

*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 5

TACOMA, WASH.

JANUARY - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1951

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 President-Elect ..... W. H. Goering  
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## Meeting of the Pierce County Medical Society

Tuesday, January 8, 1952

MEDICAL ARTS AUDITORIUM

8:15 P. M.

## Program

### SYMPOSIUM ON PEDIATRIC EMERGENCIES

DR. HOMER CLAY  
Moderator

LT. WARREN BIERMAN  
Poisonings

DR. GEORGE KITTREDGE  
Recessitative Processes

DR. DAVID HELLYER  
Surgical Emergencies

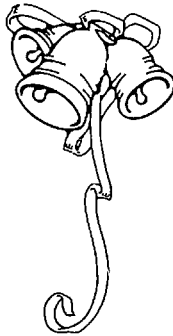
DR. CHARLES KEMP  
Head Injuries

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

With this issue we welcome Dr. William H. Goering as the new president of the Pierce County Medical Society. As managing editor it is my privilege to write the first President's Page for Dr. Goering as his new duties have left him no time for this less important but no less onerous task. He asked me to wish all of you a very prosperous and happy New Year, and to express the desire that all the members of the Society will continue their very amicable relationship with each other as they have in the past. He pledges his earnest endeavor for the good of the Society, and hopes that he may rely on the cooperation of all of its members.

The Managing Editor.



**pains**  
*of angina pectoris*  
*and other vascular spasms are*  
**preventable**  
*with*

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Useful both as a vasodilator and as an antispasmodic, 'Paveril Phosphate' (Dioxyline Phosphate, Lilly) is especially valuable in the control of angina pectoris, coronary occlusion, and peripheral or pulmonary embolism. 'Paveril Phosphate' has even a wider margin of safety and still greater freedom from side-effects than papaverine, which it resembles therapeutically. Furthermore, since it does not cause addiction and is not a constituent of opium, this useful synthetic may be obtained conveniently without the bother of narcotic forms. Supplied in tablets, 1 1/2 grains (0.1 Gm.) and 3 grains (0.2 Gm.).

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## ***Editorially Speaking . . .***

Most forms of social collaboration are undergoing changes constantly. A great deal of human effort goes into the examination of these matters in the hope that the changes may be modified purposefully and, of course, more generally beneficially. In the logical rational examination of these matters, a point of major importance is often overlooked. This point is, that facts, of themselves, prove nothing beyond the existence of the fact. It rarely happens that discussions of this kind use the above statement as a ground rule for argument. The usual pattern is for discussants to adopt some fact and use it because it appears to them to support a political faith to which they are already committed. This rather universal human tendency helps us see how the agitator can use facts to feed the fires of class struggle.

My wife is an elementary school counsellor, and receives the standard rate of pay for school teachers in this district. My income from the practice of medicine is greater than that. These are two facts. The interpretations possible are many. I shall give a few, but, in this piece, I am supporting none.

"A physician performs a more socially significant service and should be better paid." "Physicians are taking advantage of a monopoly and overcharging the public, and their incomes should be regulated in the public interest as are those of school teachers." "The importance to the coming generations of adequate salaries for school teachers has never been realized." Interpretations of these facts in relation to each other and the general social scene may be carried on ad infinitum. In such discussions much real truth will develop along with a powerful volume of political hokum.

The distribution of medical care is an extremely important area of social collaboration. There is available a tremendous volume of facts regarding the distribution of medical care. There is available to the general public a relatively small amount of rational interpretation of these facts. There is available to the public a tremendous amount of irrational interpretation. Much of the latter has been generated by individuals whose motives cannot be condemned. In the social field, facts, of themselves, prove nothing but the facts. Their rational interpretation and only that, can give us the ability to purposefully improve our situation.

HOMER W. HUMISTON, M.D.

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<b>TRI-VI-SOL</b> each 0.6 cc. supplies	5000 units	1000 units	50 mg.			
<b>CE-VI-SOL</b> each 0.5 cc. supplies			50 mg.			

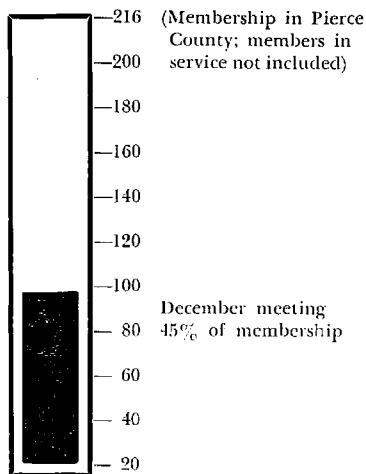
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## ATTENDANCE THERMOMETER!



## MEDICAL VERSION OF TATOING USED ON PATIENTS

The following is from *The Star*, a valiant little periodical devoted to a struggle to enlighten the world that Hansen's Disease (leprosy) is not the horrible, contagious disease that legend has made it. It is published at Carville, Louisiana, where the national Leprosarium is located.

For the first time in medical history, the scientific use of tattooing (intra-dermal artificial pigment.) has been tried on patients with Hansen's disease. The trials took place in this hospital in October, and the man behind the needle was a sculptor of national prominence, Sgt. Antonio Cortizas of the Armed Forces Institute of Pathology, Washington, D.C. Sgt. Cortizas spent a week in Carville on a special assignment by arrangement with the Army and U. S. Public Health Service.

The scientific method of tattooing is accomplished by mixing color to the exact tone of the normal skin. The art has been used in the Army as a last step in plastic surgery or it can be done on non-surgical cases. "For instance," said Sgt. Cortizas, "Lips which have been rebuilt through skin graft can be reddened by the process eyebrows 'dotted' in, and even minute spotmatching whiskers can be implanted. Bleached or discolored iris can be colored with pigment."

At Carville, Sgt. Cortizas worked on a small group of volunteer patients. His exploratory work here indicates that intra-dermal artificial pigments might offer promise in restoring normal appearance to those patients carrying scars of HD. These patients came to Carville before the introduction of the new sulfone drugs. Dr. Fredrick A. Johansen, Carville Chief, and Dr. Waldemar Metz, New Orleans, consultant in plastic surgery and other staff members of this hospital observed the trials with interest. Present plans call for Sgt. Cortizas

to return here in December, for further experimental work.

Former head of the Department of Sculpture, Swarthmore College, Swarthmore, Pa., Sgt. Cortizas was one of the first members of the Medical Art Dept. of the U. S. Army which he entered in 1943. About that time the Army developed a need for the medical version of tattooing and Sgt. Cortizas was selected to apply it because of his artistic abilities, although he said, "I didn't know anything about tattooing then." Army doctors have commended his work on battle scarred veterans and in 1946, Sgt. Cortizas was awarded the Medal of Distinguished Achievement by the Philadelphia Art Alliance, for his advancement of Creative Art in the Philadelphia metropolitan area.

## 1952 POSTGRADUATE COURSE IN OPHTHALMIC PATHOLOGY

A postgraduate course in Ophthalmic Pathology will be given by Dr. Frank Counsel Winter in ten three hour sessions, afternoons and evenings, during the week beginning Monday, February 11, 1952, and ending Friday, February 15, 1952. Each session consists of one hour of lecture and kodachrome and microscopic slide demonstrations and two hours of individual microscopic work. Each student is supplied with a set of teaching slides, a slide manual, giving the history, gross and microscopic descriptions of each case, and a syllabus of Ophthalmic Pathology covering the material in each session. The slides and slide manual are to be returned at the end of the course. Although microscopes are available, those who own their own microscopes are urged to bring them.

### Monday, February 11

**Afternoon:** Normal histology, growth and aging  
**Evening:** Embryology and developmental anomalies

### Tuesday, February 12

**Afternoon:** Inflammation, injuries and wound healing  
**Evening:** Surgical pathology and external diseases

### Wednesday, February 13

**Afternoon:** Uveitis  
**Evening:** Cataract

### Thursday, February 14

**Afternoon:** Glaucoma  
**Evening:** Vascular lesions and retinopathies

### Friday, February 15

**Afternoon:** Tumors (extraocular)  
**Evening:** Tumors: (intraocular)

A fee of fifty dollars is asked of each registrant excepting residents in training. The group is limited to twenty students. All inquiries, applications for registration and checks are to be mailed to:

Office of the Dean  
Stanford University School of Medicine  
2398 Sacramento Street  
San Francisco 15, California.

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When prescribing Ergoapiol (Smith) with Savin for your gynecologic patients, you have the assurance that it can be obtained only on a written prescription, since this is the only manner in which this ethical preparation can be legally dispensed by the pharmacist. The dispensing of this **uterine tonic**, time-tested ERGOAPIOL (Smith) WITH SAVIN—only on your prescription—serves the best interests of physician and patient.

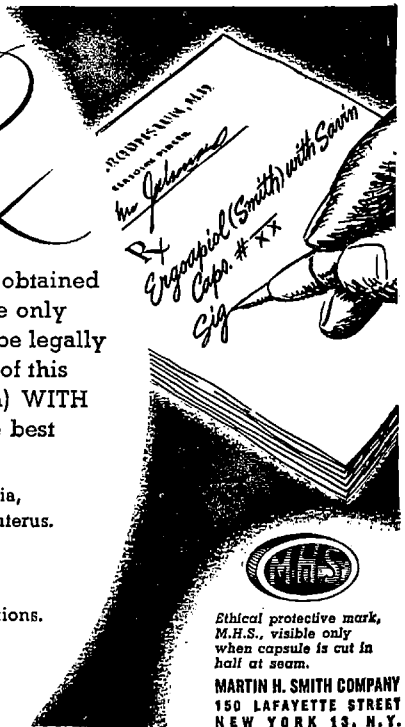
**INDICATIONS:** Amenorrhea, Dysmenorrhea, Menorrhagia, Metrorrhagia, and to aid involution of the postpartum uterus.

**GENERAL DOSAGE:** One to two capsules, three to four times daily—as indications warrant.

In ethical packages of 20 capsules each, bearing no directions.

*Literature Available to Physicians Only.*

**ERGOAPIOL** (SMITH)  
WITH **SAVIN**





# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

The student nurses of the Tacoma General and St. Joseph's Hospital, with all their vim and vigor, enjoyed their Christmas ice skating party. The auxiliary was happy to do this for the nurses.

