from Page 9)

animal-manured vegetables is without foundation.

Following these two papers there was a general discussion by the members and some of the health officers present. The discussion was closed by Dr. Mattson, who stated that the subject was far from completely presented and that he possibly might have more on this subject at some future meeting.



# SIMPLE ARITHMETIC

That A Doctor Appreciates



Special  
MORNING MILK



+



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## Looking Back . . . with Satisfaction

All too often one looks back many years to one particularly dark day. This memory can be made lovelier, more tender, through the knowledge that the final tribute was as beautiful as it could be made.



## Cassedy & Allen Co., Funeral Directors

DALE FORKENBROCK, *Manager*

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MAin 5801

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Rich, creamy flavor . . . added digestibility . . .  
economy in use . . . are direct results  
of cream being evenly blended  
throughout an entire bottle  
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## MEDOSWEET KREAMILK

MEDOSWEET DAIRIES, INC. — TACOMA, WASH.

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## STORE HOURS

1 P. M. to 10 P. M.

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11 A. M. to 10 P. M.

Closed All Day Tuesday



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We specialize in

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TACOMA, WASHINGTON

## NICOLAI'S LINCOLN PHARMACY

*Professional Prescription Pharmacists*

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One block south of Lincoln High

We shall always use our best efforts to merit the confidence  
of the Doctor and his patients

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## An Ethical Solution For The Busy Physician *In handling alcoholic problem cases*

*Aimed at conserving the physician's time, the following services have been instituted which cover the entire Northwest:*

1. Interviews with the patient and family at home by specially trained consultants to explain the treatment, determine the adaptability of patient to treatment and admit to sanitarium.
2. Private automobile ambulance service.
3. Routine conditioning therapy in which the patient's physician may participate if he so desires.
4. Complete rehabilitation service following the initial treatment with respect to employment, marital relationship, etc.
5. Full year's program of periodic return visits (reinforcements) to the sanitarium to maintain the initial aversion.
6. Complete report of physical and laboratory findings to the family doctor on completion of initial treatment, and report on each subsequent visit.

### SEATTLE MEDICAL STAFF

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*Medical Director*

WARREN E. TUPPER, M. D.  
*Associate Director*

7106 35th Ave. Southwest  
Seattle 6, Washington  
Phone WEst 7232

### PORTLAND MEDICAL STAFF

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*Exclusively for the Treatment of*

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By **CONDITIONED REFLEX METHOD**

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- \*WILLIAM R. BROZ, M. D., *Medical Director*
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**24-HOUR SERVICE**

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The Finest and Only . . .

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MAin 1122

MAin 1200

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W. P. RAGSDALE

Phone PRoctor 2235

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Tacoma 7, Washington

## YOUR EARS ARE PRECIOUS, TOO

Research reveals that the human ear can detect a movement or displacement of the auditory mechanism by sound of 10-10 power centimeters (one ten billionth of a centimeter). This is less than 1% of the diameter of a hydrogen molecule and far shorter than the wave length of light. The human eye could not detect an object of such dimensions even with the aid of the miraculous new electron microscope!

THE EAR, MAN'S MOST COMPLEX AND SENSITIVE ORGAN OF PERCEPTION, REQUIRES AND DESERVES SKILLED CARE AND STUDY AND THE FINEST INSTRUMENTS THAT MODERN SCIENCE CAN PROVIDE.

MAICO HEARING AID IS MADE BY  
THE MEDICAL ACOUSTIC INSTRUMENT CO.

Ethically Sold By

**Shaw Supply Co. INC.**  
"SHAW SERVICE SATISFIES"

755 Market St.

Medical Arts Building

# GLYKERON

### A Bronchial Sedative

Control the cough that weakens your patient.

GLYKERON quickly relieves this distressing symptom because it contains medically approved respiratory sedatives.

Your patients with respiratory affections do better when they sleep better—*without coughing.*

GLYKERON is an ethical product in origin, in development and distribution. It deserves your full confidence.



THE 4 OZ. ½ BOTTLE

The label is easily removed by the pharmacist and your prescription directions affixed.

### Stimulating Expectorant

GLYKERON loosens the mucus in the bronchial passages and aids in its expulsion.

It lessens the hazard of complications by getting rid of germ-laden secretions.

Prescribe it for the symptom of cough. Very palatable.

GLYKERON now supplied in 4 oz., 16 oz. and half gallon bottles.

*Literature on request*

MARTIN H. SMITH COMPANY · NEW YORK

★ SERVICES AS LOW AS \$100 COMPLETE  
INCLUDING PERPETUAL CARE OF GRAVE

# *Funeral Service*

FUNERAL PARLORS • GARDEN CHAPEL • CREMATORIUM • CEMETERY

Tacoma's finest funeral facilities. 24 hour service.  
Home located at beautiful Mountain View Memorial Park.

## **MOUNTAIN VIEW'S** *FUNERAL HOME*

1000 Feet West of Pacific Highway on Steilacoom Blvd.

DIAL LA 2195

## **FEDERAL BAKERY**

Is Headquarters for

# **HEALTH BREADS**

Take Your Choice—

1. Soya Bread (Non-Acid)
2. 100% Wholewheat (No white flour used)
3. 50% Wholewheat
4. Wheat-Germ Bread (Brown Sugar and Molasses  
only sweetening used)
5. Scotch Oatmeal Bread
6. Potato Bread

THEY ALL TASTE FINE — THEY ALL TOAST FINE

## **FEDERAL BAKERY**

55 Years in Tacoma

MAIN STORE 1107 KAY

5 Retail Stores

# Meyer Drug Co.

*Prescription Service*

Seven Days a Week

9 a. m. to 11 p. m.

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MAin 0504

# The Porro Biological Laboratories

Bacterial Vaccines, Autogenous and Desensitizing  
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Serology - Bacteriology - Hematology - Blood Chemistry - Skin Tests  
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C. R. McCOLL, M.D., Pathologist  
Referred Work Only

718 Medical Arts Building

Tacoma, Washington



The policy of *fairness* to  
all and *for all* explains  
why Tacoma families turn  
to *Lynn's* with complete  
confidence



## **C. O. Lynn Co.**

### **Mortuary**



*"Distinctive Funeral  
Service"*



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# **RANKOS**

## **PHARMACY**

*Prescription  
Druggists*



We Carry a Complete Stock of  
Biologicals and Pharmaceutical



*"When Moments Count"*

## **MAin 0524**

PROMPT . . . FREE DELIVERY



Stadium Hi District  
25 North Tacoma Avenue  
Tacoma, Washington

# Missing...



"Missing in action." You know what that can mean.

Mom says you must be brave. "It's what your father would expect of us," she tells you when it's bedtime and your chin starts to feel shaky. Then she kisses you extra hard and turns her head away so you can't see her eyes.

You've never let her see you cry. Not once, since that telegram came and she twisted it all up in a ball, then smoothed it and put it in the desk.

But, lying in bed, you play "Pretend" — pretend you can hear his step as he comes up to your room — pretend you can feel a stubble brush your forehead. And sometimes, in the dark, you can almost smell a cigarette-y suit close to your face.

Later you dream — dreams that you don't tell about. And in the morning you wake up with that funny, empty feeling in your stomach.

Poor little guy. We — all of us — wish there were something we could do. Perhaps there is. Why shouldn't it be this?

We can resolve that the plans your father had for you shall remain within your reach, that you shall have the chance to grow and learn, that your opportunities will be bounded only by your own get-up-and-go, that you will progress and prosper in direct relation to your own ability — in a land of freedom and opportunity.

Those are the things your Dad valued, the things for which he gave his life. Though some may strive to change all that — provide you with the "benefits" of an all-powerful government, the "advantages" of regimentation, the "blessings" of bureaucracy — we can resolve they won't succeed.

You, son, won't read these words, and if you did, they wouldn't mean much to you now. But your father's friends — known and unknown — are making you a promise, just the same.

You may never hear it from their lips. But if you were older you would read it in their faces — recognize it in their spirit. They are determined to keep America free. To keep it a land in which government is the servant, not the master of the people. To keep it the kind of America your Dad wanted to preserve — for you.

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# Pierce County Medical Society

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Editor.....	C. F. Engels
Business Manager.....	W. W. Mattson

With our annual dinner in May, the Pierce County Medical Society will go on vacation until September. The Bulletin will also discontinue publication during that period. In September, many events can happen. The European war might possibly be over. We will be in the midst of a presidential campaign. Many of us will have been away on vacation or study courses, or both. The fate of the Wagner bill may be decided by then. Births and deaths may occur in the medical group. The influence of the war on civilian living may change our way of life again, as it has already changed it in the past. One thing we can count on as being certain will be collection of taxes of that we may be assured for several generations to come. We may be free men and nations but these taxes have to be paid and will never be entirely free until they are.

Victory gardens are all the vogue again and we shall need all we can grow, we are informed. Our rose enthusiasts plan to have a rose-show again, in spite of the space needed for vegetable tables. Those of us who have not yet moved into apartments will doubtless have to wrestle with the lawn-mower, due to the dearth of gardeners. Penicillin may be available for private practice and will have a tremendous sale.

A new crop of internes will (we hope) appear in our hospitals. There will be a frenetic time on the stock exchange if Berlin falls. Gasoline will be scarcer due to the immense amounts needed for the thousands of planes over Europe. The shortage of nurses will continue.

As the Navy would say, "Snafu," which is an abbreviation for "Situation normal, all fouled up." Well, we can wait and see.

One of our doctors had the misfortune recently to have a twelve-year-old girl run out in front of a bus, standing at the curb, right in front of his car, when he could not possibly avoid striking her. Fortunately, she was not killed, as the doctor was driving slowly and he thought, carefully. It behooves us to give these parked busses a wide berth and to creep slowly past, lest we have a similar unpleasant experience.

## Medical News

The annual dinner of the County Medical Society will be held at the Winthrop Hotel on May 9th. John Verhalen and his cohorts are cooking up some rare entertainment for the occasion. We can't miss this; it's going to be too good.

We understand the Medical Bureau also plans an annual dinner, to be given on May 23rd. Don't know about the entertainment but feel sure the dinner will be good. This one will probably be free, an added inducement to boost attendance.

County Society elections resulted in choosing the following: President, John Gullikson; President-elect, W. H. Ludwig; Vice President, Ross Wright; Secretary-Treasurer, the perennial Penney; Trustees, Hopkins, Engels, Magill (Damn good trustees, too. What?); Delegates, C. R. McCreery, Janes, Engels, Wright; Alternates, MacLean, Magill, Lundvick, Bowles; Business Bureau Trustees, MacLean, Hopkins, Magill, Ritchie. One of the ballots in the election must have been voted by a humorist. For various offices he wrote in the names of Governor Bricker, Governor Langlie, Morgenthau, and Harry P. Cain. This must be the extreme right wing in our organization.

Our three newest members of the Society are James L. Vadheim, Frank J. Rigos and Robert Bucklin, voted in at the last meeting. Welcome to the fold, brothers, glad to have you with us.

The County Hospital has at last obtained a library, a large room on the second floor being devoted to this purpose and twenty-five hundred dollars appropriated for books. This fills a long-felt want and should help in keeping internes in the institution.

---

## Medical Economics

The War Production Board, from its Chicago office, sends us a letter, eleven pages long, asking help in the drive to save paper. Presumably to allow them to have enough paper to send out more letters. Of all the cock-eyed—Oh, what's the use?

The Council on Medical Service and Public Relations of the A. M. A. also sends us thirteen

pages of comments by the press throughout the country, on the Wagner Bill. Apparently there is no paper shortage in Chicago.

The American Association of Physicians and Surgeons, that is the Lake County, Indiana group, sends us the second number of its newspaper, stating it has received memberships from all over the country and is going strong. We still wonder if its activities have anything to do with the A. M. A. effort mentioned in the foregoing paragraph.

The little Wagner Bill, an effort to have the State of Washington put into effect the provisions of its malodorous parent, sponsored by our friend (sic), John T. McCutcheon, will undoubtedly come out before the next legislature as an initiative. We understand the movement is now under way. Naturally all the old age assistance groups will sign it, as well as those who expect to get something for nothing, at the State's expense. Government "for the people and by the people" is right. Our old age population has already grown a great deal more than is natural since the assistance measure began, leaving but one conclusion, that we are getting an influx of old people, who come here in order to have the benefits of such legislation. If McCutcheon's bill becomes law, we may see this result multiplied many times. Well, it's probably better than having poor-houses.

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## Physical Medicine Boosted

After a scientific exploration of the subject, with special reference to its value in the rehabilitation of the wounded and sick men discharged from the armies, Bernard M. Baruch has given \$1,100,000 to be used for the teaching of, and research in, physical medicine. An Administrative Board, under the chairmanship of Dr. Ray Lyman Wilbur, Chancellor of Stanford University, has been established to inaugurate the program.

This committee reports: "Medicine based on the empirical use of pills and potions is becoming obsolete. However, medicine based on the precision of physics and chemistry is amply

*Continued on Page 13*

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## In Memoriam

DR. HERMAN S. JUDD

By DR. W. N. KELLER

Dr. Herman S. Judd has passed to his reward.

I first became acquainted with Dr. Judd when we were students at Rush Medical College in Chicago, where he was graduated in 1895 *cum laude*. He served his internship at the Presbyterian Hospital. I recall often seeing him assist in the large hospital amphitheater in the Clinic of Nicholas Senn, then one of the world's greatest surgeons. There he received his first instructions in practical surgery, and he afterwards became a skillful, industrial surgeon. I did not meet him again until 1909 when he moved to Tacoma, Washington.

Dr. Judd was born in Minneapolis July 18, 1872 of Scotch descent. After serving his internship he entered private practice in 1897 in Topeka, Kansas. He married and had five children, four of whom are now living, three daughters and one son. The son and one daughter are now in the service.

From Topeka he moved to Lead, South Dakota, where he was surgeon for Homestake Mining Company. He held this position for two and one-half years and he then entered practice in the same field for ten years. He returned temporarily to Topeka and then moved to Tacoma, Washington, where he entered private practice. He had special duty assignment with the Tacoma Private Sanitorium and two years industrial medicine and surgery with Drs. Yocum and Curran. At times he was a member of the

staff of two mental sanatoria. He served five years with the United States Veterans Bureau—for a time with the Cushman Hospital, Tacoma, Washington, and then Acting Clinical Director of the Veterans Hospital in Palo Alto, California. He returned to Tacoma and became City Director of Health for four and one-half years, and was Superintendent of the Tacoma Contagious Hospital. For three months he relieved the Health Commissioner of Alaska. In 1933 he was appointed surgeon in the Indian Service, United States Department of Interior, Cape Prince of Wales, Alaska. He resigned this position to return to the staff of the Western State Hospital, Fort Steilacoom, Washington, on January 22, 1934, where he remained until his demise. He had previously been on the Hospital Staff from 1919 to 1921.

Dr. Judd was a man of deeds and was never idle. He took an interest in public affairs. He did not over-value money, and devoted himself to service. He was unassuming, kind, genial, likable, and made many friends. He was interested in nature and the big outdoors. His visiting friends he always took to the mountain, and strange to say, he frequently visited the Mountain View Cemetery, where he admired the beautiful landscaping and especially the tree decorations at Christmas time. He was laid to rest there. He had high ideals and was the soul of integrity, square and honest. His descendants may point to his record with pride.

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2nd Vice President.....	Mrs. S. F. Herrmann
3rd Vice President.....	Mrs. Clyde Gray
4th Vice President.....	Mrs. George Smith
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Publicity.....	Mrs. J. B. Robertson
Cancer.....	Mrs. Clifford Halvorsen
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National Bulletin.....	Mrs. L. A. Hopkins
Membership.....	Mrs. H. F. Griffin
Hygeia.....	Mrs. R. H. Rea
Medical Society Attendance.....	Mrs. S. F. Herrmann

The final meeting of the Auxiliary for the spring season will be a tea at the home of Mrs. S. S. Thorardson, 3716 North Adams Street, at 2 o'clock on the afternoon of Thursday, May 11th. Mrs. G. M. Steele and Mrs. John Steele will have charge of the social hour.

The speaker of the afternoon will be Mrs. Eric Lindbloom, Secretary to Gen. Janoa, Swedish Consul in Italy.

Mrs. C. G. Trimble, Auxiliary President, will call for reports of committee chairmen and the annual election of officers will be held.

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# Minutes of the Regular Meeting of The Pierce County Medical Society

APRIL 11, 1944

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Auditorium on April 11, 1944, with S. F. Herrmann in the chair. Minutes of the previous meeting were read and approved.

N. E. Magnussen, County Health Officer, gave a report of a case of syphilis which was not reported to the health office. After it came to their attention, Dr. Magnussen showed with a chart the number of cases that had been infected and also the procedure used in tracing back to investigate this man's infection. (Dr. Magnussen's report follows the Minutes.)

S. P. Sullivan, Lieutenant Commander M. C., of the United States Naval Hospital, Bremerton, gave a talk on the technic of handling gonorrheal contacts in the army and navy. He also stressed the value of reporting cases of all venereal disease to the local health officers. He stated that up to date there had been more days lost in the army from venereal disease than war casualties. He also stressed that the rate of venereal infection in Tacoma was twice what it is in Bremerton and that Bremerton was three times as high as the general army rate throughout the country. His final statement was that every day lost by venereal disease is a day away from a gun.

C. H. Odom, Supervisor of the Washington State Vocational Rehabilitation Commission at Olympia, gave a general resume of the history of the development and of the present work of rehabilitation work in the state. He stated there were two distinct phases to this, one dealing with returned soldiers and the other covering civilians. He said that local boards were being established throughout the state to deal with these disabilities. Mr. Odom stated that over one million men had already been discharged from the service in this war, 85 per cent of whom were not for disabilities incurred in the service.

The work of this committee is divided into four classifications, vocational training, counsel

and guidance, occasional appliances and placement.

It is expected that these committees will be a clearing house for re-employment of returned soldiers. The State of Washington is now spending from \$250,000.00 to \$300,000.00 a month on training persons for war jobs. As soon as the war is over and even before, this must be changed to training service men for civilian jobs, which will be a much bigger job than the first.

Dr. Frederick B. Exner, of Seattle, read a paper entitled "Medicine's Number One Problem." This was a thesis against socialized medicine and was a very thought-provoking paper.

The application of Dr. Eugene R. Clumpner was read. The following were elected to membership in the society: James L. Vadheim on a transfer from the King County Medical Society, Frank J. Rigos and Robert J. Bucklin.

Dr. Hermann called attention to the possible use of nurses in operations to be paid for by the State Department of Labor.

A letter from Alma Whitacre was read, thanking Dr. Hermann for his recent letter after the death of Dr. Horace Whitacre.

A communication from the Woman's Field Army on Cancer was read, in regard to a public meeting to be held April 14, 1944. Dr. Herrmann stated that he was to attend and speak at this meeting.

The following officers were elected for the ensuing year:

President Elect.....	W. H. Ludwig
Vice President.....	R. D. Wright
Secretary-Treasurer.....	W. B. Penney
Trustees: C. F. Engels, L. A. Hopkins, Clyde Magill.	
Delegates: C. R. McCreery, E. W. Janes, C. F. Engels, R. D. Wright.	
Alternates: S. M. MacLean, Clyde Magill, C. V. Lundvick, T. K. Bowles.	

*Continued on Page 11*

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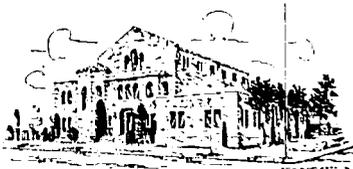
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## Minutes of Regular Meeting

*Continued from Page 9*

Business Bureau Trustees: Clyde Magill, L. A. Hopkins, S. M. MacLean, C. B. Ritchie.

T. B. Murphy stated that plans were being made for the annual dinner.

\* \* \*

### Report of Dr. N. E. Magnussen

The health officer is the detective or the "Hawkshaw" of the medical profession. Much of his work involves epidemiology, sources of disease, and contact study. In order that a detective may work, he must have certain clues which eventually lead to the culprit. These clues come from the local practicing physicians in the forms of "reports of communicable disease"; in this study, it is venereal disease reports; however, due to the lack of reports, the health officer many times assumes the role of a "Mr. Watson," the result being inefficiency in the prevention of the spread of venereal disease.

This study covers an "epidemic of syphilis" occurring in Pierce County between July 5, 1943 and January 4, 1944. During that time actually ten cases of syphilis developed from a single source. Unfortunately the Health Department received its first clue on case No. 9 on January 4, 1944. With that information, the Health Department's investigating staff, constituting that of Health Officer and Public Health nurses, went into action and in less than thirty-six hours, we had a summary of information covering practically all the cases found. However, the actual apprehension of all sources took several weeks.

If the first case (No. 1), a man diagnosed by a physician in Pierce County on about July 18, 1943, had been reported as required by the State Board of Health, we would have been able to have prevented about five cases of primary syphilis. The reporting, however, did not occur; therefore, the venereal disease spread rapidly.

Again on about September 5, 1943, case No. 3 was known to the same physician and no reporting. If this case had been reported, we could have prevented probably four cases of primary syphilis. Again, if case No. 7, diagnosed by another Pierce County physician as a

secondary syphilis on December 12, 1943, had been reported, we could have probably prevented two other cases.

*Summary:* (1) A description of the health officer as an epidemiologist was made through a study and a chart explaining and demonstrating the infectious nature of an epidemic of syphilis in Pierce County. (2) The importance of reporting all venereal disease cases was demonstrated. (3) The responsibility of the private physician to furnish venereal disease clues to the health officer was shown.

### Personals

Dr. Percy Guy has left the State Department of Health to become Assistant King County Health Officer.

The four little Halvorsen girls have a new baby brother, John Clifford, born April 8. Major Halvorsen is now overseas.

Dr. Ludwig is back on the job after a session with an injured knee.

The Lawrence McNerthneys are back after a visit in New York and Boston. The high point of the trip is said to have been the St. Patrick's Day parade in New York.

Dr. George Kunz has been vacationing in California. Now that he has returned, Dr. G. G. R. Kunz is off on a trip to New York and the A. M. A. in Chicago.

Dr. Vadheim is out of Tacoma General after an emergency appendix operation. Back at work next week.

Chris Quevli has been spending a few weeks at Carl Staatz's ranch in southern Oregon. Carl raises turkeys, sheep, cattle and a little hell. Chris is back and says he enjoyed it all. Must be some ranch.

We note that Smith Troy, our Attorney-General, is going to run for re-election this year. It might be well for us to remember that Smith has been a good friend of the profession in the past and should receive our support. He's in the Army at present, on leave of absence.

The patient is the doctor's best textbook. — Baglivi.

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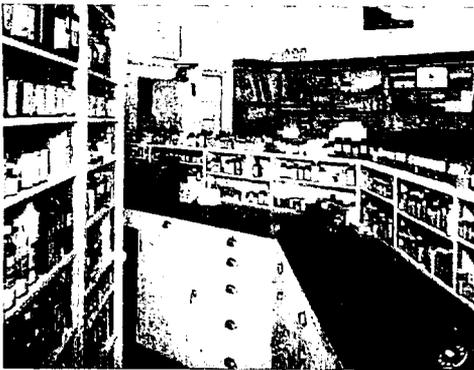
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## Musical Notes

During April, the Bulletin reporter covered the musicale at the Temple theater, billed as a concert by two pianists, both with good English names, but rather Balkan in appearance. The maestro was one of those stocky near-blondes, found so often in Tito Josip's army. The maestriss was in the light-heavy division, with shiny black hair, a rose-red gown of the bouffant variety and looked as if she might have had a touch of gypsy in her ancestry.

The bout was billed for thirteen rounds, which was probably figured to be the endurance record for both pianos and performers. Among the audience were noted the elite of the medical profession. The McCreery boys were out in full force, as were the Terrys, the Allison and many others. The late Dr. Monaghan was so late he never got there at all, but his beautiful Rose graced the occasion, so he wasn't missed.

The opening round was a Fugue in G minor by Bach-Mednikoff. As our reporter wouldn't know a fugue from a doughnut, he waited expectantly. The two performers each selected a piano, settled themselves and Wham—the battle started. Maestro threw a couple of left hooks that must have hurt, for the pianos both let out some terrific bellows. Then the maestriss let her piano have it, right in the midriff, bringing shrieks and groans in response. The battle then became general, with both pianists firing at will, the pianos showing the punishment they were taking by the screams and howls they emitted. It was terrible to the reporter's tender heart but the pianists, inured to suffering, swayed and almost swooned in sadistic bliss as the pianos screeched and pleaded, roared and whined. No quarter was given and the round ended only when the pianos were hammered and beaten into silence.

It must have been a glorious victory, for the audience applauded loudly, in appreciation. To our reporter, it was like the death of the bull in the arena, so he silently slipped away, his sympathy being with the bull and the pianos.

## Physical Medicine Boosted

*Continued from Page 3*

proving its value. The last war is said to have put orthopedic surgery on its feet. This war may well do the same for physical medicine. Physical agents produce striking biologic responses, including effects on psychic reactions more potent than the actions of many of the drugs gathered through the centuries by trial and error. It seems well to fan over the grist of the past and to select carefully those subjects on which the medical student can best spend the limited period of his training. It seems apparent that more attention should be paid to the broad field of physical medicine, which ramifies into so many branches of medical treatment. It is believed that these newer developments in physical medicine should be organized by the physician and not for him. The manner in which we use the hospitals and medical schools of today will largely determine the medical future of our people and it seems evident that a tremendously significant contribution can be made by providing a completely adequate teaching and research program in physical medicine on a nation-wide scale.

"The field of medical practice includes the employment of light, heat, cold, water, electricity, massage, manipulation, exercise and mechanical devices for physical and occupational therapy, in the diagnosis and treatment of disease. Physical medicine includes the employment of physical procedures not only for diagnosis but also for prevention of disease, especially of joints and muscles, as well as for occupational, recreational and physical therapy. The study of spa therapy, of climatology and of hydrology looms large. The employment of physical agents in the field of industrial medicine, geriatrics, in the treatment of arthritis, diseases of the blood vessels, of the nervous system is becoming increasingly important."

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"What bust?" asked the clerk.

"Nothin'. It just wore out."

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## WITH THE ARMED FORCES

Well, this month we have news of a number of our men who have been unheard from for some time.

Larry Joers has been promoted to Commander but is still serving on a cruiser. However, the Navy does not waste Commanders on cruisers, so Larry can look forward to battleship duty or to some hospital service. Congratulations, Larry.

Al Ehrlich, Captain now, has ended his assignment out on the Aleutians and is now at Kodiak, considerably nearer home. He writes, "Well, here it comes, no doubt a big surprise to you to hear from me. I am now in Kodiak and what a change. I actually sleep between sheets and have a flush toilet which sounds like the Moonlight Sonata to me. This will be a good training ground, so I'll know how to act when I get back to the U. S. sometime this summer. Will make a short stop in Tacoma and then on to California to see my family. Sorry to hear of so many doctors passing on. I only hope I can be as much of a credit to the profession as they were. Have always enjoyed getting the Bulletin or any other news. No doubt everyone is busy and I am looking forward to the day when I can be back in my office again. Best regards to all my friends and let me hear from you again." Well, that's fine, Al, and we will look forward to seeing you again, too. Thanks for the letter.

Hillis Griffin, also a captain, sends us a V-mail letter from northern Ireland. He writes, "Received the Bulletin regularly; it seems to follow me around and search me out. I appreciate it very much. I must correct the impression conveyed in my address. I am not in a WAC hospital (supply your own pun) but an Evacuation Hospital. We are enjoying our sojourn in northern Ireland, visit in Belfast frequently. Have had opportunity to visit many historic and scenic spots in this part of the country. This week I have been attending a Leave Course in general medicine which I have enjoyed very much. I'm sure we will be glad to take over when we return, so try to hold out a while

longer." Don't you worry, lad, there will be plenty to do for all of you, after you return. In the meanwhile, it looks to us as if your travel schedule might include Berlin soon. Good luck and give our regards to Hitler if you catch up with him.

And here's one from good old workhorse, Maj. Bill Goering, finally transferred from Barnes Hospital to California, after three years of work. Bill writes, in part, "I like my set-up here, chief of Orthopedic Service, a different type of work, practically all acute, lots of fractures and other injuries sustained by the boys in this large infantry training center. The California weather is delightful thus far, but they say it gets to be 130 in July. This place is about 15 miles north of Paso Robles. The family is still in Vancouver, awaiting the finding of suitable quarters which is a difficult problem, being such a large camp and the only town in the vicinity is Paso Robles, normally 2000 and every soldier's wife tries to crowd into it. They live in converted chicken-coops and gas stations—what a life." Bill is at the Station Hospital, Camp Roberts, California. Glad you're enjoying the Bulletin, Bill. Your cue is still in the rack in the billiard room, awaiting your return and the gang all send regards. Thanks for the letter. Come again.

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## With the Armed Forces

Under date of Easter Sunday, Miles Parrott writes, "Have now been in Italy several weeks and have enjoyed it very much. Our last leg of the trip was on a British ship, which was a new experience to me. There were British Army and Navy personnel aboard and we got to visit with both branches . . . I worked in the ship's hospital while aboard, which was novel. They have slightly different nomenclature for the drugs; for instance, soda bic for soda bicarb. However, the labels are much the same. I had difficulty understanding them at first and was a bit shocked when I realized they did not understand me either. We made the comment that it sounded as if they were ribbing each other all the time. My impression, however, was that they gave us the best food and accommodations they had and were really a fine group of men. I must confess that I worried about submarines some while aboard ship, in spite of the low rate of sinkings lately.

"Mt. Vesuvius was pouring out immense clouds of black smoke and ashes as we came in by the famed Isle of Capri to land at Naples. The old mountain had quieted down with only a benign cloud of steam at the summit, the last time I saw it. The eruption caused quite a change in the contour, I'm told.

"We visited Pompeii one Sunday, a most interesting old city. It was a walled city and covered by a violent eruption of ashes about 60 A. D. The city was found again, about 200 years ago, when an aqueduct was being dug to supply a near-by town. The guide explained that it was a city of middle-class people. The buildings were not made of marble and tile but of brick, covered with plaster. The old lead-pipe remains in places. The forum is well preserved. This site, where religious sacrifices were held, with the priest's altar and the place where the animals were killed, remains intact. The theater, which held 85 per cent of the people, is in such good condition that a drama was presented there some years ago. They had steam baths with separate baths for men and for women and children. I remember that the domed ceiling had stars in it yet. It was determined which was which by the height of the

door-ways and by the fittings found, also by the writing of the children on the walls. Inscriptions in perfectly good Latin, on one wall were boosting favorite candidates for mayor of the city. It was surprising and hard to believe at first, that painting or writing could last so long but after all, it was sealed for nearly 2000 years. The homes were furnished rather plainly but the walls had many nice paintings on them. The paintings were well enough preserved in some homes to show that they probably took more pride in their paintings than in their furniture.

"I remember one set of paintings, almost in miniature, depicting the arts and sciences. These showed scenes of making wine, agriculture, pharmacy, tanning leather, weaving, olive oil making, metal work, etc. Some the large stone presses for making olive oil were still in good condition, one round stone, two and a half feet in diameter, fitting exactly into a hollowed out stone of the same dimensions inside. Wooden handles were attached for turning the upper one, thus pressing out the oil.

*Continued on Page 19*

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## With the Armed Forces

*Continued from Page 17*

To most of the G-I's present, the house of ill-fame was the high point of the trip. There could be no doubt what it was used for. There were 19 pornographic paintings, very distinct, showing various situations, something along the line of Boccaccio's Decameron. There were seven little cubicles, each with its stone bed. I had heard before that some people had been Phallic worshipers and these must have been the folks they had in mind.

"We saw Naples, with a guide, on another trip. The cathedral of St. January, the patron saint of Naples, was most interesting. The ceiling was fully 75 feet high and paintings showed various phases of the saint's life. I visited the orthopedic section of one of the general hospitals yesterday. They use blood and plasma freely. Plaster casts incorporating Orr's method, was the favorite procedure in compound fractures. This was modified slightly in that the casts were often changed daily, to promote better drainage. The newer mechanized devices were not used. Penicillin had proved efficacious. In large burned areas of the body, plasma or blood, depending on the laboratory findings, is used. Vaseline is used for dressings, instead of eschar-producing substances."

Well, this lad is certainly keeping his eyes and ears open.

Barney Sigafoos, who has been in Chungking, China, with Stilwell's troops for a long time, has been back at Carlisle Barracks for a course of instruction. Barney is one of our first medical Lt. Colonels.

Walter Cameron is somewhere in the Mediterranean area, having flown with his group, all the way. Now at some bomber headquarters, we don't know just where.

Bob Brooke, now a captain, is being put through the training at Camp Maxey, Texas. He writes the days are hot and the nights cold. They go out on bivouac, sleeping on the ground, in the brush, with an occasional rattlesnake to keep them company. Presumably, if they can stand that, they can stand anything.

Frank Maddison was in Tacoma for a few days, early in April, looking well and handsome. Army life certainly has agreed with Frank. Still stationed at Modesto, California, where they grow such luscious figs.

We received an Easter card from Cliff Whitaker, who is apparently still managing a large hospital in New Caledonia. From all we read about that place, it must be a pretty soft spot, even if it is far away. Thanks for the card, Cliff.

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	1944	1943
Chickenpox .....	121	60
Diphtheria .....	4	1
German Measles .....	9	30
Gonorrhea .....	21	10
Measles .....	32	89
Meningitis, spinal .....	2	0
Mumps .....	19	88
Scarlet Fever .....	305	8
Syphilis .....	21	17
Tuberculosis .....	8	2
Typhoid .....	1	1
Undulant Fever .....	9	0
Whooping Cough .....	6	1

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Pfc: Where'd you get the black eye?  
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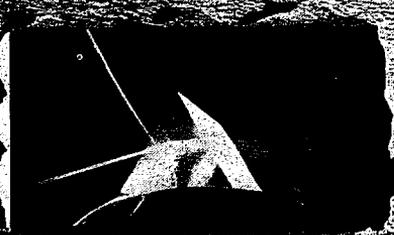
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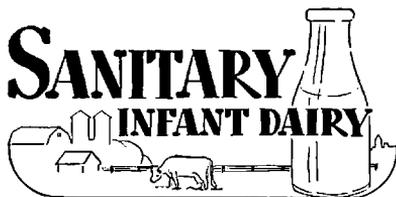


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# NUTRITIONAL ANEMIA IN INFANTS

## REASONS FOR EARLY FEEDING OF PABLUM (OR PABENA)

1. The infant's initial store of iron is rapidly depleted during the first months of life. (Mackay,<sup>1</sup> Elvehjem<sup>2</sup>). About 30% of the iron freed from the hemoglobin during the first two months is lost, and while hemoglobin destruction takes place, all infants are in negative iron balance. (Jeans,<sup>3</sup> and Usher, et al.<sup>4</sup>).
2. During the early months of life the infant obtains very little iron from milk — 1.44 mg. per day from the average bottle formula of 20 ounces or possibly 1.7 mg. per day from 28 ounces of breast milk. (Holt,<sup>5</sup> Jeans<sup>3</sup>). The incidence of nutritional anemia has been found to be high among infants confined largely to a diet of cow's milk. (Davidson, et al.,<sup>6</sup> Usher, et al.,<sup>4</sup> Mackay<sup>1</sup>).