\* \* \*

Lorraine Kunz, Kay Wright and Helen Florence had an enjoyable but cold shopping tour in Los Angeles while their husbands attended the Medical convention. The Kunzs and Florences also went to Palm Springs for a few days.

\* \* \*

We are all very sorry to hear of the illness of Jeanne Judd, our secretary. Sheila Brown has been appointed to take over Jeanne's duties as secretary. Obey the doctor and get well real soon, Jeanne.

\* \* \*

Louie and Reg Govan have a new adopted boy in their family. They have named him Gordon William. The Govans are now in Palm Beach, Florida, to spend the holidays with Louie's family.

\* \* \*

A daughter, Eleanor Margaret, was born to Dr. and Mrs. James Shanklin on November 18th.

\* \* \*

Their first baby, a boy, was born to Dr. and Mrs. Robert Everett.

\* \* \*

Dr. and Mrs. A. H. Buis are spending the winter down south.

\* \* \*

Many families are welcoming their children home from different parts of the country for the holidays:

Merle and Sig Herrmann have their daughter and her family from Detroit;

Dr. and Mrs. Dayton's daughter and family are here from Minneapolis;

Helen and Leo Scheckner's daughter is home from Colorado;

Jess and Dottie Read's daughter, and John and Florence Gullikson's son are home from Washington State.

\* \* \*

Congratulations go to Edith Magill for the wonderful job she is doing teaching swimming to the spastic children.

\* \* \*

Fay and Marjorie Nace are getting settled in their new home.

\* \* \*

The Blood Bank is very much in need of more volunteers. Any one who would like to do volunteer work would you please call Dorothy Maier at BRoadway 5216?

\* \* \*

Our many thanks go to the following who worked last month: Anita Parrott, Jean Bowers,

## OFFICERS FOR 1951-1952

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Aleva Jones, Marjorie Wicks, Evelyn Hardgrove, Bess Pratt and Dorothy Maier.

## THE MOST ORDINARY

There are too many ordinary men in professions. They look away when the conversation turns to literature, science or art.

It is sad when a doctor sees nothing more than technical perfection in a Millet. If he never pauses when a languid morning throws shadows across the harvest field. If he doesn't hear the plaintive loon, nor scent a rose. If he never gazes at lambent northern lights, merged like million chameleons. Lights that fade like shrouds in evening mists or strike in flashes. If he doesn't want to weep when misty drops touch the pillow in a public ward. Drops that crystallize the tragedy of failure of simple souls. If he doesn't respond to these, he should be in a laboratory searching only for accumulation of knowledge.

There must be a place for ordinary men. There are so many millions. Aristotle mentioned them. Their place is not in medicine.

—James B. McClinton, "The Doctor's Own Convention"

"Your son is making good progress with his violin," remarked a musician friend of the family. "He is beginning to play quite well."

"Do you really think so?" beamed the father. "We were afraid that we merely had become used to it."

Time Tested Dependability

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(In Charge of Casualty Insurance and Bonds)

E. J. POLE, Secretary  
(In charge of Marine Insurance)

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**New Address — 942 Pacific Avenue**

Service to the Medical Profession and  
their patients for 44 years.

We dispense only the finest of  
Pharmaceuticals.

## THE STORY OF THE BULLETIN

Back in the early days of the depression the *Bulletin* became an actuality; number one of volume one was printed in January, 1931, with Dr. W. G. Cameron as its editor. The magazine was smaller then, with fewer pages and printed on a paper closely resembling newsprint. It carried two and a half pages of advertisements for its sixteen pages from cover to cover. Dr. Cameron was the editor from the *Bulletin's* beginning to the day of his death in November 1940. He had seen it struggle from being a baby in the field of County Medical Society Bulletins to an impressive representative well able to hold its own as an important publication.

After Dr. Cameron's death, Dr. C. F. Engles became editor. He held this office from November 1940 until May 1944 when Dr. L. A. Hopkins took over. Two years later, Dr. Cameron's son, Dr. W. C. Cameron became editor for the next year. Dr. Hopkins became editor again and remained in this capacity until September 1951.

In March of 1938 color was added to the cover of the *Bulletin* and each month a different color made its appearance. It seems to have been a vogue that is with us no longer as solid color on the cover of a *Bulletin* is seldom seen. In 1932 Mead Johnson became an advertiser in the *Bulletin* and has remained with us ever since. Martin H. Smith (Glykeron and Ergopioli) is another constant advertiser, having been with us since 1934. It was in September of 1947 that the *Bulletin* began to use the outstanding cover that has caused much comment in the field of County Bulletins. We are extremely grateful to Harry Boersig of the Aero-Marine Photo Service for the photograph, and to Dammeier Printing Company for the engraving. The beautiful cover that we have at present is unmatched on any County *Bulletin* in the country, and we are justifiably proud of it.

The *Bulletin* today carries thirty-two pages with seventeen pages of advertising. Every effort has been made to maintain the quality that has prevailed under the management of previous editors, and no little time has been spent in an attempt to increase the amount of advertising as well. Due to a somewhat arbitrary rate schedule in the past, the *Bulletin* has never paid its way, but a reorganization of rates has been made, and in 1952 this situation will be rectified. In a few instances, rates have been lowered, but, unfortunately, most have had to be raised. We have had a few cancellations, but for the most part, our advertisers have joyfully signified their intention of continuing their ads so that we, too, may be able to break even at the end of the year. Even though the jump in rates has been, in some cases, extreme, we are still selling space at less than any of the other comparable County Bulletins that we have contacted. However, our intention is not to show a profit; our rates were computed so that the *Bulletin* may pay its own way and stop being a drain on the Society.

## NOTES FROM DEPT. OF HEALTH TACOMA PUBLIC SCHOOLS

Delegates to the Washington Health, Physical Education and Recreation Convention met in the Medical Arts Building Auditorium on the afternoon of Friday, November 16th.

The program was furnished by Dr. Frank Madison who discussed "Rheumatic Heart Disease in School Children," and by Dr. Ralph Huff whose topic was "Congenital Heart Disease in School Children."

The auditorium was more than filled by an interested audience. Both speakers presented their subjects in a highly capable manner, and we have received many enthusiastic comments from listeners.

This sort of service is immensely valuable in furnishing factual information to people who can use it, and also, it is the very best of "Public Relations" for the medical profession. We believe we are justly proud of these speakers.

On Monday, December 10th, Dr. William Goering was the speaker for our Health Education Forum in the Central School Auditorium. His Subject was "Orthopedic Conditions in School Children." This audience was largely made up of physical education teachers, nurses, and a few class room teachers.

Dr. Goering limited his talk to those conditions in children which would be of interest to the audience present. His talk was presented informally, but skillfully, and will enable physical education teachers to recognize crippling conditions in school children and bring them to the attention of the parents.

We wish to thank the medical profession for giving their time and knowledge to help us present these Health Education Forums.

We also want to express our gratitude to the School Health Advisory Committee of the Medical Society, consisting of Drs. Norton, Judd, and O'Leary. Such a committee is valuable to this department in providing a means of immediate contact on many problems, thus giving us constructive aid and advice, but also, in preventing misunderstandings. We hope the incoming administration will continue this service.

A little flattery now and then makes husbands out of single men.

## Ghilarducci's Florists

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909 Pacific Ave. BRoadway 3277

**Taxicabs - Ambulances  
for your Patients**

ALL AMBULANCES ARE OXYGEN-EQUIPPED

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MAin 1121

BR. 8383

**BRALEY'S, Inc.**

PRESCRIPTION DRUGGISTS

*Catering to the Doctor and  
his Patient*

Free Delivery

Medical Arts Building  
MAin 8116

# The Hospitals . . .

## ST. JOSEPH'S

Sisters Walberta and Sylvina were at Baker, Oregon, on December 21st, to be present at the Solemn Requiem Funeral Mass for Sister Mary Patrick, O.S.F., revered former director of the School of Nursing, from 1918 until until 1933. Until the time of her sudden death, she was administrator of Saint Elizabeth's Hospital located in Baker, Oregon.

\* \* \*

More than six-score medical men were in attendance at the Doctors' Annual Banquet served in the hospital cafeteria on Monday evening, December 17th.

Much of importance was accomplished, including the election of staff officers for 1952; as follows:

President.....Doctor Govnor Teats  
Vice-President.....Doctor Bernard Ootkin  
Secretary-Treas.....Doctor F. W. Hennings

Recent appointments made by the administration, to the governing board are Doctors Murry L. Johnson and Herbert H. Meier. Also, at this time the administration wishes to express its heartfelt gratitude to those loyal and diligent officers and members of the board during 1951 whose faithful service to the hospital made a successful year possible.

There will be a resumption of the monthly staff meetings beginning on the third Monday of each month at 6:15 p.m.

\* \* \*

It is with mixed emotions of gratitude to divine providence and to medical skill, we take the liberty of remarking that at this point, our "Heart Baby" seems to be improving daily. The maternity department is flushed with pride these days, having shared the honors of ushering into the world, two sets of twins during the month of December.

\* \* \*

Doctor Howard Pratt was elected treasurer of the Washington State Society of Anesthetologists at a recent meeting held in Tacoma.

\* \* \*

Rouhollah Amir Rouhi, M.D., first year surgery resident from Iran, was invited to attend the "Seventh Annual International Banquet" presented by the University of Washington at Eagleson Hall, on Tuesday, November 20th, under the joint sponsorship of the YWCA and YMCA respectively.

Representative students from thirteen countries participated in costume, and engaged in the singing and dancing of their native lands as the main feature of the program, and Doctor Rouhi enjoyed renewing the friendships of the five representing his own, Iran. In conclusion, the several hundred students engaged in a community song, the theme of which accented the vital importance of a National Unity guided by the Supreme Being.

\* \* \*

There was "Music in the Air" preceding the holidays, at the hospital. Volunteer choral groups

from several sources presented Christmas music for the benefit of the patients and others fortunate enough to be within hearing distance.