For these reasons and also because of the low hemoglobin values so frequent among pregnant and nursing mothers (Strauss,<sup>7</sup> and Gottlieb and Streat<sup>8</sup>), the pediatric trend is constantly toward the addition of iron-containing foods at an early age, both to normal infants and those with pylorospasm. (Neff,<sup>9</sup> Blatt,<sup>10</sup> Brennemann,<sup>11</sup> Monypenny<sup>12</sup>).

## THE CHOICE OF THE IRON-CONTAINING FOOD

1. Many foods high in iron actually add very little to the diet because much of the mineral 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<sup>13</sup>).
2. To be effective, food iron should be soluble. Some foods fairly high in total iron are low in soluble iron. Thus egg yolk and liver have less soluble iron than does farina, which is very low in total iron. (Summerfeldt<sup>14</sup>). Oxalate-containing leafy vegetables are low in soluble iron and appear not to be well utilized as a source of iron by infants. (Kohler, et al.,<sup>15</sup> and Stearns<sup>16</sup>).
3. Pablum (and Pabena) are 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 at an early age, without digestive upsets. (Blatt,<sup>10</sup> Monypenny<sup>12</sup>). Clinical studies of sick and well babies have shown Pablum to be of value in raising hemoglobin values (Crimm, et al.,<sup>17</sup> Summerfeldt and Ross<sup>18</sup>), even when egg yolk and spinach were not effective (Stearns<sup>16</sup>).

Pablum, a palatable mixed-cereal food, vitamin and mineral enriched, and cooked thoroughly and dried, consists of wheatmeal (farina), oatmeal, wheat embryo, cornmeal, powdered beef bone, sodium chloride, alfalfa leaf, brewers' yeast, and reduced iron. (The oatmeal form of Pablum is called Pabena.)

<sup>1-18</sup>Bibliography on request.

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*Publication - Pierce County Medical Society*



**SEPTEMBER - 1944**

*Programs*

**SEPTEMBER 12**

Medical Arts Auditorium — 8:15 P. M.

Following picture presented by Singer Sewing Machine Company  
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# Pierce County Medical Society

1944-1945

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## The Editor Steps Aside

Beginning with this issue, the former editor of this publication is passing on his job to other and possibly better hands. The new editor has a facile pen, has already produced many noteworthy pieces of prose and poetry, and doubtless from now on the tone of this publication will be more erudite and scholarly and less ribald than it has been in the past; and so we present to you (in the best radio style) our new editor, and here he is, DR. LEWIS HOPKINS!

## Mind Your Own Business

This advice should not be taken to mean that the proper procedure for the medical profession is to concern itself solely with the scientific status of practice or to increase dread of governmental interference with private practice. It does mean that doctors should give more time to acquire an intelligent understanding of those measures, national, state or local that directly affect their present and future practice.

Cooperation with those active agencies which have our interests at heart is our first responsibility in our own business. Our own AMA through its years of experience should be in a strategic position to work for or against measures which nationally affect our practice and is entitled to our support. Our own State Medical Society has its very important problems which come closer home and concerning which we should rightly feel are more our own business, chiefly because we are better acquainted with the problems and have more definite ideas concerning them. We should certainly mind our business in our county society activities. With our meetings limited in number they should always be well attended.

The doctor who does not attend the county society meetings and is not available for some measure of county medical activity can only

be considered a non-producer and a member of that all too large army who get without giving in return.

When you hear a radio program of whatever sort you may always be certain someone is trying to sell you a product or an idea in which they are interested.

Medicine has few radio broadcasts. So our job today, more than ever before, is to mind our business so we will have with some understanding of our problems, definite ideas, and then, as AMA President Kretschmer said at Chicago, sell those ideas to our patients. It will require some effort on our part but will be well worth doing.

### Another Vitamin Cure-All

Recently there dropped into our office a very well dressed and slick young man, who desired to acquaint us with the "Stuart Formula," and was very much surprised, apparently, when we confessed that we were unfamiliar with this particular preparation. It turns out to be a shotgun vitamin preparation, the list of ingredients showing ten different vitamins, with calcium, iron, manganese and iodine.

We are certainly at a loss to classify this product as anything but the wildest kind of a shotgun preparation and just another bid for the doctors to help put on the market another tablet and assist the company manufacturing them in participating in the \$200,000,000 vitamin business now being fought for so valiantly over the radio.

We are still puzzled as to what kind of a patient would need these tablets.

### AMA Now Has Washington, D. C., Office

There is now an AMA Office of Information in the Columbia Medical Building, 1835 I Street N. W., Washington, D. C. The function of this office is to make available nationwide information gathered by the AMA Council on Medical Service and Public Relations and doctors should feel free to make use of this source of information.

### Civilian Mortality Record Near Low

Although our country is well into its third year of war, the mortality prevailing in the civilian population is extraordinarily favorable. This is indicated with unmistakable clarity by the current experience of the many millions of Industrial policyholders of the Metropolitan Life Insurance Company, who constitute a large cross-section of the American people. In the past three months, April to June, the death rate among the insured, excluding the deaths of enemy action, was the lowest for the like period of any year, except the record health years 1941 and 1942. The death rate thus exclusive of enemy action for the three-month period was 760 per 100,000 policyholders, or  $3\frac{1}{2}\%$  below the corresponding rate of last year, 788 per 100,000.

This remarkably good record is the result of marked improvement in civilian mortality as the year has advanced; for in January, when the recent epidemic of respiratory diseases was at its peak, the civilian death rate was the highest since 1937. The prompt return of the mortality rate to low levels with the subsidence of the epidemic is good evidence that the war has not seriously disrupted the health services on the home front. It shows that despite shortages in trained personnel, the public health services such as the protection of the food and water supply, the maintenance of sanitary conditions, the control of infectious diseases, and, more particularly, the care of the sick, are still operating efficiently. Our particularly fortunate geographical position has saved the civilian population from the air raids and robot bombings which have taken so many lives in England and elsewhere.—*Statistical Bulletin*, Metropolitan Life Insurance Company, July, 1944.

### AMA Officers for the Year 1944-45

President.....Herman L. Kretschmer, Chicago  
President-Elect.....Roger I. Lee, Boston

1945 meeting will be held in New York City.  
1946 meeting will be held in San Francisco.

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# The LIBRARY

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## Thiourea and Thiouracil

A development of the past year is the treatment of hyperthyroidism with thiourea and thiouracil. The favorable results reported by several writers have given rise to the hope that a successful medical treatment for this condition may have been found. Sufficient time has not elapsed to allow a proper evaluation and we shall have to wait and see how this new form of therapy bears the test of time. In the meantime it is well to be informed as to its present status, and to this end the library offers the following references to those interested:

"Treatment of hyperthyroidism with thiourea and thiouracil," E. B. Astwood; *Journal of the American Medical Association*, 122:78-81, May 8, 1943.

"Thiouracil in the treatment of thyrotoxicosis," R. H. Williams; *New England Journal of Medicine*, 229:97-108, July 15, 1943.

"Thyrotoxicosis treated with thiourea," H. P. Himsworth; *Lancet*, 2:465-466, October 16, 1943.

"Hyperthyroidism and thiouracil," Virginia Palmer; *Bulletin of the School of Medicine*, University of Maryland, 28:125-152, January, 1944.

"Thiouracil," Elmer C. Bartels; *Journal of the American Medical Association*, 125:24-26, May 6, 1944.

"Thiouracil in the treatment of thyrotoxicosis," R. H. Williams and H. M. Clute; *New England Journal of Medicine*, 230:657-667, June 1, 1944.

☆ ☆ ☆

A particularly interesting and valuable issue of *The Washington Bulletin*, published by the Division of Public Institutions, State of Washington, has recently been received by the library.

Dr. W. N. Keller is one of the associate editors and among the contributors are several members of the staff at Western State. Dr. Keller writes on "Gerontology and Geriatrics"

and states that the male unit of the new Geriatric Building at the hospital will be ready for occupancy very soon and will accommodate 300 patients. A second article by Dr. Keller is "Present social trend in mental hospital care." Other contributors from Western State are Drs. W. B. Dublin and R. W. Brown, who discuss "Cerebral Anoxia."

The medical care, occupational therapy, comfortable housing and beautiful surroundings offered to patients at the modern mental hospital, of which Western State is an outstanding example, make one realize how very far we have come from the days, less than a century ago, when an individual of unsound mind was believed to be possessed of evil spirits, was neglected and starved and often publicly exhibited as a curiosity.

☆ ☆ ☆

From time to time the librarian likes to thank those generous individuals who contribute their periodicals to the library. With so many members in the armed forces, the library budget has of necessity been reduced wherever possible, and it has been necessary to discontinue some of our subscriptions, though all the more important ones have been continued. Contributions of magazines are therefore doubly welcome.

## FOR SALE

American College of Surgeons cap and gown. Perfect condition. Worn twice. Inquire at Medical Library.

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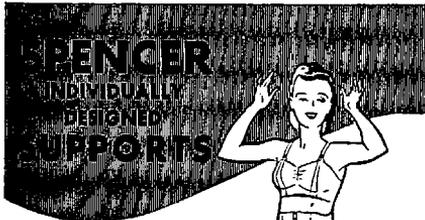
**COMMITTEE CHAIRMEN**

Social.....Mrs. Carl S. Staatz  
 Membership.....Mrs. John B. Robertson  
 Additional Committee Chairmen will be announced later.

The Board is to meet on September 14 at 1 o'clock in the Medical Library in the Medical Arts Building.

The first Medical Auxiliary meeting of the season will be on October 12 and will be a tea at the home of Mrs. Cyril V. Lundvick, 731 North Stadium Way, at 1:30 p. m. A musical program will be presented.

All members, new and old, are urged to come.



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Most every doctor's wife I know  
 Is sort of battle-scarred. Once red  
 And well-kept nails, now broken, show  
 The signs of pots and pans. Her head  
 Once brushed and curled with loving care  
 Is straight or fuzzy. Does she wail?  
 Oh, no! For all the women wear  
 A glamor cap—a Red Cross veil!  
 Her husband's never home to see  
 The house by daylight. Like as not  
 It seems just like it used to be.  
 Some spade a Victory garden plot  
 And some may fall in bed without  
 A thought of what the house may lack.  
 No husband cares to hear about  
 Your creaking joints or aching back!  
 So chins up, ladies! Don't bog down  
 From cash and carry and no car.  
 Since younger wives have all left town  
 We gotta work! And win a war!

—Journal of A. M. A.

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# ERGOAPIOL

..THE PREFERRED UTERINE TONIC..

## A Tribute to the Memory of the Late Dr. John Arnason Johnson

Mary Warner Hall, who writes that she has known Dr. Johnson's professional care since childhood and feels that he had a large share in the development of her character, contributes this poem in memory of a physician whose patients depended upon him not only to cure their physical ills but also sought and received wise advice and friendly counsel in many of their daily problems:

### PORTRAIT OF A DOCTOR

His hair is white, his shoulders broad;  
He has a kindly face.

Everyone who comes to him  
Is more than just a "case."

Of course he is acquainted  
With symptoms and disease,  
But his secret is in making  
His patient feel at ease.

I think his conversation  
Has quite as much to do  
With his kindly art of healing  
As the treatments that ensue!

He uses all the methods  
That modern doctors do,  
And his technical equipment  
Is beneficial, too.

But he does his greatest healing  
In his individual style,  
With a kindly sense of humor  
And an understanding smile.

---

### Salt Is Navy Medicine for Combat Burns

SAN DIEGO—Physicians at this hospital are successfully treating burns with a material of which the Navy will never have a shortage—salt water.

The salt water used is a double-strength solution of sodium chloride made up in the laboratory, but the doctors say that in an emergency on shipboard, buckets full of the old

briny could be utilized, after heating to remove bacteria.

### USED EXCLUSIVELY

Here, at the navy's 11,000 bed hospital—one of the largest hospitals in the world—salt water is used exclusively for the surface treatment of burns. It is chosen over such things as Tannic Acid which was used extensively at Pearl Harbor, and Petrolatum. The latter was acclaimed by some investigators after Boston's Coconut Grove disaster.

Captain William Kirkham, chief of San Diego's plastic surgery service, says the tip-off on the effectiveness of salt water for combat burns came during the evacuation of the British from Dunkerque.

He said burned men rescued from the water after some time fared better than did men whose burns had not been bathed in salt water. "The explanation is simple. A burn is just like any other wound. It has to be kept clean, and salt water keeps it clean."

The special solutions of salt water are applied in two ways: by saturating light-weight dressings, or by having the burned men bathed in a tub filled with the water. The burns are first cleaned with white soap and plain water.

### HAS MANY ADVANTAGES

The salt solution is called a "hypertonic" solution. That is, it exerts osmotic pressure greater than that of the blood serum.

Plasma must be administered by transfusion in cases of serious burns to restore the serum that may have been lost before the patient was treated.

"Salt water holds the blood serum intact, but it allows the free flow of harmful secretions from the wound itself," Captain Kirkham said.

"Another point is that it is difficult to apply skin grafts to surfaces that have been treated with greasy applications.

"Still another advantage is this: when men bathe in the salt water, they can move their joints to a certain extent, thus keeping to a minimum the stiffening of these joints."

Kirkham said the salt-water cure was the only surface treatment given to 59 Marines who suffered frightful burns in a forest fire.

—Victor News.

## Looking Back . . . with Satisfaction

All too often one looks back many years to one particularly dark day. This memory can be made lovelier, more tender, through the knowledge that the final tribute was as beautiful as it could be made.



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## Personals

Apparently Charlie Larson, Jim Fairbourn and Gerhart Drucker have been moved from England into France. Charlie has been impressed by the strength and savagery of the French mosquitoes. He says they bring their own salt and pepper and turn over your dog tag to see what your blood type is, preferring some to others. Gerhart wrote from England in July that he was finding things very dull on account of lack of work and that to fill in the time he had read nearly all of Shakespeare's plays. He mentioned that the casualties during the invasion were much smaller than anticipated. Well, these lads will be very busy from now on for a while. Lord knows they have been idle long enough.

☆ ☆ ☆

Les Baskin has been enjoying the Southern California sunshine at Santa Monica. His wife and children have been with him these last few weeks. The probabilities are that he will be shipped somewhere in the Pacific area.

☆ ☆ ☆

Commander Lawrence Joers paid us a visit some time ago. He is now attached to the United States Naval Hospital at Bremerton.

☆ ☆ ☆

Latest word from Walter Cameron is that he is still in Italy. He writes that all the boys from the Northwest agree that one c. c. of Washington is worth all of that country.

☆ ☆ ☆

Marshall Whitacre at last accounts was waiting in California for assignment to active duty, which probably will take him into the Pacific area.

☆ ☆ ☆

Dr. Edward Wolf has just moved into the Medical Arts Building.

☆ ☆ ☆

Dr. William Rademaker has established offices at Eleventh and K Streets.

☆ ☆ ☆

Wilmot Read tells us that all the stock for the new insurance company, which is to take over the business of the Medical Bureau, has

been subscribed, and apparently all is going well with the organization.

☆ ☆ ☆

George Moosey is back in town with an honorable discharge and is again working at his old job at the Western Clinic.

☆ ☆ ☆

Latest among local men to go into the service is Fay Nace, with the rank of Lieutenant s. g., U. S. N., who is stationed at the Puget Sound Navy Yard Dispensary, Bremerton.

☆ ☆ ☆

Bill Norton sends a cute postcard showing a smiling individual, presumably himself, peeking out of a door bearing the words CAPTAIN R. A. Norton. Congratulations, Bill.

☆ ☆ ☆

Congratulations also to Al Sames, now a major.

☆ ☆ ☆

A letter from Fordyce Johnson tells of a trip to New York to attend the National Otolaryngological meeting and to Chicago for the A. M. A. meeting.

☆ ☆ ☆

John Verhalen has finally been forced by his sinus trouble to leave this country for a sunnier clime. Through the Bulletin he wishes to thank all of his medical friends for their many kindnesses to him in the past. His present address is Room 306 Security Building, 234 East Colorado, Pasadena 1, California. Best wishes and luck to you, Johnny Verhalen.

☆ ☆ ☆

Hillis Griffin writes from France that he has already been moved four times since reaching the Continent and often works sixteen hours a day, seeing from 80 to 140 patients in that time. In spite of long hours and hard work, he says he is enjoying the experience, particularly as there is nothing in the region to occupy spare time. Dr. Griffin speaks of the arrogance of the German officers, who still think they are going to win the war, and says that the Americans are hoping that Russia will reach Berlin before the Allies, as they feel that our side will be too easy on the Germans.

## *A Message to the Medical Profession*

For thirty-five years we have consistently co-operated with the medical profession of this locality. Advertising during this period of years has always been fully as beneficial to the medical profession as it has been to ourselves.

The prescription business has never been a side line in our store. At the present time we are carrying one of the largest stocks of biologicals and prescription supplies in the Puget Sound area.

Our store is centrally located and easy to

find, and we have five competent registered men in charge. Some of these men are graduates of colleges of pharmacy.

In addition to our prescription department, we have a few other lines which do not conflict in any degree with the medical profession, such as toiletries, sundries, fountain pens and tobacco.