\* \* \*

A gay Christmas party given by Sister Valeria, was enjoyed by the children of the doctors now serving their internships and residencies at the hospital. Delightful gifts were given them by a real-life Santa Claus (Doctor Donald F. Cummings—a natural) after which there was feasting from the festive board provided for the happy occasion.

The following young ones were the guests of the Sisters: Russell, Timmy and Jimmy Benedict; Mary Ann Cummings; Kendra and Kent Erickson; Celia Shay; Chrissy and Kathy Sobba; and Tommy and Joan Vimont.

\* \* \*

That each and every one of you may share in a New Year spiritually rich with the satisfaction of accomplishment in your estimable profession is the fervent wish of Sister Valeria and of all the Sisters of Saint Joseph's Hospital.

## PIERCE COUNTY

A seven pound six ounce boy was born to Dr. and Mrs. John L. Whitaker on Thursday, December 13, 1951. The new arrival will be named William L. Whitaker and will be welcomed by his two sisters, Jacqueline and Nancy and by a brother, Robert. Dr. Whitaker is Pathologist at the Pierce County Hospital.

Dr. Dorothy Munce is spending a sunny holiday in Honolulu. With our forecast for snow, a plane trip to the Islands seems a perfect prescription.

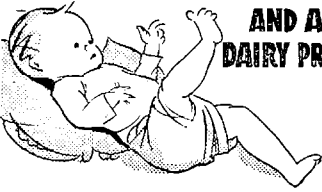
The County Hospital celebrated Christmas by an employees' party Friday afternoon, December 21st, in the library and the shop. The rooms were transformed with green boughs and bright decorations, and we are proud of the good cooks from all departments as evidenced by table after table of delicacies confectioned by the employees themselves. A further note of holiday cheer was provided by Dr. Brady's Nicolodian with all of the favorite Christmas records. Everybody enjoyed the party so much that it is hoped it will become an annual event.

## IS THIS PROGRESS?

The story of the creation of the world is told in Genesis in 400 words. The world's greatest moral code, the Ten Commandments, contains only 279 words. Lincoln's Gettysburg Address is but 266 words in length. The Declaration of Independence required only 1,321 words to set up a new concept of freedom. The Office of Price Administration uses 2,500 words to announce a reduction in the price of cabbage seed.

—From *The Journal of the Indiana State Medical Association*.

**MILK**  
AND ALL  
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Careful Mothers use Protected Milk. Pasteurized and Homogenized Milk from our own contented cows can be delivered to your home or your grocer



A Favorite Dairy for over 30 years. Recommended by doctors and dietitians.

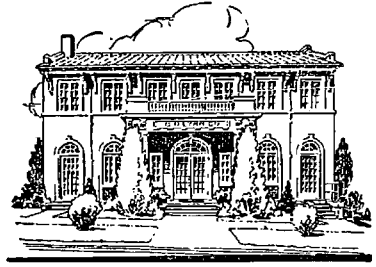


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## FINDING THE DIABETIC IN YOUR COMMUNITY

1. What can I do, as a physician, to aid the Diabetes Detection program.

### TEST:

Your own urine today.

Each member of your family.

Every patient—routinely.

Urine tests always should be made within one to three hours after a meal—preferably 90 minutes. Follow every positive urine test with a blood sugar determination.

2. As a member of the medical profession, how can I cooperate in a Diabetes Detection Drive?

### OFFER YOUR ASSISTANCE:

If there is an affiliate unit of the American Diabetes Association in your area.

If there is a Committee on Diabetes of your State or County Medical Society.

3. If a Diabetes Detection program is not set up, what immediate steps can I take?

Urge your Medical Society officers and colleagues to form Committee on Diabetes.

Help find the unknown diabetic by testing every patient routinely.

4. In planning a Diabetes Detection Drive, should an attempt be made to cover the entire community population?

YES! Anyone may develop diabetes. To secure personal protection against preventable ill health, it is sound and feasible to promote the policy of **TESTING EVERYONE EVERY YEAR.**

5. What methods are suggested for mass surveys?

The American Diabetes Association recommends that detection programs be organized with the cooperation and participation of County and State Medical Societies.

In past surveys, urine tests have been made by Benedict's method, Clinitest or Galatest. The latter are simple and time-saving means of testing for glycosuria. The reagents, however, must be fresh to give dependable results. Doubtful tests should be checked with Benedict's solution. Standard blood sugar techniques, as the Folin-Wu or Somogyi procedures, should be used for follow-up tests.

A recent blood sugar test for mass screening has been introduced by Wilkerson and Heltmann.\* This test also enables any physicians or technician

to screen for diabetes in the office or home. It does not show the exact level of blood sugar, but indicates levels that are either abnormally high or low. The diagnosis of diabetes cannot be made by this test alone. High levels should be verified by one of the standard blood sugar procedures.

The principle of self-testing for glycosuria was approved by the Council of the American Diabetes Association June 5, 1949, and by the House of Delegates, American Medical Association, June 28, 1950. Many State and County Medical Societies have already taken similar action. Self-testing units contain directions for use and instructions to report all positive findings to family physicians for confirmatory diagnosis.

By way of caution, some mild cases of diabetes may not be discovered on initial examination unless:

A test is made one to three hours after a full meal—preferably 90 minutes.

A blood sugar test is made in addition to the urinalysis.

6. What symptoms suggest early diabetes?

Loss of weight and strength in spite of good appetite.

Increase in thirst.

Frequent urination.

Itching.

Pains in the extremities.

Changing vision.

DON'T wait for the typical symptoms of diabetes. Early detection of diabetes can be made with certainty only by laboratory tests of the urine and blood.

7. Who is most likely to have hidden diabetes?

Relatives of diabetics.

Obese persons.

Those over 40.

Individuals who feel "below par."

Patients recovering from acute illnesses.

BUT—diabetes has no exclusive regard for race, age, sex, weight or previous state of health. It may *strike* anyone. It may *strike* you.

8. What is the most effective way to test for diabetes?

The most accurate method of screening for diabetes is to test both urine and blood. The simplest method is urinalysis and confirmation of positive findings by blood sugar determinations.

9. What laboratory findings indicate the presence of diabetes with a high degree of probability?

The presence of any amount of glucose in the urine, accompanied by blood sugar values\* *above* the following levels:

A. Venous blood sugar:

1. Folin-Wu method — over 130 fasting, over 200 after eating.

2. Somogyi method, or other methods for true glucose value—over 110 fasting, over 150 after eating.

B. Capillary blood sugar:

1. Folin-Malmros method — over 140 fasting, over 240 after eating.

(Continued on Page 17)

"Glasses as your eye  
physician prescribes them"

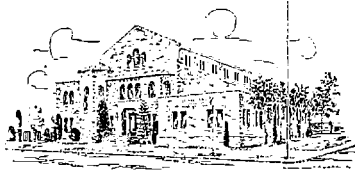
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(Continued from Page 15)

2. True glucose value methods—over 120 fasting, over 200 after eating.

If laboratory reports are near these values or if there are complicating illnesses (such as hyperthyroidism), verification should be made by repeated blood sugar tests, or glucose tolerance determinations subsequent to three days of normal diet, including a daily minimum of 250 grams of carbohydrate. In cases of complicating illness confirmation tests should not be performed until after the illness has subsided.

The diagnosis of diabetes should *not* be made on basis of only one blood sugar determination.

10. What laboratory findings indicate the absence of diabetes with a high degree of probability?

Venous or capillary blood sugar findings *below* the following levels: Folin-Wu (venous or capillary) or similar method, below 120. Smogyi (venous or capillary) or similar true glucose methods below 90.

These tests should be made 30 to 90 minutes after a meal with the normal carbohydrates content and without previous dietary restriction.

\*All blood sugar values are expressed in mg. per 100 cc. blood.

## SENATOR WARNS DOCTORS AGAINST COMPLACENCY

It's tragic but true that most doctors refuse to become steamed up about an issue unless it specifically affects medicine, says Senator Richard H. Nixon (Rep. Calif.). Yet, reasons the Senator, there are two good reasons why they should take a continuing interest in politics:

**THEY OWE IT TO THEMSELVES:** "An attempt to socialize any American institution or profession is a threat to all. By defeating such programs doctors will be taking effective action to save their own profession."

**THEY OWE IT TO THE NATION:** "The character and quality of public servants is equal to the interest of the electorate. Since the medical profession represents one of the highest standards of intelligence in the country, it should give the nation the benefit of this intelligence to get the right people to represent us in the national capital."

Senator Nixon feels that the majority of people now are convinced that Government medicine doesn't work. But, he warns, physicians better not "take a smug and complacent attitude. The political climate can change quickly. If we have a shift to the left, those who favor compulsory health insurance will be back at the old stand."

In carrying out their political action, says the Senator, doctors should remember two basic rules: (1) A good offense is the best defense; and (2) actions speak louder than words. As a good example of such actions, he cites the voluntary contributions doctors are making to medical schools.

## MEDICAL RESEARCH FELLOWSHIPS OFFERED BY NATIONAL SCIENCE FOUNDATION

National Science Foundation's first group of about 400 graduate fellowships includes an undetermined number of awards in medical research. Foundation states that while no awards will be made for study in clinical medicine, *it will consider applications from medical students preparing for careers in medical research.* Fellowships also are being offered in the physical, mathematical, biological and engineering sciences, all for the academic year of 1952-53. Fellowship allowances range from \$1,400 to \$3,000 a year, plus allowances for wives and children, normal tuition, laboratory fees and travel costs.

Application forms are available from Fellowship Office, National Research Council, Washington 25, D. C. They must be returned by January 7, 1952. Loyalty oath required under National Science Foundation Act must be included with application.

Officials explain Foundation has set no quotas for various categories of fellowships. Determination will be made on basis of total applications received plus qualifications and abilities of candidates. Similarly, Foundation is holding up establishing exact fields in medical research, until all returns are in. Majority of fellowships will be given to predoctoral applicants, with emphasis on those eligible to begin graduate study during coming year. Fellows will be selected on basis of *scientific aptitude tests*, academic records and recommendations on candidate's abilities. National Research Council will conduct tests, while National Science Board of the Foundation will make final selection.