It will always be our policy to continue putting our best efforts into our prescription department.

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# JUVENILE DELINQUENCY

(As One Who Must Deal With It Sees It)

By Judge H. P. Beckenbach,

Judge of the Juvenile Court of Mahoning County, Ohio

Juvenile Delinquency is one of the serious, if not the most serious, of the problems now confronting this nation.

It has always been with us to a great or less extent. But during the last few years it has assumed alarming proportions. It is serious because it strikes at the very foundation of organized government. It threatens our national existence.

Enduring structures require a solid foundation. Social Service Workers and Legislatures have recognized the importance of this problem as is evidenced by the fact that the more progressive States have provided separate and distinct tribunals to deal with the question. This problem is important because the boys and girls of today are our citizens of tomorrow. Their worth depends upon the training which they receive as juveniles.

Many reasons have been advanced by serious-minded persons to explain the alarming increase in Juvenile Delinquency. Some attribute the present unhappy situation to divorces. These have broken up numerous homes, to the detriment of the child or children involved. Others say that a prolific source of Juvenile Delinquency is the employment of mothers and fathers in war industry and, therefore, to the lack of proper home environment. Still others place the blame on the slackening of parental authority and the let-down of discipline in our school system, coupled with the lack of sympathetic interest in our youth's problems by our citizens in general.

As Judge of the Juvenile Court of Mahoning County, I think I am in a position, impartially, to survey the entire situation and to analyze the causes which under-lie the seething mass of discontent and confusion in the Juvenile life of this community.

Because of my official duties, I have arrived at the conviction that we must look for the

solution of this problem in the fields of medicines, psychiatry, and psychology. I say this because I think that many of our delinquent children are delinquent because they are mentally ill.

If so, then our present approach in search of a solution through the Legislature, the Courts, and the Correctional Institutions does not and never will solve the problem. We are cutting off the branches of a parasitical plant without attempting to destroy the roots. If this is true, then the Physician and Psychiatrist must step into the picture with their specialized training and wise experience.

We have financially supported such humane endeavors as giving aid to crippled children through medical, surgical treatment, and adequate hospitalization. Much of this work has been carried on at the expense of the Federal Government and the various local political subdivisions.

The medical profession deserves credit for that part which it has had in the rehabilitation of crippled and handicapped children. We are all aware of what has been accomplished throughout the nation to help and aid the unfortunate victims of Infantile Paralysis. Then again we see the fine results achieved by the fight against Tuberculosis. State Institutions in a measure have been provided to care for children who are blind and deaf. A great deal has been accomplished by our Government in co-operation with the medical profession to assist those who are physically handicapped and this fine work should be applauded by all right-thinking people. However, the efforts put forth so far in this humane work have been directed to ease the lot of those who are physically handicapped.

But have we, as a people, given the same serious study or have we been as liberal in our

*Continued on Page 15*

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## Juvenile Delinquency

*Continued from Page 13*

financial support of those who are mentally handicapped? It is a serious and disheartening thing for a child to be physically handicapped or crippled, but it is equally tragic for a child to be mentally handicapped. These facts are brought home to us with striking emphasis when we learn of how many of our young men have been deferred from military service because of lack of sufficient mental qualifications or because of past police records. And also for the reason that they possess vicious and undesirable mental characteristics. This class is made up largely of petty racketeers who frequent night clubs, morons who roam the streets of our cities and those who are stooges of black market racketeers, because they lack that moral fiber that is a part of every right-thinking ambitious juvenile.

Let us be realistic about these facts. They are not disputed. They are facts corroborated by public records. They are damning evidence of a problem that is crying for a solution. If a great many of our juveniles are delinquent because they are mentally sick, what is the solution? Our Doctors and Psychiatrists have the answer to this question. Many of our mental defectives can be reclaimed through proper supervision and intelligent discipline. There is a solution to every problem; otherwise it would not be a reasonable problem.

There are those in the medical profession and those versed in the study of the human mind who may say that the duty of taking care of the mentally sick rests with the Government. This in a measure may be true. But who is the Government except the people?

It is self-evident that the problem of Juvenile Delinquency has not been solved. It has increased at an alarming rate because we have not approached a solution of it with a sympathetic desire to secure a proper understanding. We have not given sufficient time to serious study of this question, or attempted to provide for the adequate care and supervision of those mentally sick. State Hospitals for the care of

those suffering with mental trouble are overcrowded by 20 percent.

If a predominating reason for Juvenile Delinquency is due to mental illness, then the solution to this problem does not lie in the creation of additional courts, or the establishment of more bureaus, or the building of additional correctional and penal institutions.

The problem of Juvenile Delinquency is of such vital importance that it requires our best thought. It is a cancer striking at the very vitals of organized society. It demands heroic efforts to eradicate its malignant growth. It must be eradicated or the entire plant is going

*Continued on Page 17*

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## Juvenile Delinquency

*Continued from Page 15*

to die. In other words, unless society does solve this problem, then society like a vine severed at its roots is simply going to wither and decay.

Those who are brought into daily contact with the problem of Juvenile Delinquency are well aware of the factors that have produced the results that we now face. It is an easy matter for them to determine what delinquency has been committed. But it is a more difficult problem to discover the cause and prevent repetition of such behavior.

It might be agreed that the Juvenile who commits a delinquent act, is of inherently evil disposition and should be severely punished. Parents seek to excuse the delinquent act of their children with the argument that the child is easily influenced, or has never acted right since he suffered some accident. Then again the excuse is that because the father and mother work in order to keep the home together the children are denied the proper supervision.

These are merely objective symptoms of a more serious hidden malady. The apparent overt acts of children may be merely the physical expression of inner conflicts. A study of these factors compels one to the belief that the victim should receive intensive treatment through skilled clinical and case-work services.

Our medical men have rendered valuable service in the treatment of crippled children and have worked miracles in the rehabilitation of these unfortunates. These children had been handicapped by physical deformities. But we have here another group that are handicapped by mental illness. Because of this mental condition they become social misfits. They are the discipline problems in our schools, on our streets and in our homes. They are compelled to live in a society that is too complex for them to understand. The society in which they are compelled to live owes to them the duty and responsibility of solving their very real problem.

### WE REPEAT:

Our Doctors and Psychiatrists have done a noble work in the rehabilitation of crippled

children. The call for their services to care for the mentally sick is as strong and compelling. They can render a great human service by taking as much interest in the mentally sick as they have in the crippled handicapped child. By responding to this appeal, the Doctor and Psychiatrist will be helping to build a better and greater nation and will be doing a service to mankind in general. Their reward will be a better, nobler, and finer citizenship in this nation.—*Bulletin of the Mahoning County Medical Society.*

### Shakespeare's Car

To climb steep hills requires a slow pace first.—Henry VIII, i. 1.

Horns do make me mad.—The Merry Wives of Windsor, ii. 5.

O, how the wheel becomes it.—Hamlet, iv. 5.

Whence is that knocking?—Macbeth, ii. 2.

The battery once again.—Henry V, iii. 3.

A horse! A horse! My kingdom for a horse!—Richard III, v. 4.

—*Summit County Medical Society Bulletin.*

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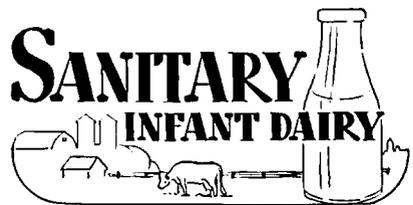


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### Parran Asks Two Billion Health Plan

WASHINGTON—Testifying recently before a Senate Subcommittee on Wartime Health and Education, Dr. Thomas Parran, Surgeon General, U. S. Public Health Service, advocated a \$1,989,000,000 public health program. He said "too much heat and not enough light" has been turned on socialized medicine, adding:

"It is my belief we can have a national health program fitted to the nation's need and the social and economic problems of the 48 States not entirely with socialized medicine but with more private medical practice than we now have."

He outlined a plan for 417,000 hospital beds and 2400 health centers and sub-centers, costing \$1,989,000,000, not including the health needs of veterans, which he said the nation must place on a sound basis.

"As our knowledge increases," he said, "the need grows for putting this complex science (research, diagnosis and treatment) to the service of the people by groups of trained

persons working as a team. The day of the country doctor of the saddle bags is past."

Parran advocated an integrated system of public health service beginning with health centers in every community feeding general and specialized hospitals.—*Victor News.*

### Communicable Diseases

August, 1944

Chickenpox .....	18
German Measles .....	7
Gonorrhea .....	40
Malaria .....	1
Measles .....	11
Mumps .....	1
Meningitis, spinal .....	1
Poliomyelitis .....	2
Rheumatic Fever .....	8
Scarlet Fever .....	6
Syphilis .....	20
Tuberculosis .....	11
Undulant Fever .....	1
Whooping Cough .....	9



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## Seek 8,500 More Nurses in WMC-Red Cross Drive

WASHINGTON—The War Manpower Commission and the American Red Cross plan to recruit at least 8500 more nurses for the army and navy during the rest of 1944.

The army will get 5500 at the rate of 1000 a month, and the navy 3000 at the rate of 500 a month. The nurse situation now is as follows: In the army and navy, 50,000; in active civilian service, 170,000, and in training, 112,300.

Most of the new recruits will come from those in active civilian service who are classified as available for military service, WMC Director McNutt said. Some of the recruits will be taken upon graduation from the United States cadet training corps.—*Victor News*.

### Spring

A primrose by the river's brim  
A dermatitis meant to him,  
A rash,  
And nothing more.

### Vitamins

We never saw a vitamin,  
We never hope to see one;  
And Gosh, we can't say whether we  
Would rather C than B<sub>1</sub>.

"I think—," began the doctor on the witness stand.

"You are not on the stand as an expert witness," interrupted the attorney. "We want your testimony as to what you know, not as to what you think."

"I'm sorry," the doctor answered quietly. "I'm not a lawyer. I can't talk without thinking."

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"Every infant, including every breast-fed infant, should receive vitamin D by mouth as early as practicable. It is desirable that this treatment be started in the hospital and continued at home."—F. W. Clements, *American Jnl. Diseases of Children*, October, 1943.



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*Official Publication - Pierce County Medical Society*



VOL. XIV - No. 7

OCTOBER - 1944

*Programs*

OCTOBER 10

Medical Arts Auditorium — 8:15 P. M.

**PENICILLIN — GENERAL FEATURES AND UNUSUAL  
CASE PRESENTATIONS**

J. M. Mattson

B. A. Brown

C. Quevli

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1944-1945

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## Election Day

Election day will be all over before the issue of the Bulletin so we will say a few at this time.

If you have the time and inclination you have the opportunity of hearing political speeches and seeing the candidates perform. It won't be wasted time to hear a few such—but just a few. Don't be fooled that they will greatly influence your vote except possibly to reassure you again that your party affiliations are right and all that your choice is one of intelligence.

Speeches heard over the radio make interesting listening only when the speaker is pitted against the other candidate and you wonder who the unfortunate competitor didn't keep his cards with its gruesome skeletons, more securely locked.

So much for campaign enjoyment.

Every American should appreciate his privilege of voting as he chooses far more than ever before. If you want real proof that this statement is true just ask a newly naturalized citizen. His testimony will be given to you freely and straight from the heart.

Every doctor and every doctor's wife should vote on November 7th. Candidates and issues at the national, state and local, deserve study and a good measure of understanding on our part. We continue to stand high in the opinion of our patients and are in a strategic position to advise those with whom we come in contact. Our council should not be rabid and extreme but simple and with beliefs based on our own experiences. Lots of missionary work can be done during the coming month and your contribution in doing just that is really needed.

During the coming month then we should listen to some political speeches, re-appreciate our voting privilege, discuss the local measures with those whom we can help, and endeavor every way to get out a big vote on November 7th.

# The LIBRARY

MRS. BLANCHE L. DEWITT, Librarian

Volumes 1 and 3, *Modern Surgical Technic*, by Thorek, are missing from the library, having been borrowed during the librarian's absence without a record being left. The prompt return of these books is requested, as there have been several calls for them since they have been missing.

In this connection, attention is called to the following rules for the use of the medical library outside of library hours:

The key may be obtained at the Business Bureau office, and the register must be signed **WHEN THE KEY IS RECEIVED**, regardless of whether anything is borrowed or not. A printed slip stating what has been borrowed or that nothing has been borrowed is to be signed **AT THE BUSINESS BUREAU DESK** when the key is returned.

Please do not be impatient with the Business Bureau attendant when she asks you to comply with these rules. They are for the protection of all. A member who needs something in a hurry is much inconvenienced if he finds that the librarian does not know where it is.

☆ ☆ ☆

After making our moan about things disappearing from the library we must not neglect to mention that the opposite sometimes happens and something is left here that does not belong to us! An individual unknown has brought in Volume 2 of Lewis' *Practice of Surgery* and if your set has a volume missing this is probably it.

☆ ☆ ☆

In these days of crying need for workers it is of extreme importance to return the injured to productivity at the earliest possible moment. Medical publications are devoting considerable space to this matter and the following articles are listed for the convenience of those interested:

"Rapid rehabilitation in the shipbuilding industry, K. A. Koerber; *American*

*Journal of Surgery*, 63:192-202, February, 1944.

A practical program for human rehabilitation, H. A. Vonachen; *Industrial Medicine*, 12:807-810, December, 1943.

The physician's role in manpower utilization, C. Kuh; *Journal of the American Medical Association*, 125:265-270, May 27, 1944.

Rehabilitation of the industrial casualty, A. P. Aitken; *Virginia Medical Monthly*, 71:177-179, April, 1944.

The place of health resorts in rehabilitation following injuries, F. H. Krusen; *Journal of the American Medical Association*, July 29, 1944.

## A. M. A. Reclassified for Taxes

According to a news dispatch dated Chicago, June 20, 1944 and issued by the *International News Service*, the American Medical Association has been officially characterized by Circuit Judge Michael Feinberg as an organization which engages in propaganda activities and lobbying. Judge Feinberg ordered the A. M. A. to pay more than \$500,000 in state unemployment compensation and old age benefit levies on salaries paid 653 employees since 1937.

The I. N. S. reports that "in his ruling, Judge Feinberg upheld an unemployment compensation board of review decision that the A. M. A. is not exclusively an educational or scientific organization, and declared the organization had violated the purpose stated in its charter by engaging in propaganda activities. The decision ended a suit for a writ of certiorari filed by the A. M. A. last July 29 against the State Department of Labor, in Illinois, in which it asked to be declared exempt from provisions of the Federal and State Social Security laws."

Examiner: "What is indigestion?"

Medical Student: "The result of trying to get a square meal into a round stomach."—*Canadian Doctor*.

# OUR FRIENDS, THE ADVERTISERS

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## SAINT JOSEPH HOSPITAL IN 1944

Upon entering our City of Tacoma, one of the most outstanding sights is Saint Joseph Hospital, newly painted red and cream. It seems to twinkle a hearty welcome from the hill top—sort of a Guardian Angel hovering over the people of this little city.

As patients enter the hospital they come in on the 19th Street entrance or what is now known as the "ambulance entrance." They are greeted by the admittance nurses and clerks, in a light, friendly admittance office. Our switchboard is now at this entrance, where it can be of service to the staff and visiting doctors 24 hours a day. Our doctors are pleased with the new automatic elevator that enables them to go quickly to the different floors, or directly to surgery.

As the patients are being registered, they are asked to designate whether they wish to pay cash, or whether they will need credit. Each step is taken with the main idea in mind to make their hospitalization as far as possible a "worry-free" step, so that they can regain their health without worrying about the financial details. Where it is a financial impossibility to pay cash, they call at the new credit department, situated off the main lobby directly across from the cashier's office. The credit manager and her capable assistant have as their motto: "Credit with an understanding heart!" Each individual case is studied and terms made to meet the individual needs, and patients feel that they have been given a chance to meet their obligations without "biting off more than they can chew!"

The cashier's department has installed a new bookkeeping machine giving them efficiency and accuracy.

The graduating staff and office personnel have had their comfort taken care of by the installation of a delightfully cozy parlor, where they may rest during the day.

Our halls have been recently decorated in soft pastel tile, with the upper walls hung with harmonizing Fabron. The new indirect lighting system casts a soft, friendly glow over the

walls, and makes our patients and their friends feel the hospital's quietness and dignity.

New emergency and dressing rooms have been built, as well as a new examining room.

A freight elevator is being installed off the main kitchen and the central dishwashing room, to enable quick, efficient and sanitary delivery of food to the floors. The new central dishwashing room has had a complete modern dishwashing system installed which will adequately safe-guard the health of the patients.

Whereas we used to have a dark narrow driveway, we now have a double driveway between the nurses home and the hospital and a new wide driveway on 19th street is under construction. The driveways meet the hospital's needs. The exterior of the hospital has been newly decorated and the nurses' home has been painted a dark red to blend in with the red brick of the hospital. This has made a great improvement from the artistic standpoint, giving the buildings the appearance of one complete unit.

Saint Joseph Hospital is indeed having its "face lifted" both inside and out and more improvements are planned for the immediate future.

Sister Mary Turibia, O. S. F. Superior, has been transferred to the Saint Joseph's Hospital at Lancaster, Pa., and Sister Mary Jane, O. S. F. Superior, came to Tacoma from Georgetown Hospital, Washington, D. C.

So, to you who may be far away in the service of our country, we have much in store for you when you return, we feel sure you will be as proud of Saint Joseph Hospital as we are of you, and we feel confident that you will agree that when better things are needed in hospitalization and hospital administration, you will find Saint Joseph Hospital right in the "front line."

---

One of these new WACS stepped up to the sergeant and asked where she ate.