## FELLOWSHIP DUES DISCONTINUED

Meeting at A.M.A. Chicago headquarters recently, the Board of Trustees decided there would be no Fellowship dues for 1952. The dues, the Board felt, are no longer required since A.M.A. members are now paying membership dues and, furthermore, the Fellowship dues requirements were too confusing to members as a whole. Fellowship dues of \$5.00 for 1951 are still payable.

Judge (to prisoner aged sixty): The sentence is thirty years penal servitude.

Prisoner (in tears): Your honor, I shall not live long enough to serve the sentence.

Judge (in kindly tone): Don't worry, do what you can.

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## MEDICAL EVALUATION IN 1789

The following excerpts are from a lecture delivered by Dr. Benjamin Rush at the University of Pennsylvania, February 7, 1789. The title of the lecture is "Observations on the Duties of a Physician and the Methods of Improving Medicine."

"When we consider the expense of a medical education and the sacrifices a physician is obliged to make of ease, society, and even health, to his profession; and when we add to these the constant and painful anxiety which is connected with the important charge of the lives of our fellow-creatures, and, above all, the inestimable value of that blessing which is the object of his services, I hardly know how it is possible for a patient sufficiently and justly to reward his physician. But when we consider, on the other hand, that sickness deprives men of the means of acquiring money; that it increases all the expenses of living; and that high charges often drive patients from regular-bred physicians to quacks; I say, when we attend to these considerations, we should make our charges as moderate as possible, and conform them to the following state of things.

"Avoid measuring your services to your patients by scruples, drachms, and ounces. It is an illiberal mode of charging. On the contrary, let the number and *time* of your visits, the nature of your patient's disease, and his rank in his family or society, determine the figures in your accounts. It is certainly just, to charge more for curing an apoplexy, than an intermitting fever. It is equally just, to demand more for risking your life by visiting a patient in a contagious fever, than for curing a pleurisy. You have likewise a right to be paid for your anxiety. Charge the same services, therefore, higher, to the master or mistress of a family, or to an only son or daughter, who call forth all your feelings and industry, than to less important members of a family and of society. If a rich man demands more frequent visits than are necessary, and if he impose the restraints of keeping to hours, by calling in other physicians to consult with you upon every trifling occasion, it will be just to make him pay accordingly for it. As this mode of charging is strictly agreeable to reason and equity, it seldom fails of according with the reason and sense of equity of our patients. Accounts made out upon these principles are seldom complained of by them. I shall only remark further upon this subject, that the sooner you send in your accounts after your patients recover, the better. It is the duty of a physician to inform his patient of the amount of his obligation to him at least *once* a year. But there are times when a departure from this rule may be necessary. An unexpected misfortune in business, and a variety of other accidents, may deprive a patient of the money he had allotted to pay his physician. In this case, delicacy and humanity require, that he should not know the amount of his debt to his physician, till time had bettered his circumstances."

—From *The American Journal of Medicine*.

## NINE TO ONE?

Three soldiers approached the Hotel Desk and asked for rooms. The clerk told them that he was completely sold out except for a large conference room on the top floor, where they could all bunk down on tables, chairs or whatever they could find. They had been all over town, so they decided to take it.

A little later three sailors came in and asked for rooms and were told the same thing. And shortly thereafter three marines came in and asked for rooms and were also told that they could bunk down in this large room, which they also did.

Shortly thereafter a Wac came in and asked for a single room and was told they were completely sold out; that he even put three soldiers, three sailors and three marines all in one big room, and she said "What about me, can't I go up there?" and he said "All right if you want to."

The next morning the three soldiers came downstairs and went into the coffee shop and asked for coffee; they were followed by the three sailors who also wanted coffee. Then in about an hour down came the three marines who went into the coffee shop and got their coffee. They were shortly followed by the high-stepping little Wac who came into the coffee shop and she asked for a pot of tea. This proves that nine out of ten people drink coffee.

—Bulletin of the San Bernardino  
County Medical Society

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## NEW BIMONTHLY JOURNAL

The American Diabetes Association announces the inauguration of its new bimonthly scientific journal, *Diabetes*. The first issue of this periodical will be dated January-February, 1952, and will appear in mid-January.

*Diabetes* will place before the medical profession the latest information concerning diabetes and related aspects of medicine, and will also serve as the official publication of the American Diabetes Association. It will supplant the organization's annual *Proceedings* and its quarterly *Diabetes Abstracts*, both of which have been published for the past ten years. The Abstracts will be continued as a special department in the new Journal, and essential organizational data heretofore appearing in the annual volume will likewise be included in the publication.

The Journal will be edited by Frank N. Allan, M.D., of the Lahey Clinic, Boston, Mass., First Vice President of the American Diabetes Association. He will be advised and assisted by a distinguished Editorial Board under the chairmanship of Charles H. Best, M.D., of the Banting and Best Department of Medical Research, University of Toronto, Toronto, Ontario, co-discoverer of insulin.

## FIDELITY TO THE AMERICAN SPIRIT

The men of medicine have conquered typhoid, smallpox, diphtheria, many other diseases. They have been victorious in their "know how"; they possess basic understanding, they have applied their knowledge, mastered many techniques, and have helped man in his search for health and happiness. They have kept the faith.

The men of medicine are engaged in a new adventure: maintaining the American way of life, upholding the dignity and integrity of human personality, preserving the infinite worth of human life, and helping man to preserve for all time the inherent right of freedom of choice.

These democratic principles are now at stake. The boundaries of the rights of individuals are being narrowed, freedom of expression is only freely granted within the limits of status quo, the range of freedom of choice is being restricted by predetermined decisions, and the life of the American people is being regimented. Surely, our leaders are not keeping the faith.

The task of the medical profession can no longer be limited to healing the sick, preventing the socialization of medicine, and keeping itself free from governmental interference. It must exert its influence, its power, its organization, in maintaining the basic freedoms that have made America a good place to live, to move and have our being. Seen in a larger perspective, the progress of America has been phenomenal. We must be vigilant, militant, continue to keep an open mind, a suspended judgment, and recognize there is yet more truth and light to break forth. As a profession, as citizens, we have a job to do. Let us keep the faith.

—Pittsburgh Medical Bulletin.

## MEDICAL NOTES

The Research Council For Economic Security, "a privately-financed research and educational organization, engaged in preparing, publishing, and distributing on behalf of the public interest, factual analyses on all phases of social and economic security" has just completed a survey on "Our National Health Problem." Here are some of the findings concerning the state of Washington:

Washington, in 1950 with a population of 2,378,968 (a 37% increase over 1940) has increased its urban population from 53% of the total population in 1940 to 63% in 1950. The percentage of Washington's population that is 65 years and over was 8.5% in 1948—an increase of .2% over 1940—as compared with a national percentage of 7.5%—increase of .6% over 1940.

As of 1948, the birth rate in Washington was 22.7 per 1000; national rate was 24.2 per 1,000. Infant death per 1,000 live births was 27.5 compared to 32 on a national level. Maternal deaths were 0.5 out of every 1,000 live births, compared to 1.2 nationally. The general death rate was 9 per 1,000 population and 9.9 nationally.

The leading causes of death in 1948 in the state of Washington, per 100,000 population, were heart disease, 297; cancer, 124; accidents other than automobile, 52; pneumonia, 35; tuberculosis, 24. Comparable national figures were heart disease, 323; cancer, 135; accidents other than auto, 45; pneumonia, 39; tuberculosis, 30.

The number of persons per physician in the state of Washington in 1949 were 935 as compared with 741 nationally. The number of persons per each acceptable general hospital bed in Washington were 313 as compared with 333 nationally.

—King County Medical Society Bulletin.

The young lover was obviously reeling out a heavy line trying to impress the beautiful young girl at his side. "Those soft lovely hands," he whispered. "Your warm lips. And those beautiful eyes! Where did you get those eyes?"

The girl answered unimpressed, "They came with my head."

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## GOV. WARREN AGAIN CALLS FOR COMPULSORY HEALTH INSURANCE

G.O.P. White House Aspirant Takes Stand  
Alongside Truman and Ewing

The *Bulletin* believes that physicians should be advised that Gov. Earl Warren of California, who is now a declared candidate for the Republican nomination for President of the United States, has renewed his advocacy of Compulsory Health Insurance.

Gov. Warren, three times defeated in efforts to inaugurate such a system in California, made it clear in recent newspaper declarations and in a radio broadcast that he now favors a system of Government-directed medical care for all the American people.

The Governor denied that his program was Socialized Medicine, and, in common with President Truman and Federal Security Administrator Oscar R. Ewing, repudiated this term, while warmly embracing the substance of Socialized Medicine. This has become the accepted practice among those who seek a politically-dominated medical care system, however, and no doctor should be misled by that double-talk. In other words, the plan Gov. Warren thrice has urged in the California Legislature closely parallels the program of Socialized Medicine advanced by President Truman and his stooge, Mr. Ewing. To seriously maintain that it is anything but Socialized Medicine is to insult the intelligence of the medical profession and the entire American people. (It provided for a 1 per cent payroll tax to underwrite state health insurance.)

In the past, Gov. Warren has confined his efforts, unsuccessful as they have been, to his home state, but now he has made it clear that he believes such a Compulsory Health Insurance program should encompass ALL the American people. It is significant, of course, that he made this statement only a few days before announcing his candidacy for President.

Gov. Warren, in his most recent statements, as in the past, has completely ignored the tremendous strides made by Voluntary Health Insurance in providing prepaid medical care for the American people. This is consistent with his position throughout the long fight in California on this issue, for he has always either ignored or belittled the progress of the voluntary systems.

Speaking on a CBS radio broadcast, November 4th, 1951, Gov. Warren said, in part:

"It is not sufficient to say that America has developed the finest medical care in the world, even though this is true. We still must find a way to make it accessible to all of our people.

*"The well-to-do can pay for good medical care; the indigent receive it from public agencies and through the charitable work of the doctor; but the self-reliant worker, the man in the average or lower income bracket who contributes so much to build-*

*ing our country, and whose greatest ambition and hope is to raise a good American family, cannot bear the financial catastrophe of serious illness.*

"I have advocated for California a program of pre-paid medical care as a possible solution. The proposal has been called Socialized Medicine by some who are opposed to it. It even has been given the ugly name of communism by others. It is neither. Nor is it statism as practised in Germany or socialism as practised in England.

"I have never been and am not now in favor of Socialized Medicine. I do not believe in socialism, but I do believe in social progress, which has been the hallmark and the glory of the American nation from its beginning.

*"I am convinced we will enter upon a new era of progress in the cause of health when we make it possible for every one of our people to protect himself and his family from the economic disaster of backbreaking hospital and medical bills.*

"I believe it is the responsibility of the states to undertake to help doctors, hospitals and the public they serve in the solution of what, up to the present time, has been an insoluble problem. I have never held out my proposal as the only solution. It is my proposal until someone offers a better one.

"I am firmly of the belief, however, that our American system is sufficiently adaptable to make possible the solution of the problem of medical care without doing violence to the political, economic or professional concept of all the people who are sincerely interested in the problem."

On the issue of Compulsory Health Insurance, Gov. Warren is in the Truman-Ewing camp just as surely as if he were formally enrolled in it which, incidentally, President Truman has indicated he should be.

## A. M. A. CONVENTION NEWS

From Los Angeles comes the news that the most popular delegation at the A.M.A. Interim Convention was the delegation from the state of Washington.

In a suite of rooms on the eleventh floor of the Biltmore Hotel, Dr. R. A. Benson of Bremerton, president of the Washington State Medical Association and Drs. V. W. Spickard of Seattle, A. G. Young of Wenatchee and Ross Wright of Tacoma, delegates from the state of Washington, served up baked salmon, smoked oysters, smoked salmon sticks and other seafood delicacies to physicians from every state in the union.

The delegation room was decorated with illustrated maps of Washington and the buffet table was decorated with an enormous bowl of big red delicious apples which were handed out to the amazed guests.

Result was that the fruit and fish firmly established for the state of Washington the very best possible kind of public relations with delegates from all sections of the country.

—King County Medical Society Bulletin.

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## BOARD OF HEALTH WARNS OF POSSIBLE MALARIA RECURRENCE

Numbers of military personnel returning from Korea are suffering relapses of vivax malaria, while on leave or after separation from the service in this country. Since endemic malaria has been virtually eradicated in this country following the intensive malaria control activities undertaken during World War II, it is hoped that the return of these veterans will not result in its reestablishment.

The principal malaria vector in the Pacific Northwest is *Anopheles maculipennis freeborni*. This mosquito has never been completely eradicated. If malaria infected veterans are allowed contact with these mosquitoes, endemic malaria may again become reestablished.

In order to prevent such an unfortunate occurrence it is hoped that private physicians will be alert to the possibility of malaria in personnel returning from Korea, will make every effort to secure appropriate laboratory examination of both thick and thin blood films on such suspects, will promptly report to public health authorities the existence of such cases, and will insist on such personnel remaining under observation until cured.

Some progress has been made in anti-malarial therapy even since the later years of World War II. Chloroquine is now generally regarded as the drug of choice in the treatment of acute attacks of malaria and three days treatment is usually sufficient. Such treatment does not, however, permanently end parasitemia or late recurrences. To prevent further recurrences and to permanently eliminate parasitemia, a course of Chloroquine should be followed by a two week course of quinine plus pamaquine (plasmochin) or pentaquine.

All of these drugs are commercially available in the United States in convenient oral dosage forms. While all of them have some degree of toxicity, chloroquine produces fewer undesirable side effects than quinine or quinacrine (atabrine) in comparably effective dosage. Quinine plus pentaquine is probably the least toxic of any truly effective curative therapy, although the patients should be watched for signs of cinchonism or methemoglobinemia.

—Multnomah County Medical Society Bulletin.

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## MEDICINE IN AMERICA

As part of a widespread campaign to publicize the unique qualities and benefits of American medicine, Eli Lilly and Company is featuring a "Medicine in America" series of paintings in its bimonthly house organ, *Physician's Bulletin*, through the year 1952.

Six scenes have been chosen to illustrate representative aspects of America's unique patient-physician relationship. These will appear as a cover-flap in each issue and may be torn out and displayed in physicians' waiting rooms. The important message the paintings tell will thus have the attention of those who will have great influence on the form in which medicine in America will be practiced.

The pre-eminent place which American medicine holds in the world today, as the *Physician's Bulletin* series points out, is largely due to the many freedoms that patients as well as medical research and medical practice enjoy in this country. At this time of crucial decision, however, only an enlightened people, fully aware of the rich heritage of their freedoms, will act effectively to perpetuate those freedoms.

The "Medicine in America" series of paintings, executed for Eli Lilly and Company by several well-known artists, will thus help to emphasize the conviction that an aroused hometown America is the most formidable bulwark against the many threats to freedom in our country.

On a Marx Brothers radio program, a contestant recited, "Why, a single roach gives birth to 23,000 roaches."

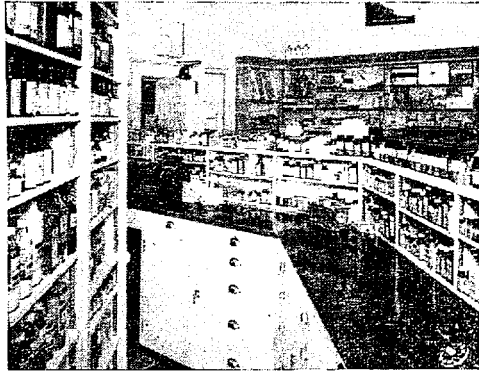
"My, my," said one of the Marx Brothers, "What a calamity if she should marry."

## REPORT ON CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of November 20, 1951, to December 20, 1951, inclusive:

Conjunctivitis .....	1
Chickenpox .....	20
German Measles .....	2
Gonorrhoea .....	18
Impetigo .....	1
Measles .....	16
Mumps .....	35
Ring Worm .....	1
Scarlet Fever .....	3
Syphilis .....	5
Tuberculosis .....	18
Vincent's Disease .....	1
Meningitis .....	1

Doctor at Madigan, being separated from Army in February, wishes locum tenens, or sharing surgical practice. Graduate of University of Rochester, 1947. 3½ years surgical training at University of Minnesota, 1½ years surgical work in Army. Call MAin 2020.



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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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## THE BRITISH ELECTION

What is significant about the British election is not that the Conservatives won with a smaller majority than expected, but that they won at all. Their victory is the most outstanding setback socialism—not only in Britain but in the world—has yet suffered.

At the end of the war, the British socialist Labor party came to power with a thundering majority. Full of self-confidence and able to do anything they wanted, the Laborites thought Britain and perhaps the world was their oyster. And so it seemed.

So they began building their brave new world in Britain. They nationalized basic industries, they guaranteed (through inflation) full employment. They cushioned the average man with low-cost subsidized food and free medical care. To do this they had to tax heavily, but the taxation was political, designed to redistribute income.

In a nation where the industrial workers form a larger proportion of the voting population than in any other nation in the world, the socialists' whole domestic policy favored the working man at the expense of the rest of the community. The recurring economic crisis—which the Labor government more or less weathered with the aid of billions of American dollars—never really impinged on the working man: his was too well insulated. Thanks to inflation and the welfare state, he was "prosperous."

So long as the labor government could substantiate its claim of "full employment" its defeat seemed improbable to many Britons—so also to many Americans officially resident in Britain. But it was defeated. True, it was not the workers but the middle classes who mainly turned the tide against socialism. But there stands the phenomenon that socialism declined in six years from preeminence to defeat.

The relaxation penetrated the British consciousness that the socialist vision was awry. Even the "prosperous" worker could not ignore the fact that, almost alone in the Western world, he still had to stand in line for rations. His government could not wholly obscure the extent of his pride-damaging dependence on the United States. He could not overlook the muddle socialist trading made of meat deals with Argentina and egg deals with Denmark; he could not overlook them because the muddles meant less food for him.

The empire the Briton took such pride in disintegrated before his eyes during these six years of socialism. In recent months the disintegration has been bitter in the extreme. The Briton could not fail to see that his government had fumbled badly, perhaps as disastrously, in handling Iran and Egypt.

But underneath all this the British—or many of them—could sense that the socialist vision not only had not been translated into reality; it looked very much as though it could not be. The working man could see that it took more than welfare and nationalization to create the brave new world; he

had discovered that though nationalization meant a change of ownership indeed, it did not change the ownership to him, as had been advertised.

When it came time to make the decision, the British could see that even the socialists were without real hope for the brave new world. They had no answers for anything. The only socialists who had answers were the supporters of Aneurin Bevan, and their answer was to carry Britain still further along socialism's inevitable road—toward communism.

What defeated socialism was not the middle classes or the Liberals. It was socialism itself.

\* \* \*

What now?

In the first place, it is silly to say that the Conservative victory will make little real difference in British life or in British relations with the United States. It will make all the difference in the world.

It is true the Conservatives, with the small majority they have in the House of Commons, will not undertake sweeping reforms of the socialist edifice. They did not intend to, anyway, as far as the welfare services and most of the nationalization program are concerned. Just as would the Laborites, the Conservatives will find difficulty in carrying out in full the contemplated rearmament program; perhaps it will have to be modified.

The differences that will emerge stem from a fundamental difference of purpose. The socialists' purpose was socialism. The Conservatives' purpose is Britain—restoring it economically and in terms of prestige.

Because the Labor government was socialist, its policies could only be restrictionist, at home and in its trade abroad. It depended on controls because in socialism the government must control. The Conservative government's policies will be expansionist. They will not only seek to decontrol but to increase production by allowing the fullest possible rein to that individual initiative the socialists have so successfully held in check.

Because the Labor government was socialist, it would not offer real cooperation to continental Europe unless Europe were socialist, too. But Western Europe—like those parts of the British Commonwealth which flirted with socialism—has largely rejected socialism. The Conservative government can and will cooperate with Europe, not only because it is its policy to do so but also because it is free of the economic and ideological preconceptions which made cooperation impossible for the British socialists.