"You mess with the soldiers," said the sarge.

"I know that, but where do I eat?"—*Lilly's Shear Wit.*

# A COMPLETE LINEN SUPPLY For DOCTORS and DENTISTS

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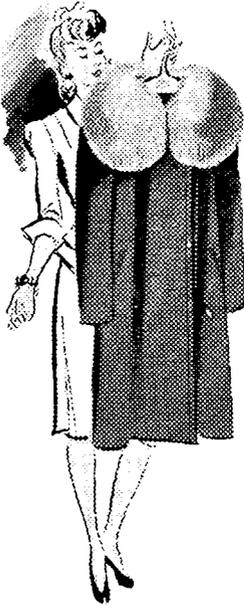
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Social.....	Mrs. Carl S. Staatz
Publicity.....	Mrs. D. H. Johnson
Hygiene.....	Mrs. J. Benjamin Robertson
Telephone.....	Mrs. G. H. Smith

Additional Committee Chairmen will be announced later.

The September Bulletin was in error in announcing the place of the October meeting as the C. V. Lundvick home.

The meeting, which will be held on October 12, at 1:30 p. m., will be a tea at the home of Mrs. W. H. Ludwig, 2601 North Junett street.

Betty Heidinger Smith will sing, accompanied by her sister, and Mrs. T. H. Duerfeldt will give a report of the National Auxiliary meeting held in Chicago.

## Disintegrating

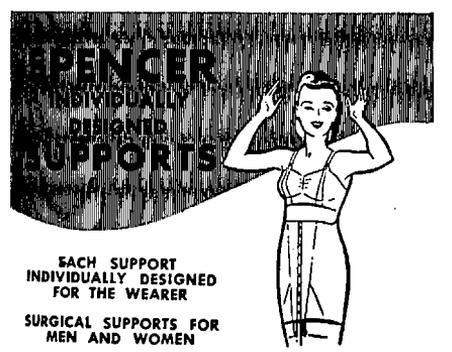
He's dimming out. He's gone to seed.  
Bifocals help him see to read.  
He's taking tablets labeled Vim  
To take the place of iron in him.

He smiles before the glass each day  
And combs his snappy black roupee.  
Then gaily off to work he marches  
On springs of steel instead of arches.

He's at the drug store now to dicker  
For digitalis for his ticker.  
As sounds about him daily fade  
He thinks he'll buy a hearing aid.

To keep his chewers clean and bright  
He soaks them in a glass at night.  
And as each function in him halts  
He adds another part that's false.  
His wifey sticks, as women will—  
With all his false she loves him still.

SPRAGUE O. SMITH,  
in *Seattle Star*.



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## TACOMA GENERAL NEWS NOTES

Internes will be coming and going on October 1st. Dr. R. M. Reynolds who has already left, is on duty with the army. Dr. W. P. Hauser will also serve with the army. Dr. R. V. Snyder has received a deferment to take a residency in medicine at Temple University Hospital.

☆ ☆ ☆

Dr. Robert N. Blodgett whose home is in Albion, New York, will commence an internship on October 1st, as will Dr. Rodney M. Jarvis, whose home is in Seattle, and Dr. C. Clyde Casey, whose home is in Medina, New York. Dr. Blodgett and Dr. Casey are both from University of Buffalo Medical School, and Dr. Jarvis is from George Washington University Medical School.

☆ ☆ ☆

Dr. Eugene F. Darling commenced an internship here on July 1, 1944. He comes from the University of Tennessee Medical School, and could almost be called a "local boy" inasmuch as his home is in Leavenworth, Washington.

☆ ☆ ☆

Dr. Richard A. Powell commenced a general residency on August 1, 1944. He interned at Sacred Heart Hospital in Spokane, Washington, and is a graduate of Marquette University Medical School.

☆ ☆ ☆

A new tennis court and a play field now take the place of the vacant lots across the street from the hospital at South Fourth and J. On one side is the tennis court. The field, which is now being seeded with grass, will be for badminton, archery, softball and volley ball. The student nurses, for whom the courts were constructed, will soon be able to enjoy all these activities in their time off duty.

☆ ☆ ☆

The hospital has instituted a new emergency room service. Mrs. Emma Troupe, a registered nurse, is in charge of the emergency room from 7 o'clock in the morning until 3 in the afternoon. This facilitates the handling of emer-

gencies, and has proved to be very helpful to our busy surgery nurses in the morning, who formerly were called down to the emergency room when the need arose.

☆ ☆ ☆

In order to promote a greater attendance at the medical staff meetings, the hospital is now serving supper to all staff doctors, preceding the staff meeting, in the dining room of the hospital on the first Tuesday evening of each month at 6:45. All staff doctors are cordially invited to come to supper and stay for the staff meeting.

☆ ☆ ☆

It may be of interest to the doctors to know that there were more babies born in Tacoma General Hospital in 1943 than in any other hospital in the state of Washington. Only three other hospitals on the Pacific Coast exceeded our record of 2550 babies born.

☆ ☆ ☆

On September 6th 33 new student nurses were admitted to the School of Nursing, making a total enrollment in the school of 154 students.

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## POST-WAR PLANS OF MEDICAL OFFICERS

What do medical officers on active duty think about their own future? What are their worries about the future of medical practice? What are their plans for reestablishing themselves after the war is over?

These and a number of other equally interesting questions have been answered, at least in part, in a poll conducted by *Medical Economics* among doctors in active military service.

A clear majority of the medical officers indicated that they will want to do some post-graduate work before re-entering practice. Only one out of four of those who responded to the poll felt quite certain he would not need such training. Some of *Medical Economics'* correspondents were extremely emphatic on this question, urging local medical societies to organize hospital residencies of six months or a year which might be made immediately available to demobilized medical officers on their return to their home communities.

Although *Medical Economics* does not report the percentage of men who felt they would need financial assistance in reestablishing their civilian practices, it was apparent from their correspondence that this need looms large in the minds of many of our military brethren. Some reported that they had borrowed up to the limit of their capacity to maintain their families at home and they were wondering from what source they could obtain the substantial sums needed to renovate their cars, equip their offices and carry themselves through the transition period on their return to civilian practice.

If *Medical Economics* reports are fairly indicative of the general feeling among medical officers, there is nothing to the frequently heard speculation among home front physicians that a large proportion of those in military service will remain in service indefinitely after the war. Ninety-five per cent of those replying to *Medical Economics* stated they did not expect to remain in service any longer than they had to.

Two out of three physicians responding reported that they planned to resume practice in their former communities after the war, and

only 13 per cent reported that they definitely did not expect to return to their former home towns.

By no means as substantial a percentage of our medical officers, however, are satisfied with their former civilian location. Only 40 per cent of those responding said they expected to hang out a shingle at the same office site, whereas 38 per cent hoped to find a different location; the remaining 22 per cent were undecided.

It would seem significant that roughly one out of three of those responding plan to practice in a group or partnership after the war. Apparently the experience of medical teamwork in military service has made a lastingly favorable impression on many medical officers who previously had never thought much about group practice.

Military service has also apparently unsettled the hopes and plans of many medical officers as to the type of practice they are to engage in after demobilization; thus, one out of four military officers state he plans to engage in a different specialty from that in which he was previously engaged, and only two out of three plan to return to the same specialty they formerly practiced.

*Medical Economics* has performed a real service in developing this interesting, and we hope, reliable information. It should furnish plenty of food for thought and stimulus for helpful action among the War Participation Committees of the various county societies, as well as for our state and national organizations.

Almost coincidentally the Committee on Post War Medical Service and the Council on Medical Education and Hospitals of the American Medical Association have released the findings of a study made of the preferences and plans of medical officers by the A. M. A.\*

A questionnaire was mailed to a random group of 3000 medical officers on duty with the armed services. A total of 927, or nearly one-third of the questionnaires, were returned. The

(Continued on Page 13)

## TACOMA'S ONLY EXCLUSIVE TRUSS AND BELT SHOP

We specialize in the proper fitting of trusses, belts, surgical and maternity supports. Elastic hosiery — two-way stretch. Here your patients receive expert guaranteed fittings in modern private fitting rooms.

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**NU-LIFT MATERNITY SUPPORTS**

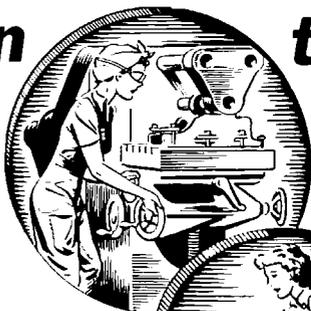
*Designed with the counsel and supervision of leading obstetricians with every feature designed for a particular purpose—NOT a corset adjusted to a particular circumstance.*

## ELLISON'S SURGICAL APPLIANCES

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## On the Job—OUR FEMINE "MANPOWER"



OFFICIALS of the War Manpower Commission assert that women today can capably "take over" any man's job, provided it is within their physical powers.

Menstrual aberrations, however, cause frequent absenteeism and loss of efficiency. For the symptomatic treatment of functional conditions, physicians find Ergoapiol (Smith) a highly efficient emmenagogue, in which the action of all the alkaloids of ergot (prepared by hydro-alcoholic extraction) is synergetically enhanced by the presence of apiol, oil of savin, and oilain.

Its sustained tonic action on the uterus provides welcome relief in many cases—by helping to induce local hyperemia and to stimulate smooth, rhythmic uterine contractions, and by serving as a potent hemostatic agent to control excessive bleeding.

May we send you a copy of the booklet "The Symptomatic Treatment of Menstrual Irregularities."

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### INDICATIONS

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Dosage: 1-2 cap. 3-4 times daily.

Supplied: In ethical packages of 20 cap.



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THE PREFERRED UTERINE TONIC

Ethical protective mark, M. H. S., visible only when capsule is cut in half at seam.

## PERSONALS

Recent word from Captain H. H. Meier is that he has been overseas since February and is now in India.

☆ ☆ ☆

Major E. J. Fairbourn, who has been in Normandy since shortly after D Day writes of being very busy in a large hospital where he is in charge of four and a half wards.

☆ ☆ ☆

Captain L. S. Baskin is again on the waiting list for overseas duty. He was all set to go when the army changed its plans and at this writing he is uncertain what his next move will be.

☆ ☆ ☆

Lieutenant Cecil Hurst is now in North Carolina but expects to go overseas shortly.

☆ ☆ ☆

Major B. D. Harrington writes from his station in Florida of plans to attend the meeting of the American Roentgen Ray Society in Chicago. He does not complain so loudly as heretofore about the Florida climate and is apparently becoming acclimated.

☆ ☆ ☆

Dr. C. F. Engels has been laid up for a couple of weeks with an attack of sciatica.

☆ ☆ ☆

Lieutenant Fay Nace has been transferred to Farragut, Idaho.

### Post-War Plans of Medical Officers (Continued from Page 11)

results show an interesting and, to our minds, conclusive parallel with those of the poll conducted by *Medical Economics*.

Thus, in the matter of post war medical education, more than 75 per cent of those responding to the A. M. A. questionnaire stated that they desire additional training before resuming civilian practice. A large majority of those responding to the *Medical Economics*' study indicated likewise. As to the period of post war medical training needed, more than half of the entire group responding to the A. M. A. questionnaire requested a year or more of post war training, and only about five per cent of the

entire group stated they do not want any additional training; whereas, only one out of four of those responding to the *Medical Economics*' poll felt quite certain they would not need such training.

Nearly 60 per cent of those replying to the A. M. A. study stated they intended to seek specialty board certification after discharge from military service.

Approximately one-third of the physicians in the A. M. A. survey suggested that they would be interested in a position in industrial medicine, the vast majority of them preferring part-time service. *Medical Economics* did not question them on this subject.

Both studies reported that roughly two-thirds of their corresponding medical officers plan to re-engage in practice in the same locality in which they practiced before they went into service. The *Medical Economics*' study showed that 13 per cent and the A. M. A. study about 17 per cent do not expect to return to their former home towns.

Likewise, both studies reported that more than 90 per cent of the medical officers surveyed do not expect to remain in government service. The A. M. A. showed that only three per cent expect to remain in the army, one per cent in the navy, and about four per cent would accept service either with the U. S. P. H. S. or the Veterans' Administration.—*Westchester, N. Y., Medical Bulletin*.

"Postwar Planning: Results of Pilot Questionnaire to Physicians in Service." *J. A. M. A.* Vol. 125, No. 8, Pp. 558, 559, June 24, 1944.

### FOR SALE

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October 2, 1944

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This is whole milk with nothing added and nothing taken away but it has the flavor of condensed cows' milk so that very few older children or adults like it, but Harborview has used it for over two years where goat milk is indicated for an infant. Many mothers ask for it in preference to raw milk on the advice of your colleagues who prefer it to raw goat milk.

We urge you particularly at this time to indicate STERILIZED SUNNYDALE GOAT MILK for your baby cases where goat milk is required because goats, being seasonal in their milking habits will give less and less milk from now on with no more coming fresh until March. If the infants will use SUNNYDALE STERILIZED GOAT MILK then we can have raw goat milk for more ailing older children and adults.

WE THANK YOU.

**SUNNYDALE GOAT DAIRY**

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THE EAR, MAN'S MOST COMPLEX AND SENSITIVE ORGAN OF PERCEPTION, REQUIRES AND DESERVES SKILLED CARE AND STUDY AND THE FINEST INSTRUMENTS THAT MODERN SCIENCE CAN PROVIDE.

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It lessens the hazard of complications by getting rid of germ-laden secretions.

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## The Nurse in War

Unsung heroes of World War II are the 40,000 graduate nurses who are serving with the Armed Forces. The Office of War Information estimates that of this number, 38,000 are in the army.

Many times during this war period, American nurses have done an outstanding job in tending to our sick and wounded fighting men. First at Pearl Harbor on that fateful day of December 7, 1941, then at Bataan, and then at Corregidor, our nurses have set an all-time high for compassionate, selfless service in the midst of privation, suffering, and death.

In this war, army nurses must live the life of a soldier. They wear helmets, one-piece overalls, and G. I. shoes; they sleep in tents, bathe in helmets, dig and dive into foxholes if necessary, work calmly under shellfire; they march across country under full pack every day for two hours or more at a time, in snow, rain, sleet, and mud; they are taught to crawl on their "stomachs," elbows and knees, and they go in for army drill and calisthenics. It's all quite different from the life they led at home, but the nurses have shown on many occasions that they can take it.

The surgical tents and evacuation hospitals where many of them are working today are a far cry from the white-tiled operating rooms of the typical American hospitals but, surprisingly, the array of shining instruments, sterile supplies, and medications are almost identical with those found at home.

Army nurses now are located at 35 bases outside the United States, and at 527 posts in the United States. Navy nurses are on duty in 212 stations within our boundaries, and assigned to 27 countries outside the continental United States. All over the world—on land, at sea, and in the air—our nurses are doing the kind of a job of which they can well be proud.

In reviewing the subject of war-nursing, one cannot overlook the fine work which is being done by women who maintain and protect health on the home front. We have in mind particularly the civilian nurse, who serves in our hospitals, war plants, public health organizations, and in doctors' offices. Members of the

U. S. Cadet Nurse Corps, who have pledged themselves to serve in military or essential civilian nursing throughout the war, are lending a big helping hand, too.

All in all, the army nurses, navy nurses, civilian nurses, and nurse's aides are rendering a great service to their country in time of need.

—Victor News.

---

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Do the children feud and fight?  
It's Brucellosis!

Do your joints all creak and pain,  
Do your friends come not again,  
Does the Doctor say "Insane"?  
It's Brucellosis!

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It's Brucellosis!

Smell like rats slept there instead?  
It's Brucellosis!

Does it hurt when you roll over,  
Do you need an extra cover,  
Does your husband have a lover?  
It's Brucellosis!

When you eat you take a chance  
Of Brucellosis!

Wipe not your hands upon your pants,  
Oh Brucellosis!

The germs can penetrate your skin,  
And leave no hole where they went in,  
Whether milk your drink or gin.  
You've Brucellosis!

Have the cows had every test,  
For Brucellosis?

Are you sure you're at your best,  
No? Brucellosis!

Milk and cheese, butter and cream,  
Are not as safe as they may seem.  
Wake up! Be wise! Get on the Beam  
Have Brucellosis!

HARRY S. IRVINE, M. D.

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**HEALTH BREADS**

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1. Soya Bread (Non-Acid)
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4. Wheat-Germ Bread (Brown Sugar and Molasses  
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6. Potato Bread

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DIAL LA 2195

## Brig. General Hillman Assumes Command of Letterman Hospital

Completing his work on his fifth anniversary as Chief of the Professional Service of the Office of The Surgeon General, Brigadier General Charles C. Hillman left Washington and has taken up his post as the commanding general of Letterman General Hospital in San Francisco. This institution—containing 2500 beds—has been designated as the principal debarkation hospital for casualties from the Pacific area. General Hillman will succeed Brig. General Frank W. Weed, who will soon retire. Major General Norman T. Kirk, surgeon general, U. S. army, said today that, "General Hillman's assignment as the commanding general of this important hospital on the West Coast illustrates the army's concern with the care of sick and wounded soldiers. It is of paramount importance that such work be carried out under the direction of a medical man of wide experience and sound judgment. He has ably directed

our professional service, being mainly responsible for the initiation of the blood plasma program of the army, resulting in saving the lives of thousands of American soldiers; under his direction was organized the chest x-ray examination of all army inductees, with a lowering of the incidence of tuberculosis among military personnel to less than one-tenth that in World War I." "It is a happy coincidence," he observed, "that the qualities of administrative ability and sound medical judgment are thus combined in one man."