What is more, the Conservatives will bring to British foreign policy a wealth of experience and ability which the Laborites have so notably lacked. This is not said gratuitously to disparage the socialists; it is just a fact—and a very important one. Their inexperience they cannot help, but their inability is surely in part to be accounted for by the fact that they have been British socialists first, and British diplomats only secondarily.

Without socialist inhibitions toward capitalism

(Continued on Page 29)

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(Continued from Page 27)

and its works, the Conservatives are fundamentally and wholeheartedly more pro-American than the Laborites. Their support of Anglo-American unity is stated with a truer ring.

Looking only at the Bevan wing of the Labor party, the attitude toward America is indirect contrast with that of the Conservatives. If the dynamic Mr. Bevan could have seized control of a victorious Labor part from the tired Mr. Attlee—at which project he was having some success—there would have been in power in London a regime avowedly anti-American. But that sentiment is only less characteristic of the Labor party as a whole.

Initially there may be some rough spots in dealings between Washington and a British foreign office under Conservative control. Where the Attlee government has followed, willingly or reluctantly, Mr. Churchill will certainly claim a full partnership. Certainly not without considerable justification. Mr. Churchill will think that he can bring to the framing of a joint policy an experience and a record of accurate foresight that has not been noteworthy either at Downing Street or on Pennsylvania Avenue. Mr. Churchill's campaign proposal of attempting a settlement with Russia is indicative of the extent to which he is very likely to try to take the initiative. Perhaps it will not be unwelcome at Washington; certainly it should not be so.

\* \* \*

For fifty years socialism in Great Britain was in the making. The terribly unfortunate thing was that the British finally decided to try the experiment at so critical a time in world affairs.

The British now have done what they have done so often in their history: they have stopped at the edge of the chasm and one may hope they will pull themselves back to safety and to greater achievement.

At least they have indisputably done one thing. That is to mark for the rest of the world the route to the chasms edge so that others may avoid it—unless they become bereft of their senses.

## RECITES PITFALLS OF BRITISH HEALTH PLAN

Dr. A. Lawrence Abel, president of the London area of the British Medical Association, dropped into Dr. George F. Lull's office for a chat recently, on the eve of his address at the annual convention of the International College of Surgeons in Chicago.

In his introductory remarks to the surgeons' group, Dr. Abel said he was "not a politician but merely a humble member of the medical profession working hard at practical surgery in the heart of London."

His personal remarks and the thoughts expressed in his speech were quite depressing, because the pitfalls he recited are the same pitfalls strewn in the path of the medical profession in this country by vote-conscious politicians in their efforts to enact some form of compulsory health insurance. As in England, they promise the sky, knowing full

well from British experience that they cannot deliver.

Dr. Abel told his audience that the cost of the National Health Service in England has far exceeded all estimates that were made before and during the time it took effect four years ago.

"The exchequer has at last realized," he said, "that my country cannot afford to make available the unbridled use of such an essential service. Whereas last year the health service cost nearly one billion, five hundred million dollars, they have now imposed an arbitrary ceiling of under one billion, two hundred million dollars . . . and a few weeks ago ordered that 50% of the cost of dentures and spectacles should be paid for by the patient."

Dr. Abel could not recall a single promise made by the politicians to both doctors and patients that has been kept.

## LAWYERS FIGHT BACK

Lawyers in many sections of the country are beginning to awaken to the threats of "socialization of the practice of law."

The state bar of California, meeting last week, proposed a counter-offensive.

Meanwhile, the A.M.A. public relations firm, Whitaker & Baxter, has filled many requests for medicine's "Simplified Blueprint of Campaign" from more than a dozen bar associations. This should facilitate an even closer working relationship between medical societies and bar associations against the common threat of socialization.

State bar leaders in California said that pressures have been increasing for several years in behalf of programs giving government enlarged powers over various phases of legal practice. One of the avenues of attempted socialization, they said, is establishment of legal reference services under state or local government jurisdiction.

Bar members frankly admitted, according to an article in the San Francisco Examiner, that the persistent drive for socialized medicine, not only in California but nationally, has led the legal profession to take notice of its own vulnerability.

The California Bar took immediate steps to establish a lawyer reference service in each community. It was argued that this would solve the problem of many potential clients who do not know how to find a reputable lawyer—within the existing professional and economic framework.

—*The Dauphin Medical Academician.*

## HORSEBACK DIAGNOSIS

Bennet Cerf, in *The Saturday Review of Literature*, tells the tale of a young doctor who hung up his shingle in a small town and waited for his first patient. Some days later one arrived—covered from head to foot with an angry, dangerous-looking rash. The puzzled young medico hastily consulted his textbooks but could find no help there. Finally he said to the patient, "Did you ever have this affliction before?" "Oh, sure, Doc," the patient replied. "I've had it twice before." "Well, damnation," diagnosed the doctor, "you've got it again."

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Due to the holidays, the regular copy for this advertisement has been delayed, but in the future this page will contain the authorized ad of the Schering Corporation.

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### INTERNISTS

Third Tuesday of each month—6 p.m. at Tacoma Club

### GENERAL PRACTITIONERS (Breakfast Club)

First and fourth Saturdays—8 a.m. at the New Yorker

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club

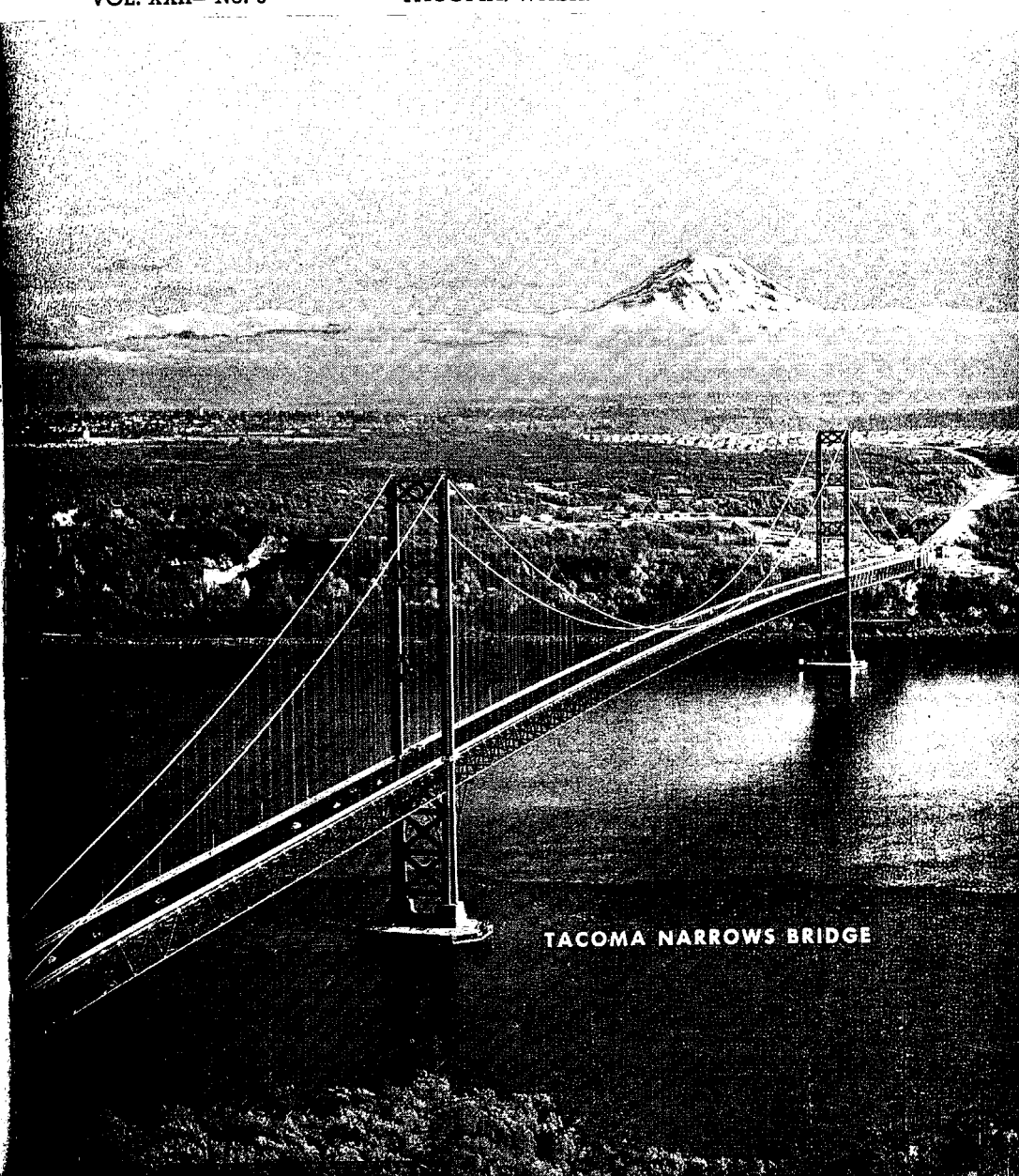


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 6

TACOMA, WASH.

FEBRUARY - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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Managing Editor .....	Katherine Rogers
Auxiliary News Editor .....	Mrs. T. B. Murphy

## Meeting of the Pierce County Medical Society

### Tuesday, February 12, 1952

## MEDICAL ARTS AUDITORIUM

### 8:15 P. M.

# Program

## CHEMICAL TESTS FOR INTOXICATION

1. General discussion—  
Dr. Charles P. Larson.
2. Medico Legal Aspects—Capt. R. K. Henderson, Chief of Identification Department, Tacoma Police Department.
3. Demonstration of drunkometer and intoximeter and photoelectric method for blood alcohol. Demonstration by Neil Duncan, technician for Tacoma Police Dept., Dr. Larson and Capt. Henderson.

See page 9 for Annual Dinner-Dance  
Announcement

## NOTICE

Check back page of Bulletin for calendar  
of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

A recent editorial in one of our national magazines presented a message which could well be repeated time after time during the turmoil and uncertainty of an election year. It read in part:

"This time, like all times, is a very good one, if we but know what to do with it" said Ralph Waldo Emerson, writing of another critical and disturbed period of our history, when America's freedoms were being threatened. Many of us find new hope in recalling that though our forefathers were surrounded by internal tensions as well as by outside threats to their national security, still they managed to produce areas of stability and social growth upon which to build a greater and ever greater America.

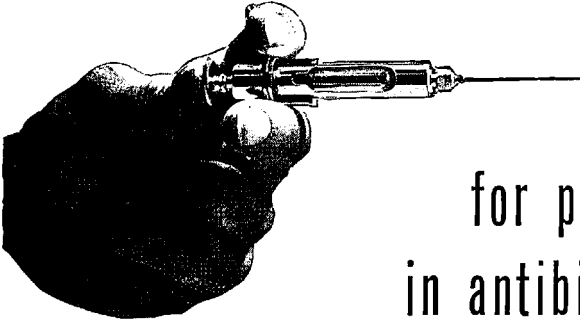
The new year brings to us some of the same dangers and some of the same opportunities for making right use of our time that existed in Emerson's day. And at least one factor essential to our success is the same as that which our forefathers employed—growth in moral and spiritual stature as well as in personal integrity. Day by day as we read or hear of the betrayal of trust by people in positions of honor and responsibility we are prepared to believe that lack of integrity and responsible citizenship is a serious danger of our times."

Under the pressure of the ever present burden of too much work and too many responsibilities, it is all too easy for professional men and women to neglect opportunities to combat this danger. On March 11 each one of us who is a registered voter will have the opportunity of exercising his right to vote in the general election. It is important that we study the issues and the candidates, that we may exercise the right intelligently, but it is important that we do more than this: we must do everything we can to get people to the polls—remind and urge our friends, our patients, our associates to turn out on March 11 and VOTE! New registrations must be completed by February 21 to be eligible to vote in the general election. Failure to vote at least once during each four-year period takes a voter off the registration list. Upon marriage, women must register anew. People need to be constantly reminded of these requirements. We hope every person who reads these words will resolve to do what he can to help make this election truly representative of the citizens of Tacoma.

"This time, like all times, is a very good one, if we but know what to do with it"!!

W. H. GOERING, M.D.

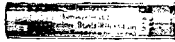
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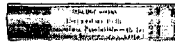
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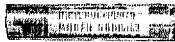
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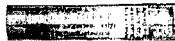
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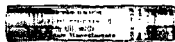
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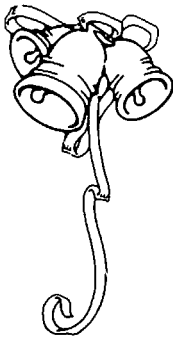
*Detailed information and literature on Cartrids are personally supplied by your Lilly medical service representative or may be obtained by writing to*

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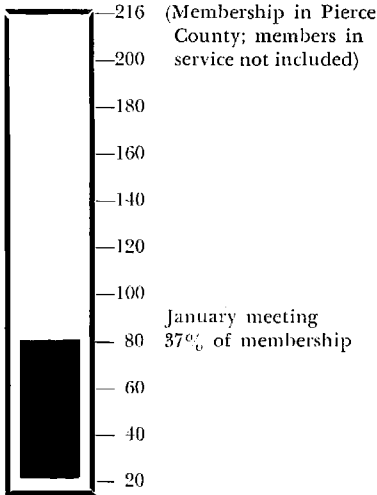
## ***Editorially Speaking . . .***

In his "State of the Union" message, Mr. Truman made the following statement, "I have set up an impartial commission to make a thorough study of the Nation's health needs. One of the things this commission is looking into is how to bring the cost of modern medical care within the reach of all our people." It does not require any high-powered commission to determine how to bring the cost of modern medicine within the reach of all our people. There are two ways to accomplish this. The cost of medical care may be so lowered that the individual with the lowest income in the country would find this cost within his means. The other possibility is to elevate the income of every individual who is not now able to purchase medical care in the open market. Is this a humanitarian objective, or something else again?

HOMER W. HUMISTON, M.D.



## ATTENDANCE THERMOMETER!



Kurt Blau, D.S.C., announces the removal of his office from 621 Jones Building to 313-16 Jones Building. The change will be effective February 1st. Dr. Blau's practice is limited to diseases of the feet. His office number is MAin 6577.

## —A DATE TO REMEMBER— CHICAGO MEDICAL SOCIETY CLINICAL CONFERENCE

MARCH 4-5-6-7, 1952

The eighth annual Clinical Conference of the Chicago Medical Society will be held in the Palmer House, Chicago, March 4-7, 1952.

The 1952 Conference program, now being completed, will be in the tradition of its predecessors—outstanding. The committee makes every effort to select papers of immediate value to both general practitioner and specialist. As a result, the Conference is always a most important contribution to the continuing education of the physician and through him to the welfare of his patients.

This year the *Practical Demonstrations*, which were crowded at the 1951 meeting, will again be emphasized and explained. Top men will show actual patients illustrating problems in allergy, fractures, dermatology, neurology, pathology, x-ray interpretation, proctoscopy, biopsy, the use of isotopes and other topics.

More than thirty *Original Papers*, all likewise dealing with current problems, will be presented by an equally impressive group. And there will be a carefully chosen series of *Scientific and Technical Exhibits* of the latest research results and new products. You can be sure it will be a good show, well worth your time.

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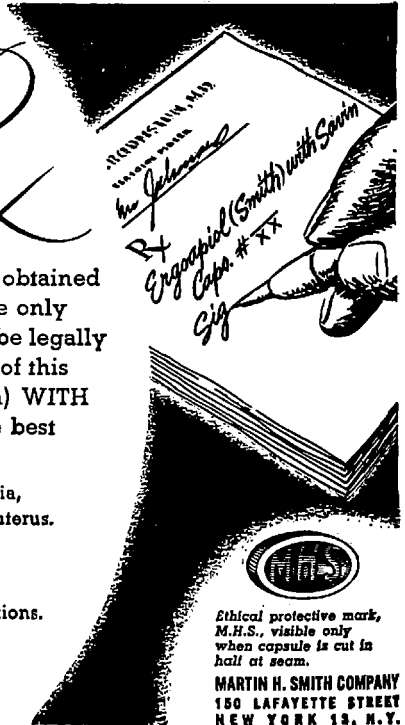
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# WOMAN'S AUXILIARY

To The Pierce County Medical Society

The Pierce County Medical Auxiliary will meet Friday, February 8th, at the home of Mrs. John Bonica at 12:30 p.m. Dr. Robert Murphy will be the guest speaker. His Subject will be "How the Child Guidance Clinic Operates." Mrs. E. R. Anderson, chairman of the luncheon, will be assisted by Mesdames Leo Annest, Robert Brooke, W. A. Heaton, David Hellyer, Ralph Huff, Homer Humiston, Cecil Hurst, Scott Jones, C. V. Lundvick, Don Willard, C. W. May and A. W. Howe.

\* \* \*

Jim and Jean Vadheim will be leaving the first of February for a three week vacation in Mexico City. On their way back they will stop in El Paso to visit Helen and Ray Bennett.

\* \* \*

Robert and Doreen Everett had a baby girl instead of a boy as was reported previously.

\* \* \*

Louis and Florence Rosenbladt have a new baby boy in their family. He was born in December.

\* \* \*

John and Lelia B. Robson are off again on a trip to La Jolla. Hope they have nice weather.

\* \* \*

Gypsy Hoyer will take over the publicity for the next month. Anyone having any news call her at SK. 2186 Thank you, Gypsy.

\* \* \*

The blood bank is very much in need of volunteer workers. Anyone who is willing to help call Dorothy Maier at BR. 5216. Volunteer workers last month were Ruth Light, Rose Griffin, Mrs. Kunz, Sr., Hilda Lantiere, Anna Robertson, and Dorothy Maier.

\* \* \*

Those lucky people, Ruth and Tom Murphy, are off on Friday for a six week's holiday which will include a trip to Cuba.

\* \* \*

In the next day or so you will be receiving a letter telling you about the annual Dinner-Dance to be held Monday, February 18th, at the New Yorker. From the plans that are being made it sounds as if it were going to be a gala affair. Hope we see you there.

A man rushed into a drugstore and asked the pharmacist what to do to stop hiccups. His answer was a slap in the face.

Shocked and angry, the stranger demanded a reason for the action.

"Well," said the pharmacist, grinning, "you don't have any hiccups now, do you?"

"No," shouted the customer, "but my wife out in the car still does."

—Sunshine Magazine

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Public Relations.....	Pat Flynn

## ANNUAL DINNER-DANCE

The annual dinner-dance will be held on Monday, February 18th, at seven o'clock at the New Yorker. The price of \$5.50 per person includes four highballs before dinner, a roast beef dinner, professional entertainment and dancing. Tickets may be purchased from members of the entertainment committee: Dr. T. B. Murphy, chairman, Dr. Philip Kyle, Dr. Frank Rigos, Dr. Wendell Peterson. They may also be purchased in the Medical Society office. Please make your reservations early.

## WEIGHT REDUCTION FILM

The Washington State Dairy Council, in the Rust Building, has a very interesting film that is available to doctors on request. It is called Weight Reduction Through Diet, and is a documentary film presenting a record of research done at the Michigan State College. It is a 16mm. film with both sound and color, and should prove to be a valuable aid in presenting the efficacies of weight reduction through diet.

A tramp knocked on the door of the Inn known as "George and the Dragon." The landlady opened the door and the tramp asked, "Could you spare a hungry man a bite to eat?"

"No!" replied the lady slamming the door in his face. A few minutes later the tramp knocked on the door again. The landlady came to the door again. This time the tramp asked, "Could I have a few words with George?"

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## GENERAL PRACTICE SCHOLARSHIP FUND CREATED

Recognizing that the time has come for extending formal training beyond a one-year internship to equip the general practitioner for his responsibilities, the American Academy of General Practice has announced an annual scholarship award for outstanding students.

A \$1,000 cash award will be given each year to five selected medical graduates who wish to pursue a year of recidency training, following internship, in general practice.

The awards will be made by the Academy from a fund created by Mead Johnson and Company, world's largest manufacturers of infant nutritional products. In order to get the scholarship grant into operation in 1952, interns will be chosen from five selected hospitals for that year's award. In years thereafter, selection of candidates will be made by deans of chosen medical schools from their graduating seniors.