General Hillman obtained his doctorate of medicine from Rush Medical College in 1911 after graduating from the University of Arkansas. Following his internship in the Cook County Hospital he entered the Army Medical Corps in 1912. His assignments have been largely professional in character in important medical centers of the army. His service has included several years at tropical stations during the years of peace and inspection of medical services in overseas theaters in the current emergency.—*Orange County Medical Bulletin.*



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### On Being a Committee Member

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 interests of the medical profession at heart.

Second, he will give thought and study to the subjects which come up before the committee and will not be just one of those present.

Third, he will make it a point to be on hand for all meetings unless his professional duties require him elsewhere.

Fourth, he will not allow one or two men to assume the entire burden for developing plans, but will contribute ideas of his own.

Fifth, he will do what he can to make the meeting orderly and not overlong.

—*Medical Annals, District of Columbia.*

The ship had entered New York harbor. On board was one colored soldier. As the ship passed the Statue of Liberty there was absolute silence, when suddenly the colored boy broke the silence by remarking: "Put your light down, honey, I'se home."

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### Death Comes to Secretary of American College of Surgeons

CHICAGO—Dr. Frederic Atwood Besley, 76, secretary and treasurer of the American College of Surgeons and a former president of the organization, passed away August 16. He was graduated from the Northwestern University Medical School in 1894. At the outbreak of World War I he organized a Northwestern University hospital unit which served in France. Dr. Besley was professor of surgery at Northwestern for 25 years.

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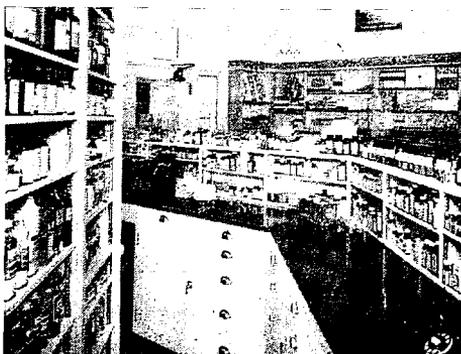
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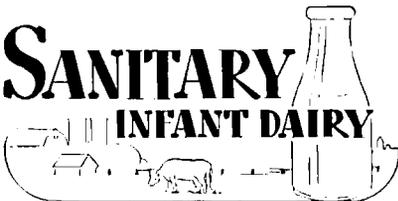


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# BULLETIN

Publication - Pierce County Medical Association



*Progress*

Volume 10, No. 1

Published by the Pierce County Medical Association

Editor: Dr. J. H. ...

Business Manager: Dr. ...

Dr. ...



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1944-1945

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## The Doctor's New Baby

The election is over and regardless of what political predictions on the state of the nation the medical profession will continue to work long hours, indulge in no sit-down strikes keep on trying to solve their ever present problems.

Some doctors may feel an unnecessary medical hazard is presented at this time in offering the Medical Bureau subscribers a group plan for prepaid family hospital coverage. We know of no other state considering so ambitious an undertaking but it is our belief that it is for a necessary step in the right direction and taken with the enthusiastic approval of the Washington State Medical Association and the Washington State Association of Bureau Managers.

The plan goes into effect this month and is an outgrowth of the successful formation of the Washington Physicians' Service Corporation, a new insurance company, organized and financed by the physician members of the Medical Service Bureaus of this state.

The organization of this corporation represents a very large amount of intelligent effort on the part of a small committee who have successfully accomplished a difficult and painstaking piece of work. Pierce County physicians might be proud of the leadership provided in the services of Dr. Wilmot Read and the Harry House.

Briefly, the plan provides complete hospital coverage for the spouse and children of employed person now a member of the Medical Bureau. The coverage will cost ninety cents per month for the spouse and fifty cents per month for each of the first two minor children. No charge is made to cover additional minor children.

Naturally there are necessary exclusions and limitations but the provisions are very liberal and cover hospitalization of members anywhere in the United States and Canada. Payment is made by payroll deductions or by group collection of premiums.

The local hospitals have each agreed to operate to their fullest extent and this program

should be very satisfactory to them in every respect.

As at present set up, this hospital plan, with minor local variations, will be in effect throughout the state under the management of the separate county medical bureaus.

New equipment is being installed in our local Medical Bureau to care for this additional responsibility, which will add to the already large amount of detail in keeping accurate records of care given our Medical Bureau subscribers and the approximately 7000 Old Age Assistance recipients, whose medical and dental care is now being strictly accounted for to the State Department of Social Security.

A recent radio broadcast stated that more than one-eighth of this country's population is now covered by prepaid hospital insurance, nearly the entire number by one organization.

We may be presuming much but we in the state of Washington believe we have sufficient background and experience to successfully initiate and carry on our own plan for prepaid hospital insurance. This venture will undoubtedly give our Medical Bureau manager and trustees some additional gray hairs but judging from past experiences they would rather lead than follow.

### Tacoma Health Bulletin

This Bulletin would like to express a word of well deserved praise for the monthly Health Bulletin issued by our Tacoma Health Department.

The original attractively drawn covers carry, each month, an instructive lesson.

Any person, doctors and their wives included, can better appreciate our city health problems and the health of our community by taking time each month to carefully read this excellently written report. The different activities of our Health Department are featured in each issue in a brief simple manner.

We would say that several public health employees are making possible a very worthwhile publication.

## Minutes of Regular Meeting of Pierce County Medical Society

October 10, 1944

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Auditorium on October 10, 1944, with Dr. J. W. Gullikson in the chair. Minutes of the previous meeting were read and approved.

The scientific program of the evening was given over to a discussion of the use of penicillin.

Dr. B. A. Brown presented a report of several cases which had been treated at the County Hospital, including osteomyelitis, empyema, meningococcic meningitis, bronchial pneumonia and several of gonorrhoea. He discussed the cases of gonorrhoea treated in detail and stated that in general the results in all their cases had been very satisfactory.

Dr. J. M. Mattson reviewed the history of the development of penicillin, its mode of action, pharmacology and dosage. He reviewed in detail the reports of Dr. Keefer and others and presented two cases in which penicillin had been used with success in connection with sulfa drugs.

Dr. Christen Quevli, who was on the program, did not appear.

Meeting adjourned.

### Communicable Diseases

OCTOBER, 1944

Chickenpox .....	11
German Measles .....	6
Gonorrhoea .....	32
Measles .....	3
Mumps .....	24
Scarlet Fever .....	4
Syphilis .....	29
Tuberculosis .....	3
Vincent's Infection .....	1
Whooping Cough .....	4

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# The LIBRARY

MRS. BLANCHE L. DEWITT, *Librarian*

Dr. Arthur E. Hertzler has presented to the library three of his recent books—"Diseases of the Thyroid Gland," "The Grounds of a Surgeon's Faith" and "Ventures in Science of a Country Surgeon." Dr. Hertzler is noted for his ability to make readable the most scientific discussion and these books are written in his own characteristic style.

☆ ☆ ☆

The entire issue of the Public Health Reports for September 22 is devoted to an article on "Anti-plague measures in Tacoma, Washington."

☆ ☆ ☆

Thanks again to all of you who give your periodicals to the library. Since so many of the doctors are in the service, though, we are not getting as many issues of Northwest Medicine as we need for exchange purposes and it would be appreciated if those who have been discarding their copies would give them to the library.

☆ ☆ ☆

Last month we spoke of rehabilitation of the injured worker in order to return him to productivity as promptly as possible.

Another aspect of this matter pertains to the soldier who has been discharged from the army with a physical handicap. He must be made fit for civilian duty not only because the need of workers is great but also to make him feel that though handicapped he can take his place in the world of industry and hold his own there. Though the war is still to be won this problem is already upon us, with the discharge of a constant stream of disabled from the army, and that medical men are conscious of their part in solving it is attested by the number of articles on the subject appearing in the medical journals. A few of these are listed below:

For the disabled we can take up arms,  
M. P. Hovey, *Industrial Medicine*, 13:258,  
December, 1943.

Rehabilitation scheme for various types

of disablement, *Lancet*, 2:119, January 23, 1943.

Demobilization and readjustment of veterans, John N. Andrews; *Industrial Hygiene*, 13:472-478, June, 1944.

Wartime physical rehabilitation, F. H. Krusen; *Proceedings of Staff Meetings of the Mayo Clinic*, 18:750-751, September, 1943.

The problem of military rejects and casualties, S. W. Hamilton; *Virginia Medical Monthly*, 70:602-605, December, 1943.

Problems of rehabilitation, H. Balme; *British Medical Journal*. 2:47-49, July 10, 1943.

---

## Tacoma General News Notes

Plans are now being completed for our new Nurses Home and School of Nursing. The existing houses on the property across the street from the Hospital on K, where it is to be constructed, are now being vacated, and the actual construction should be under way about January 1, 1945.

The new building will house 125 students, in addition to the faculty. The building will include all the classroom facilities, an auditorium, and a Science laboratory, which we have not had heretofore. The auditorium will be equipped with a stage and projector room, and will seat approximately 250 people. It will be used for student social affairs and dances, and will also be available for Medical Staff meetings and clinics.

☆ ☆ ☆

The Tumor Clinics which are held on each Thursday morning at 9:30 are most interesting and instructive, and the doctors who attend state that they are gaining much valuable information from them.

---

"For one mistake made for not knowing, ten mistakes are made for not looking."—J. A. LINDSAY.

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licity.....	Mrs. D. H. Johnson
ieia.....	Mrs. J. Benjamin Robertson
ephone.....	Mrs. G. H. Smith

Additional Committee Chairmen will be announced later.

The Auxiliary held its November meeting on Thursday, the 9th, a luncheon at Dalhem.

Mrs. Roger Anderson, of Seattle, President of the Washington State Medical Association Auxiliary, was the speaker of the afternoon.

It is time to make your Christmas gift subscriptions to Hygeia. Contact Mrs. J. B. Robertson, MAin 6481, 301 North J Street.

An optimist from official Washington declares we should pay our taxes "with a smile." We've tried to pay our taxes that way, but it doesn't work. The collector demands cash.

—Kieffer Calling.

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## PERSONALS

Mrs. Fay Nace has joined Lieutenant Nace in Farragut, Idaho.

☆☆☆

Dr. and Mrs. M. T. Nelsen have returned from a visit with their son Tom, who is attending Harvard Medical School.

☆☆☆

Dr. Clyde Magill brought back a moose from his recent hunting trip in British Columbia.

☆☆☆

Dr. Leo Scheckner has written that he is now at Carlisle Barracks, Pennsylvania.

☆☆☆

Dr. George Kunz, Senior, and Mrs. Kunz are at home after a trip to Chicago, where Dr. Kunz attended the meeting of the Interstate Postgraduate Medical Association.

☆☆☆

It is time to make your Christmas gift subscriptions to Hygeia. Contact Mrs. J. B. Robertson, MA in 6481, 301 North J Street.

### Twelve Points Characterize Accident-Prone Person

Suggestions to doctors examining men for the armed forces or for industrial jobs on how to detect the accident-prone person are given by Dr. Flanders Dunbar, New York psychiatrist.

Accident-prone persons, she states, "Can make the kind of mistake that sinks a ship, loses a battle, or explodes a munitions plant. And apart from its consequences, the mistake will appear to be just the kind of unfortunate mistake that anyone might make. But, nevertheless, there is evidence that only certain types of people make such mistakes.

A history of having had many accidents, some of them serious, is of course the first thing to look for in detecting persons who have the accident habit. In addition, Dr. Dunbar finds the following 12 points characteristic of the accident-prone person:

1. Far better than average health, with no tendency of colds, indigestion, stomach ulcers

or other of what Dr. Dunbar calls "vegetative disturbances."

2. Impulsiveness of action under stress.

3. Failure to finish school.

4. Frequent change of jobs and many ups and downs in income.

5. Spontaneous and casual in social relations.

6. Apparently gets along well with members of the opposite sex, but irresponsible toward husband or wife and family.

7. Interest in machinery, sports and gambling.

8. No interest in philosophy beyond "a firm belief in fate."

9. Makes up mind quickly.

10. Coffee, alcohol or cigarets used to "let off steam," not for sociability or to increase alertness and prolong working time.

11. Frequent conflicts with authority. Attempts to deal with these by "being nice." Ignores existence of authority as long as possible.

12. History of broken homes—his parents' or his own.

—Peoria Medical News.

## Karen Rynning

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## "For Whom the Bell Tolls"

There comes a time in the life of everyone when the tolling of the bell brings close its real meaning. Even in the lives of physicians the tolling of the bell awakens a sad feeling, but we soon dismiss its memory by some new sickness ever present in our practice. Seldom do we connect these thoughts to our own lives. Our chief aim is to keep mankind whole. We work on the theory that to save the individual we save the nation. It is our faith in humanity that makes the study of medicine so fascinating. In fact, the doctor is rather a proud, independent and self-reliant individual. He will often fall in his tracks rather than call on others for help.

The medical profession has responded with a real patriotic fervor to the needs of the present war. This has been done without publicity or great display. They have a job to do and they have responded so well that the health of the army is the greatest in history and the civilian population has not suffered. The doctor has and will continue to do more than is asked of him. Older men planning to retire or who have retired are replacing younger men called to active military duty and the constant grind is taking its toll. Many will give their all to the cause without even a citation or a mention of their name. This faith is one of the most potent factors in human experience and no one relies on his faith in the future as does the physician. This is as it should be, but patriotic zeal should be tempered by a careful study and planning so that our life may be extended and our work prolonged.

Let us look over the obituary of the physicians. Why do they die in the prime of life? Why do so many succumb to cardiovascular disease? Is the number of deaths from coronary disease mounting because of better diagnosis or is it the toll of an exacting and stressful life? Let us look at an average physician's daily dozen. Often early to rise, even after a disturbed night and perhaps irregular (sometimes unwise) meals, often drinking a great deal of coffee and between meals Coca-Cola or other stimulating drinks. He smokes frequently and drives

his car through traffic with one thought—his patient. Always pressed for time, rushing day and night. He listens to the many tales of his patients about their illness and troubles. Added to his long, hard days and nights, he is beset with many other trials and tribulations, taxes, education of family, inroads into his livelihood, socialized medicine and income for old age when he has to retire. He is the only one who is trying to destroy diseases. He does not use the press and paid lobbyist to promote his profession before the public or before the legislature. He realizes that health laws are poor vote makers and therefore most legislators are not interested.

How may the physician escape an early breakdown? The question is easily asked but hard to answer, so long as we strive to live up to the Hippocratic code. The very nature of the profession places a strain on him because he has the responsibility of human lives in his keeping. He watches over them from birth to death. He cannot be free from anxiety and forget his work after eight hours, he will not start a sit-down strike if not paid, he does not demand double pay for overtime and does not care for the right to bargain. If others encroach on his profession or the government takes over part of his professional field he merely takes it in his stride and continues on his way. If he is a true physician he cannot execute these responsibilities without sustained tension for which he must pay the penalty.

As middle life approaches he should be able to slow down with fewer hours to work and more time for play. Yet his profession calls for a more active life. Wars, catastrophes and illness decree this. He should be able, at this time, to live a full life, a happy life and an abundant life as far as fate decrees. But there are certain handicaps as education of family, illness (the physician is subject to all the illnesses of man) and things over which he has no control may prevent a physician from such a full life. Regulation of his life, more rest, more play and

(Continued on Page 13)

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## "For Whom the Bell Tolls"

(Continued from Page 11)

more relaxation will prolong his usefulness and delay an early death.

A doctor talks of yearly examination to his patient but he seldom practices what he preaches. He insists on vacations and play for others, yet he never can find the time for himself. A lofty sense of duty and a constant, unselfish desire to relieve suffering humanity are characteristic of the doctor. In fact, so much of his time is taken up with the poverty and illness of others that he often fails to realize that disaster may come to him or his family the same way. Unless he takes care of himself and family he cannot expect others to do so. Social security is not for him; unemployment and compensation are not allowed and no governmental provision is made for him. So it is up to the physician and the medical profession to make arrangements for his old age. Let us unite in a plan to conserve the energies of the physician, to curtail duplications in practice and to establish a social security system of our own. Why not form a committee of health among our members to arrange and encourage a yearly examination for each doctor in our society?

—Fulton County Medical Society Bulletin.

## From the Statistical Bulletin of the Metropolitan Life Insurance Co.

Apart from the war deaths, the largest increase in mortality last year arose from influenza and pneumonia. Early in the year there was a pronounced wave of an atypical form of pneumonia, which does not respond to the modern methods of treatment for ordinary (bacterial) pneumonia. Towards the close of the year there was an influenza epidemic which has continued into 1944, though the peak of the mortality seems to have been passed just about the turn of the new year. Though serious enough, this epidemic was insignificant as compared with the pandemic of the first World War. The death rate from influenza and pneumonia combined for 1943 was 41.3 per 100,000, or up about 25 percent from the minimal rate

recorded in 1942. Even so, it is only one-half the annual average of about 82 per 100,000, which prevailed in the five years prior to the development of serum treatment and chemotherapy. In the great influenza epidemic of the first World War, the rate on an annual basis reached 3,394.7 per 100,000 in the peak month and average 542.2 per 100,000 for 1918 as a whole.

## Isonipecaïne ("Demerol")

—A Narcotic

Notice has been received from the Narcotic Division of the Internal Revenue Service of the Treasury Department that a new regulation has been approved by Congress relative to the sale or use of isonipecaïne or "Demerol." It is now deemed to be a narcotic and no longer exempt and may not be prescribed by a practitioner except upon his appropriate form. All quantities of this drug on hand must be reported on Form 713.

A sailor, after placing some flowers on a grave in a cemetery, noticed an old Chinaman placing a bowl of rice on a nearby grave, and asked: "What time do you expect your friend to come up and eat the rice?"

The old Chinaman replied with a smile: "Same time your friend come up to smell flowers."

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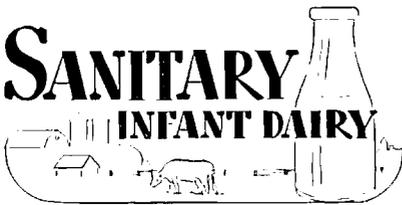


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## Bone Crystal Study May Be Disease Cure

CHICAGO—A quick shift which takes place in the structure of bones during some illnesses is under study at the University of Illinois Department of Physiology as a clue to disease.

The shift occurs in bone crystals, particles so small that they can be identified only by x-rays. Even then the individual crystals cannot be seen, but have to be calculated by x-ray diffraction—the angle at which x-rays reflect from the crystal surfaces.

### BASED ON 1000 PHOTOS

This study, based on about 1000 x-ray diffraction photos, each of which took eight hours, is headed by Dr. C. I. Reed, professor of physiology, and his wife.

Without Mrs. Reed—the technician—the bone crystal mystery probably would have remained unknown. A housewife until her son entered the military forces, she turned to her husband's laboratory to keep busy.

The bone crystals are hexagonal, shaped something like fat salt cellars. In good health they are laid like bricks, overlapping. In ill health this arrangement shifts to a disorganized heap.

But Dr. Reed's experiments show that this disorganization changes neither the hardness of bones, nor the force required to break them, nor is it chemically detectable.

When laboratory animals are placed on a diet causing rickets, the shift in bone structure appears in two weeks. When vitamin D, and nothing else, is added to the diet, the vitamin causes the crystals to shift back to their brick-like regularity. The x-rays don't show how the vitamin does it.

### BONE CRYSTALS SHIFT

If the hormone of the Parathyroid gland is given to mice in large doses, the bone crystals shift to disorganization in two days. Sex hormones in excess cause similar bone crystal shifts. But starvation does not change the bone structure.

The x-rays also show that bone is made of apatite—a common mineral which is dis-

tributed widely in the earth's crust. Usually mixed with some other mineral, its forms vary in color from water-clear, to green and purple.

The bone crystal studies will be used to examine the effects of ageing, influence of sex hormones during development and of arthritis and other diseases. Another objective is to study why some soft tissues have the ability to become bones while others do not.—*Victor News*.

### The Social Life of a Physician

"Behold two jaundiced gentlemen of upper-crust society

Distinctly unacquainted with the virtue of sobriety.

When racked by the reactions of a rousing bout with Bacchus

They toddle to the doctor saying, 'Thump us, probe us, whack us!'

The latter then must postulate a dictum that's despotic

And coin a stylish malady to coddle the neurotic.

He lectures them, he fathers them, he urges moderation

While they continue calmly on a course of dissipation.

They squander their inheritance where wine is strong and heady,

But only pay the medico when they get good and ready!"

—*Exchange*.

Lawyer: "What's to be different about this will?"

Mr. Henpeck: "I'm leaving everything to my wife providing she marries again within a year—I want *someone* to be sorry I died."

Then there was the doctor who called his country place "Beside Manor," and the patient who tried to cure water on the knee by wearing pumps.

First Intern: "Why did they put that little blonde in a private room?"

Second Intern: "Because she is too cute for wards."

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## The Doctor

Who asks no shelter from the rain?  
The doctor.  
Who braves all storms to comfort pain?  
The doctor.  
Who in the banquet hall will rise  
And all its pleasures sacrifice,  
Because somewhere a baby cries?  
The doctor.

(Copyright by Edgar A. Guest.  
Reprinted with permission of the author.)

Who takes advantage of his right?  
The doctor.  
Who ducks when boredom is in sight?  
The doctor.  
If I could only act like that,  
And leave the average banquet flat!  
O happy, privileged autocrat,  
The doctor!

When shows or parties start to drag,  
The doctor  
Grabs for his hat and physic-bag—  
The doctor  
Strides out of it with jaunty swing,  
And leaves us sad and suffering,  
Wishing we were that happy thing—  
The doctor.

Who keeps you waiting long, the while  
The doctor  
Chats with some friendly bibliophile?  
The doctor.  
Whose office hours are seven to eight,  
Except when thirty minutes late,  
Which is on any given date?  
The doctor.

(Reprinted from the Philosopher of Folly's Column,  
Cleveland Plain Dealer,  
with the permission of the author, Ted Robinson.)

—Cleveland Medical Bulletin

Their cars having collided Jock and Pat were surveying the situation. Jock offered Pat a drink from his bottle. Pat drank and Jock returned the bottle to his pocket.

Pat: "Thank ye, Jock, but aren't ye going to have a bit of a nip yourself?"

Jock: "Aye, mon, that I will, but not until the police have been here."

## A First Time for Everything

The story is going around about a soldier in the Air Transport Command who on receiving a ballot application wrote back: "Thank you for the ballot application. It came as a welcome and very flattering surprise. This is the first time I have been invited to express my opinion on anything in sixteen months."

You may get old and bent, but that's not half as bad as being young and broke.

Fay Thompson: "That new office girl is pretty as a picture."

Bill Bagley: "Nice frame, too."

Prof: State the formula of water.

Class (in chorus): HIJKLMNO!

Prof (next day): I get it now! H to O!

Candidate concluding his address: "Friends, I have lived here all my life. In this city there are 100 taverns. I'm proud to say that I have never been in one of them."

Voice from back of the hall: "Which one is that?"

An agent knocked at a door in the suburbs. "I have something here," he said to the man of the house, "which will make you popular, make your life happier, and bring you a host of new friends."

"Good," replied Green quickly, "I'll take a quart."

It takes a baby two years to learn to talk and between 50 and 75 years to learn to keep his mouth shut.—*Med. World.*

"I'll bet you think twice before leaving that wife of yours alone in the evenings."

"I'll say! First I have to think up an excuse for going out, and then a reason why she can't come with me."

"Pardon me, may I cut in?" asked the young surgeon as the operation began.

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## Baruch Grant to Physical Medicine

Among the recent philanthropies of special interest to doctors is that of Mr. Bernard Baruch, noted financier, philanthropist and recognized advisor on matters affecting our national welfare.

Mr. Baruch has given \$1,100,000 to be used for teaching and research in physical medicine. To advise on the use of this fund an administrative board was appointed with Dr. Ray Lyman Wilbur as chairman. The committee found the essential needs for the proper development of physical medicine to be: the securing of adequate teachers, developing more basic research in the subject and properly correlating physical medicine to wartime rehabilitation.

Columbia University College of Physicians and Surgeons was named the center for teaching and research and granted \$400,000 to be spent over a ten year period. This center will aim to maintain an adequate supply of medical specialists to cope with the problems of physical rehabilitation both war and post war.

New York University College of Medicine was given \$250,000 for teaching and research in preventive and manipulative structural mechanics in physical medicine.

The Medical College of Virginia was given \$250,000 for teaching and research in hydrology, climatology and spatherapy.

Certain medical schools are given \$100,000 to develop an immediate program for physical rehabilitation of war casualties and those injured in industry, and \$100,000 to provide fellowships and residences for qualified physicians.

"If you wish to fail in the practice of medicine—Always seek your own interests, make of a high and noble calling a sordid business, regard your own fellow creatures as so many tools of trade, and if your heart's desire is for riches, they may be yours; but you will have bartered away the birthright of a noble heritage, traduced by the well deserved title of Friend of Man, and falsified the best traditions of an ancient and honorable guild."—SIR WILLIAM OSLER.

"What do you do in a case of amnesia, doctor?"

"I collect my fee in advance."

First Angel: "How did you get here?"

Second Angel (sneezing): "Flu."

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This is whole milk with nothing added and nothing taken away but it has the flavor of condensed cows' milk so that very few older children or adults like it, but Harborview has used it for over two years where goat milk is indicated for an infant. Many mothers ask for it in preference to raw milk on the advice of your colleagues who prefer it to raw goat milk.

We urge you particularly at this time to indicate STERILIZED SUNNYDALE GOAT MILK for your baby cases where goat milk is required because goats, being seasonal in their milking habits will give less and less milk from now on with no more coming fresh until March. If the infants will use SUNNYDALE STERILIZED GOAT MILK then we can have raw goat milk for more ailing older children and adults.

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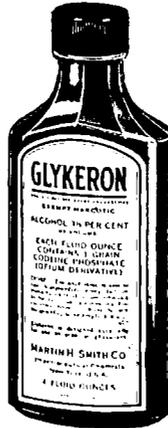
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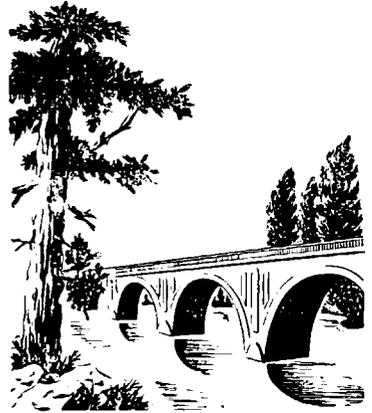


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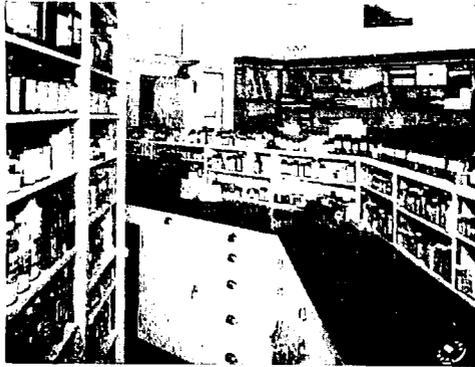
Our store is centrally located and easy to

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# The BULLETIN

Official Publication - Pierce County Medical Society



VOL. XIV - No. 9

DECEMBER - 1944

## Programs

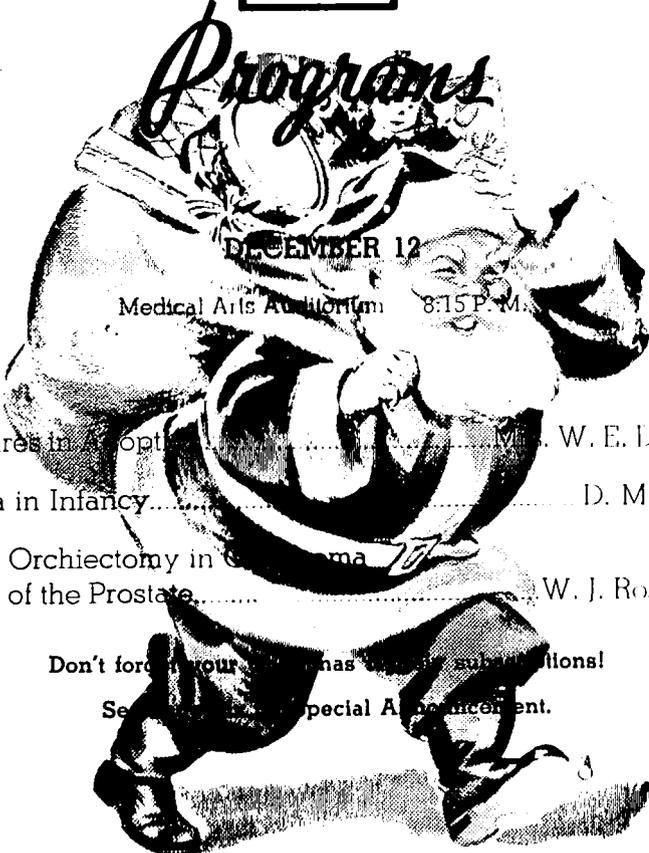
DECEMBER 12

Medical Arts Auditorium 8:15 P. M.

- |  |                  |
|--|------------------|
| Procedures in Abortion.....                                | W. E. Dalgleish  |
| Diarrhea in Infancy.....                                   | D. M. Dayton     |
| Bilateral Orchiectomy in Carcinoma<br>of the Prostate..... | W. J. Rosenblatt |

Don't forget your Christmas magazine subscriptions!

See page 10 for Special Announcement.



# Pierce County Medical Society

1944-1945

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## MORE DOCTOR'S PROBLEM

For any who are not familiar with the Cross Hospital Plan, may we say that it is a very efficient nation-wide organization serving prepaid hospital insurance. A comparison of this young enterprise, it has had a phenomenal growth and now furnishes hospital insurance in forty-two states to over 15,000,000 subscribers.

That this plan is filling a definite need in the United States is evidenced by its scope and continuing growth. From its beginning it has had active support and cooperation from the National Hospital Association for the very obvious reason that by this means the hospital bill of a Blue Cross member is paid with a minimum of loss or expense. And the reason the plan has been so generally accepted by physicians throughout the country is just as obvious because with the hospital expense provided, the professional expense is much easier to meet.

The Medical Bureaus of this state are now in the process of selling prepaid hospital insurance covering the families of Bureau members.

It was becoming increasingly necessary for our Bureaus to form our own insurance company if we were to continue to furnish hospital coverage to our Bureau members and do so in full compliance with our state insurance laws. This was the primary reason why our state-wide Bureau membership sponsored and financed the Washington Physicians' Corporation. With this accomplished, the decision soon followed that we should enlarge the scope of our service to the families of our Bureau members, and in the probability, in the near future, to other groups.

We believe our Bureau doctors can properly coordinate and control this combination of professional and hospital service and while it is definitely a venture we firmly believe it to be a very necessary line of action at the present time.

Our reason for bringing to your attention the Blue Cross Plan and our own Washington Physicians' Corporation, is that they are now definitely in competition with each other. The Blue Cross would have the bureaus turn over to them all of our hospital coverage contracts. We believe this course would have commitments

tain to be disadvantageous to the doctors in this state and oppose that arrangement.

We are told there are at least twelve states whose doctors, because they have no Medical Bureaus, are now obliged to look to the Blue Cross organization to enable them to function with any sort of a prepaid medical care plan.

They are meeting their state situations as well as their existing agencies will permit, and with them we find no fault. Our course of action in this state is being determined by our past experience, our Bureau organizations, and what appreciation we may have regarding the present trends in medical economics.

Now and in the future we want to guide and administer our practice of medicine for as long a period as is possible. Our course of action should give prime importance to the most efficient method for providing good medical care to the greatest number and equally important, to preserve the essential principles inherent in the private practice of medicine.

---

## DOCTOR—DO YOU KNOW—

That if you drive your car 1000 miles a month at an average speed of 30 miles per hour—you will seldom exceed the legal speed limit or endanger the lives of others and the risk of damaging your car or yourself will be slight?

That if you drive at an average speed of 35 miles per hour—you will often exceed the legal speed limit, endanger the lives of others and frequently risk damage to your car and yourself?

And—you will save only nine and one-half minutes per day to be used up for small talk in the doctors' room at the hospital.

---

## TUBERCULOSIS

In the most recent U. S. Public Health report on mortality from all forms of tuberculosis in 92 cities of over 100,000 population, Spokane ranks fifth, Tacoma 35th and Seattle 46th. Portland ranks 17th.

Another good reason why we should all buy Tuberculosis Seals.

## TOP PRICES

From the capital city of New York State comes a two column article in their Bulletin setting forth the recent outrageous and indefensible upping of the price of a hair cut to 75 cents.

The writer traces the "modus operandi" from "next please" to whisk broom.

For good measure there is added the interesting scientific (?) data that hair grows eight to ten inches per year, at least 50 feet in the normal span from youth to old age. (Nature has certainly short changed some doctors.)

There is also given a list of possible scalp infections that may be acquired via the barber's chair.

But the underlying gripe of the writer is having to pay 75 cents for his haircut. I doubt if even the natural beauties of our Puget Sound country would soothe his ruffled feelings if he came out here and paid our going rate of \$1.00 for the same service.

If he should be in the near bald class the price would be the same, at least for the duration.

---

## ATTENTION! DOCTORS

Your Bulletin is supported entirely by its advertisers. Read what they have to say—remember who they are and support them at every opportunity.

---

## THE LITTLE THINGS

The little things you *do without*  
 Can help to win the war  
 So try to do your own small part  
 To keep the things he's fighting for.  
 The luxuries that you *forego*  
 Will help keep down inflation  
 And everything you *don't* buy now  
 Will shorten the duration!

—Sara Nolan

---

"He is the best physician who is the best inspirer of hope."—S. T. Coleridge.

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## Minutes of Regular Meeting of Pierce County Medical Society November 14, 1944

The regular meeting of the Pierce County Medical Society was held in the Medical Arts Auditorium on November 14, 1944, with J. W. Gullikson in the chair. Minutes of the previous meeting were read and approved.

Mrs. Miles Parrott, President of the Woman's Auxiliary, introduced Mrs. J. B. Robertson, who spoke in behalf of continued support of Hygeia.

L. A. Hopkins gave a report of a meeting of the War Manpower Commission which he attended, in regard to doctors' certificates of disability and availability on change of work. S. F. Herrmann moved that if an employee requested a certificate of availability from a doctor he was

to be advised to go to the United States Employment agency for a special blank for the doctor to fill out, this blank to be sent to the United States Employment agency for action.

The scientific part of the program was given over to a discussion of Intestinal Obstruction and was opened by a classical paper by J. L. Vadheim, illustrated with several charts. Dr. Herrmann opened the discussion with a consideration of the surgical aspects. Others taking part in the discussion were Drs. Schaeffer, Yoder, Rigos, Joers and Magill.

### In Memoriam

CLAUDE H. KINNEAR, M. D.

On Aug. 9, 1944, death called from our midst one of our oldest and best beloved members, Dr. Claude H. Kinnear. His passing, at the age of 76, was that of a man who had lived a full and useful life. He was loved by his friends and patients and earned the honor and respect of his fellow practitioners.

Born in Lynchburg, Va., he graduated from the University of Virginia in 1883. He came to Tacoma in 1896 and had practiced here until his retirement from active practice three years ago.

He always had a valued part in medical affairs. He was a past president of the Pierce County Medical Society and a past president of Pierce County Tuberculosis Society. In the latter organization he was particularly active and in acknowledgement of his service he was made an honorary member of the Board.

The members of the Pierce County Medical Society feel the loss of a valuable colleague and extend our sincere sympathy to his family.

S. M. M.

### In Memoriam

CHARLES R. MCCREERY, M. D.

When we have lost a friend of many years,  
We often pause and ponder for a while:  
What was there of his memory that en-  
dears,

His faith, his service or his kindly smile.

When one man lives for three score years  
and ten

As Charles did, and busy to the last;  
'Tis proof of trust and love for common  
men,

A privileged mold in which his life was  
cast.

His pride in his profession was sincere,  
Yet with his busy life he did succeed  
In finding time for civic interests here,  
With artistry of music as his creed.

He loved to give a joke or take one too,  
And ever as an equal and a friend;  
His patients and his colleagues found him  
true,

The sort on whom you always can depend.

And that's the way he's lived these many  
years,

It did not matter be it task or fun  
He shared with others in their smiles and  
tears,

His life worth while with his work well  
done.

L. A. H.

# The LIBRARY

MRS. BLANCHE L. DEWITT, *Librarian*

Sometimes it seems as if a medical librarian has to scold about as much as a schoolma'am and with as poor results. Doctors are the finest group in the world (adv.) but some of them do have a very bad habit of borrowing material from the medical library and then keeping it and keeping it and KEEPING it, despite repeated notices, often modestly inked in by the librarian with an appealing "Please!" or a beguiling "Thank you for your cooperation."

If you are one of these dilatory ones, don't be too cast down, for everyone knows you are twice as busy as you ought to be, but won't you take time to hunt up those magazines and books that you borrowed from the library two or three or four or five months ago, or ask your wife or your secretary to do it for you? It's just as easy to do it now as any other time, and we'll have to send you a bill for 'em pretty soon, you know.

It's troubles like this that cause librarians to quit their jobs and take up welding.

☆ ☆ ☆

We have just received a 224-page supplement to the *British Journal of Surgery*, dealing with the use of penicillin in various conditions.

☆ ☆ ☆

## Loeffler's Syndrome — Transitory Lung Infiltration with Eosinophilia

Not long ago the library was asked for material in *Loeffler's Syndrome*. It was interesting to note that this condition had not been described prior to Loeffler's paper in 1932, and one can only speculate as to the number of cases diagnosed as tuberculosis, bronchiectasis, pneumonia and so on previous to that time.

Cardinal points in diagnosis are evidence of pulmonary disease as shown by auscultation and percussion, the X-ray picture, eosinophilia and the transitory nature of the symptoms. Little is known of the pathology, since no fatalities from

(Continued on Page 19)

## Your Hygeia Subscriptions

The time is getting short for sending in your Christmas subscriptions to Hygeia.

Please send your check to Mrs. J. B. Robertson, 301 North J Street, MAin 6481.

If you will mark the check "For Hygeia" no receipt will be necessary.

# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

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Second Vice President.....	Mrs. George H. Smith
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Social.....	Mrs. Carl S. Staats
Publicity.....	Mrs. D. H. Johnson
Hygiene.....	Mrs. J. Benjamin Robertson
Telephone.....	Mrs. G. H. Smith

Additional Committee Chairmen will be announced later.

☆ ☆ ☆

The Auxiliary will hold its December meeting at Dalhem, a luncheon at 12:30 on the 14th.

There will be special Christmas music and Dr. N. E. Magnussen, County Health officer, will be the speaker.

## "HER LAMP GOETH NOT OUT"

Venerable as the cedars of Lebanon, old as the Tigris and Euphrates, so ancient is the story of the keeper of the temple lamps.

Long, long ago in the dim and little-known past stood the great columned temples of early civilization. Into these vaulted stone edifices came man to worship; at first he lighted the cold, dark interiors with huge pine torches planted into the recesses of stone walls, but these smoked and smarted the eyes of the worshippers and soon burned themselves out.

Man then looked for a better light, a clearer, cleaner, longer-burning flame. He took the shallow skulls of dead beasts, the hollow stones of the forest, or crudely fashioned terra cotta of his own making, and filled them with animal oil and laid a wick in the grease and called these bowls lamps. The lamps he suspended on great chains from the vaulted ceilings and gray stone walls of the dismal temple. The keeper of the lamps was a humble and devout worshipper; he cleaned the crude bowls, clipped the charred wicks, and filled the lamps with fresh oil. He took great pride in his task; it was he who with a single lighted taper went from lamp to lamp banishing the dark, chilly shadows of gloom

and bringing cheer and hope to the hearts of the worshippers.

Ages passed and man devised new methods of lighting; he molded his tallow into long thin strips and called them candles, mounting them about his sacred altar. But never did man discard the lamp; he endeavored to improve it; he replaced the crude earthen bowls with glass and crystal, and mounted a glass chimney over the flame. He brought the lamp to the New World and filled it with the crude oil drilled from the earth; he used it in his home, his tavern, and his meeting house; it gave a sure, clear light to these pioneers of a new land, a new faith, and a new freedom.

To me, the doctor's wife is like the keeper of the lamps of long ago; her home has been the temple where her husband might come to rest, to study, and to meditate. Her lamp has been the light of love and understanding, ever burning brighter. When storms of hate, ignorance and ill-will threatened to destroy her husband and subvert his every effort to save suffering humanity, she drew him into the inner room of her sanctuary, where her light burned brightest, and while the mob burned his books, scoffed at his theories, and shunned him as an evil spirit, she sheltered him—banished fear from his soul, and gave him a new courage to meet adversities and a new boldness with which to press his philosophies on a needy, stricken world.

No longer must a doctor hide his light of knowledge; wisdom, education, and tolerance have reached into the uttermost parts of the world. The doctor freely discourses on his newest discovery; eager listeners and earnest colleagues support him in the advancement of his theories. Life has become soft and the road of progress easy; no opposition crosses his pathway or interrupts his years of research. Perhaps now the keeper of the lamp can blow out her flame and place her light upon the shelf of useless things. But wait a moment—you keeper of the lamp of love and hope, don't blow out that

(Continued on Page 19)

# SHADEL SANITARIUM

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1. Interviews with the patient and family at home by specially trained consultants to explain the treatment, determine the adaptability of patient to treatment and admit to sanitarium.
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4. Complete rehabilitation service following the initial treatment with respect to employment, marital relationship, etc.
5. Full year's program of periodic return visits (reinforcements) to the sanitarium to maintain the initial aversion.
6. Complete report of physical and laboratory findings to the family doctor on completion of initial treatment, and report on each subsequent visit.

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## THE HON. WALTER H. JUDD, M. D. —HIS SECOND LOVE

When Walter H. Judd received his M. D. diploma from the University of Nebraska, little did he think that some day he would be diagnosing and attempting to treat the diseases of the body politic. Yet the foreign fields to which his medical training finally sent him destined him to be particularly fitted to assume a position of leadership in a world made more ill than ever by a clashing of oriental and occidental ideologies. One has but to read his statements on the floor of Congress to realize that here is a man who, by his training and experience in the science of medicine, his long residence in the orient and his keen appreciation of human values, can be of great service to America and the world in the present crisis.

Following his graduation, Dr. Judd held a surgery fellowship at Mayo's. Then he spent a dozen years as a medical missionary and hospital superintendent in China. Following experiences at the very battle front in the early days of the Chinese-Japanese phase of the present war, he returned to this country in 1938, spent two years lecturing the country over, pleading for preparedness and a more realistic view of the Japanese menace.

Finally, torn between his fear of Jap aggression and his love of medicine, he entered private practice in Minneapolis. That was in 1941. But his growing alarm at American complacency toward the Jap finally caused him to seek and win a seat in Congress. There, even as late as April 22, 1943, on the revelation of the Jap murder of captured American airmen, he was still pleading for a more realistic view of our Pacific problem. And in February, 1944, to carry

his fight for humanity still farther, with many a cogent argument based on his medical experiences he introduced, later secured the passage of, a resolution directing the president to seek an effective control of the rapidly growing Jap-promoted opium evil.

His career, though hopefully it is far from completed, writes him down as yet another man of medicine, who profitably found himself yet other loves, served well in fields outside the profession for which he trained.

—*Pit-mor-i-an.*

"He who treats himself has a fool for a patient."—*English Proverb.*

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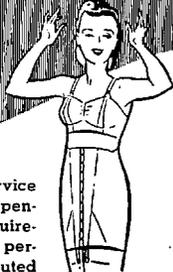
## A Modern Night Before Christmas

'Twas the night before Christmas  
 When all through the flat,  
 Not a creature was stirring—  
 Not even the cat—  
 Above the steam heater the stockings were  
 placed  
 In hopes that by Santa, they soon would be  
 graded.  
 The children were snug in their wee folding  
 beds,  
 While visions of teddy bears danced in their  
 heads  
 And I in pajamas, likewise in a grouch,  
 Got into my patent convertible couch.  
 When out on the asphalt there arose such a  
 clatter,  
 I sprang from my bed to see what was the  
 matter.  
 The street light shone bright on our new gar-  
 bage can  
 Awaiting the call of the D. S. C. man.  
 When what did my wondering optics devour,  
 But a big touring car of a hundred horse-power,  
 And a business-like chauffeur so shiny and slick  
 I knew in a moment it wasn't St. Nick.  
 But I drew in my head and was turning around,  
 When in through the air shaft he came with a  
 bound.  
 He was dressed all in broadcloth, the finest I've  
 seen,  
 Though it smelled rather strongly of fresh gaso-  
 line.  
 A fresh Perfecto he held in his teeth

And the smoke crowned his ten dollar hat like  
 a wreath.  
 He said not a word, but the foxy old elf  
 Just walked to the mantel and laid on the shelf  
 A letter, typewritten in business-like style,  
 Then down the dumb waiter he rushed with a  
 smile.  
 He jumped in his car and with three loud  
 honk honks!  
 He sped round the corner and off toward the  
 Bronx.  
 I walked to the mantel—the letter I read.  
 Then I got silently back into bed.  
 For here's what I read with dismay and disgust,  
 "Retired from business . . . sold out to the Trust."  
 —*Anonymous, from Bulletin,*  
*Oklahoma County Medical Society.*

War news is bad these days. We learn that  
 the Japs have taken Sala Epatica.

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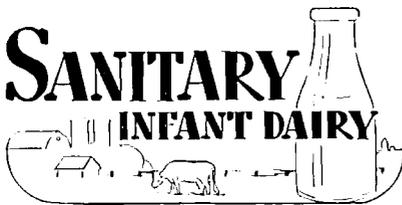


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Should the A. M. A. lose its case before the Supreme Court of Illinois, it may prove to be a blessing in disguise, at least in the opinion of those who are urging more militant action by the Association on economic matters.

The case in question arose out of the discharge of an A. M. A. pressroom employee. The employee had been working but six months when laid off. He applied for the State of Illinois unemployment compensation, but on the ground that the A. M. A. is a scientific organization and is exempt from unemployment insurance taxes, he was refused full benefits and told he could only receive half benefits. Several rulings for and against the A. M. A. followed until now an appeal from an adverse decision handed down by the Circuit Court in Chicago has been brought before the Illinois Supreme Court by the A. M. A. Should the decision of the lower court be sustained, the A. M. A. may be the loser to the amount of \$350,000 to \$500,000.

The Supreme Court of the United States placed the A. M. A. in the business category by its decision in the famous Washington case, stating that the A. M. A. had acted in restraint of trade. The *Norfolk Medical News* previously pointed out that if medicine is to be treated as a business, it might as well adopt business methods. Our organization can't play ball under obsolete rules. Let the A. M. A. change its set-up and ring up the curtain on its new role in an altered economy.

—*Norfolk Medical News.*

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Diphtheria .....	2
German Measles .....	10
Gonorrhoea .....	32
Measles .....	9
Mumps .....	48
Rheumatic Fever .....	1
Scarlet Fever .....	6
Syphilis .....	11
Tuberculosis .....	2
Typhoid Fever .....	2
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## WILL RUSSIAN MEDICINE TURN THE TRICK?

Russia, with a population of approximately 170 million, now has 150,000 doctors, as compared with our 120,000 active practitioners for 130 million people. In addition, Russia has 300,000 trained medical aides (feldshers), midwives and nurses. Some 800,000 hospital beds are available in Russia; in the United States in 1941 there were 1,324,381. The sixty medical schools in Russia are comparable in quality to our seventy-seven Grade A schools. Medical school tuition in Russia is free and all living needs are provided the students, who after graduation are sent into rural communities to practice for three years. At the end of that period they are free to select a location for carrying on their profession, but there is no "private" practice as we know it in the United States. All doctors are employees of the state. They are free, however, to specialize if they choose, or devote themselves to research in connection with or independent of their regular work. The effectiveness of Russia's system of training doctors is evidenced by the contributions now being made by her physicians in the art and science of medicine; these are no less than the gigantic efforts of their countrymen in waging and winning World War II. A physician's average yearly salary is between \$1500 and \$3500 which is a more than adequate income in Russia. In addition, each doctor receives an annual four weeks' vacation with pay, three months' postgraduate work at Government expense every three years, and like other citizens of Russia, is eligible for sick benefits and old age pensions.

Such facts as these, seeping gradually into the minds of the American public through their reiteration in one form or another in our newspapers and magazines, will undoubtedly prove influential in preparing the soil for the ultimate acceptance of some measure of socialization in American medicine. The best move that organized medicine can make right now, if it is concerned with the perpetuation of the American policy of free enterprise, is to take the lead in a sincere effort at real democratization within its own field, starting with the schools and hospitals.

—*Norfolk Medical News.*

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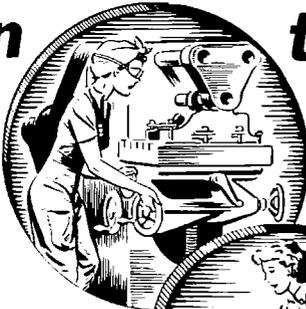


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## THE LIBRARY

(Continued from Page 6)

the disease have occurred in over 100 cases reported in the literature. Patients complain of a metallic taste, cough, wheezing and malaise, with possibly a slight elevation of temperature. Symptoms are mild as compared with the appearance of the lungs as shown in the roentgenogram.

The etiology is unknown, though there is much evidence that the condition is allergic in nature. One writer suggests a possible association with Brucellosis, while another reports the presence of amebiasis in a patient, still another coccidiomycosis and another ascariasis.

Though its course is mild, from the standpoint of mistaken diagnosis and prognosis it is important to recognize this condition as a clinical entity.

The medical library offers the following articles to those interested:

Eosinophilic infiltration of the lungs (Loeffler's syndrome) S. H. Jones; *New England Journal of Medicine* 231:356-358, September 7, 1944.

Transient pulmonary infiltrations, Amanda Hoff; *American Review of Tuberculosis* 45:194-199, February, 1942.

Transitory pulmonary infiltrations mistaken for tuberculosis, with a report of five cases, A. A. Karan; *Annals of Internal Medicine* 17:106-124, July, 1942.

Transitory lung infiltrations associated with eosinophilia, C. S. Barker; *Canadian Medical Association Journal* 40:494-495, May, 1939.

Transitory infiltration of the lung with eosinophilia, R. Freund; *Archives of Internal Medicine* 66:1215-1220, December, 1940.

Mrs. Burton: I never saw anybody as shiftless as our new neighbors.

Mr. B.: How do you know they are shiftless?

Mrs. B.: Because every time I run over to borrow something, they haven't got it.

## "Her Lamp Goeth Not Out"

(Continued from Page 7)

flame—trim the wick once more, clean the chimney, and fill the bowl with purer oil, for a world is at war and sin, sorrow, and death are rampant everywhere. Civilization needs your light as never before. Your doctor-husband fearlessly in years gone by fought hidden death in germs and fever, but now he faces a hideous living death in roaring planes, shrieking shells, and rumbling tanks. Across the battlefields he crawls, dragging the wounded to safety and binding up the broken body. He is able to carry on day after day in this hell on earth only because he knows that back home you are keeping the light of hope, faith, and lasting victory burning in your heart. Yours is the duty now to keep your lamp so clean and bright that every dark corner will be illuminated by its perfect light, scattering the sinister creatures that would dare destroy the ideals your soldier-husband is fighting to preserve.

Yes, "her lamp goeth not out" but shineth into the uttermost parts of the world, keeping medicine ever on the march unhampered by the will of evil men.

—*Pennsylvania Medical Journal.*

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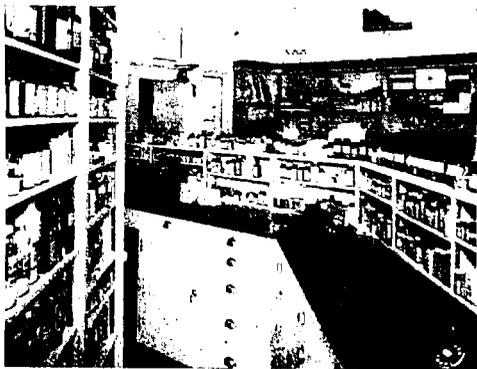
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