The five winners and alternates for 1952 will be announced March 25 at the Congress of Delegates dinner during the Fourth Annual Scientific Assembly of the American Academy of General Practice in Atlantic City.

At this time, the names of recipients who are in graduating classes of five selected medical schools and who will begin their residencies in 1953 following their internship will also be announced.

A Mead Johnson General Practice Scholarship Committee has been created by the Academy to act as trustees of the fund. Among its duties will be naming annually the five medical schools from the 79 medical schools in the United States—each to submit three seniors eligible for the award. The committee will choose the five winners and name first and second alternates. These will be assigned to five hospitals where approved residencies in general practice are available.

The committee, headed by chairman Dr. William B. Hildebrand of Menasha, Wisconsin, is composed of family physicians from all parts of the country. It includes Drs. W. H. Anderson of Boonville, Miss., Mary E. Johnston of Tazewell, Va., Dave Dozier of Sacramento, Calif., H. Kenneth Scatlift of Chicago, Ill., and Fred M. Humphrey of Ft. Collins, Colo.

The offering of the Mead Johnson Scholarship Award means that five out of the 6,000 medical graduates next year will be assured of an additional year's training in general practice. Winners will be selected on the basis of scholarship, professional aptitude, and fitness for general practice.

The farmer's barn had burned down and the agent for the insurance company explained the policy that covered the structure and told him that his firm would build another barn of similar size instead of paying the claim in cash.

The farmer was furious. "If that's the way you do business," he exploded, "you can cancel the insurance on my wife."

## ERRATUM

The editor cannot guarantee the accuracy of all personal items. However, when he has personal knowledge he can be held accountable. In the birth notices a month ago, Doreen and Bob Evert (not Everett) had a baby girl, Terry Louise (not a boy!). The editor has personal knowledge, having changed the baby once himself.

## FROM THE BULLETIN TWENTY YEARS AGO

Self-appointed critics of medical practice have so often repeated the assertion that only paupers and the wealthy receive competent medical care that the unthinking are apt to accept it as a truism.

The answer to this misstatement is that it is untrue. The wage earner of limited means has had proper medical care at a moderate cost in the past and is still receiving it.

Indeed, in these times of lowered earning ability and unemployment, the medical profession is doing its share, if not more than its share, in giving aid to those in need. The doctors are responding cheerfully to all requests and are giving service with no expectation of monetary rewards or with a hope of deferred payments in a rather dim future.

In this regard the following remarks by Dr. E. Starr Judd, President of the A.M.A., are very pertinent:

"It has been interesting to observe the reaction of the medical profession during these distressing economic times. I think that I am correct in saying that the members of the medical profession have complained less about conditions than any other business or professional group, and I think the reason for this is that the medical men of the country have been just as busy as ever. The work has not decreased. It has been said that 'some people know just what is wrong with this country, and others are working.' The situation seems to be general throughout the country, and all physicians are in about the same situation: occupied as usual, but receiving very little monetary compensation for their efforts. Patients are being cared for in charity hospitals and sometimes under difficult circumstances, but nevertheless they are being cared for, and the physicians as a rule are keeping their practice in order. As good times return, they are bound to profit by the work done at this time.

"I wonder if the activities of the medical profession during the last few years may not be an answer to the much discussed subject of the high cost of medical care. These times show how elastic this cost can be made. Furthermore, they show that the sick will be taken care of at all times. The cost of medical care would seem to be entirely within the patient's control."

A woman telephoned her bank to arrange for the disposal of a thousand-dollar bond. "Is the bond for redemption or conversion?" a clerk inquired. There was a long pause, then the woman asked: "Am I talking to the First National Bank or the First Baptist Church?"

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# The Hospitals . . .

## TACOMA GENERAL

Recently elected officers of the Medical Staff for the year 1952 are: President, Dr. Ralph H. Huff; Vice-President, Dr. Herman S. Judd; Secretary-Treasurer, Dr. Robert W. Florence.

\* \* \*

The new Pediatric quarters on floor B were opened on January 20. Brightly painted walls, circus wallpaper and small-fry draperies make it very gay and interesting.

\* \* \*

The Laboratory is being remodelled to make room for the new flame attachment to the Beckman Spectrophotometer. This piece of equipment will save much time in completing tests. For instance, a Serum Potassium which now takes 6 to 8 hours can be completed in 1 hour with the flame photometer. It will probably be about a month before the installation is complete and the machine in operation.

\* \* \*

On January first Dr. John Bonica entered private practice; however, he will continue to supervise the Department of Anesthesiology.

\* \* \*

A Seminar on Hospital Equipment Planning, conducted jointly by the Washington State Department of Health and the Federal Security Agency, was held in Seattle on January 14, 15, and 16. Members of the Tacoma General Hospital Staff who attended the meetings are Mr. Walter Heath, Director; Miss Borghild Robertson, Director of Nursing Service; Mrs. Eudora Fulkerson, Chief Dietitian; and Mrs. Phyllis Parish, Central Supply Charge Nurse.

## VETERANS ADMINISTRATION

American Lake, Washington

Dr. Eldon L. Foltz, Division of Neurosurgery, University of Washington School of Medicine gave an illustrated lecture on the subject "Cerebral Angiography." The lecture was well attended by our own and visiting physicians.

\* \* \*

Dr. Eugene G. Goforth of Seattle, has recently joined our staff as consultant in Psychiatry.

\* \* \*

Dr. Otto Schaefer left for Washington, D. C., for a week's course in medical aspects of nuclear energy.

\* \* \*

Dr. Charles R. Strother, Professor of Psychology, University of Washington School of Medicine, is giving a series of six lectures at this hospital on Clinical Psychometrics.

\* \* \*

Over 300 of the hospital personnel volunteered as blood donors for the Armed Forces Blood drive. Arrangements were made with the Pierce County

Blood Bank, and the mobile unit is now making regular trips to the hospital.

\* \* \*

Dr. Lowell R. Hughes is passing out cigars, candy and a big smile because of the arrival of Kathryn Ann, weight 7 lbs. 11 oz.

\* \* \*

The Nurses' Home was recently the scene of a farewell party for Mrs. Stacia P. Dunn. Mrs. Dunn started her nurse's training in England and completed it at Dubuque, Iowa. She served in the Army Nursing Corps of World War I, served with the American Red Cross in Europe, with the American Commission to Serbia and retired from government service Dec. 31, 1951, after fifteen years with the Veterans Administration.

## MADIGAN

Brigadier General Maxwell G. Keeler, Commanding General, Madigan Army Hospital, who retired on November 30, 1951, after six and one-half (6½) years, is now being replaced by Colonel Emery E. Alling, who has just returned to the ZI from an assignment as Commander of the 98th General Hospital, Munich, Germany.

## ST. JOSEPH'S

Among the numerous M.S. patients frequenting our clinic at the present time are several whom we find of particular interest. Rev. Father Timothy Joyce, a Missionary Priest who flew here from Claregalway, County Galway, Ireland, is planning a stay of six months. His improvement has been steady, and this amazing man laughingly states he must now be careful in his conversation as people are beginning to be able to understand the things he says.

There is also Mr. Francis Xavier Knott, of Indian Head, Maryland. We have discovered since his arrival that he is the brother of one of our Sisters at present on the staff of St. Joseph's Hospital, Philadelphia.

\* \* \*

On Monday, January 14th, the Laboratory Technicians from St. Joseph's attended en-masse, the Washington State Society of Medical Technologists meeting held at the Pierce County Hospital, and heard Dr. Whitaker's excellent lecture concerning Liver Function.

\* \* \*

Miss Jane McNerthney of our surgical department is leaving the latter part of this month with her mother and sister for an extended tour of the states.

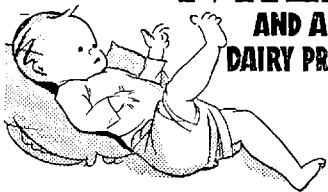
\* \* \*

Miss Virginia Martelli, former operating room nurse, wed Mr. Donald P. Vincnt. on Sunday,

(Continued on Page 15)

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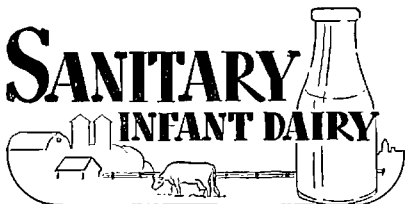


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(Continued from Page 13)

December 23rd, at St. Rita's Church, Tacoma, Washington. The couple will reside at Paso Robles, California, where Mr. Vincent is stationed with the United States Army.

\* \* \*

Sister Celine Magdalen, former night supervisor, is attending Seattle University doing further studies in advanced nursing education.

\* \* \*

The Medical Department has been re-organized with Sister Martha Joseph acting as supervisor, and the appointment of two head nurses to serve under her—namely, Mrs. Ella Magnusson, third north, and Miss Kay Murphy, third south. All head nurses who are members of the faculty are pursuing courses sponsored by the Seattle University, during the three quarters of the school year.

\* \* \*

Sister Agnes Ann, has completed a post-graduate course given at Sacred Heart Hospital, Spokane, Washington, under the auspices of Gonzaga University. This qualifies her to assume the position of teaching supervisor of our Obstetrical Department as of January 25th.

\* \* \*

Our internes have been provoking attention these days what with Mrs. Robert Shay presenting Dr. Shay with a super nine-pound-six ounce boy on January 22nd. His name will be Robert Martin, Jr. 3rd. We are pleased to observe that Dr. Donald F. Cummings is getting about on a walking iron, following his accident of several weeks ago, when he sustained an ankle fracture and facial lacerations. Another interne to join the under-the-weather ranks is Dr. Darwin Marlatt, who appears to be improving since his hospitalization.

\* \* \*

Miss Jane E. Bouffiou, recently appointed to the Admittance Department, may be seen daily going about her duties with a quiet charm and efficiency.

### FOOD CONSUMPTION

The average American adult consumes once every 50 days his own weight in food; a healthy child does so in about 10 days, while an old man does it only once in 65 days.

—Frederik R. Stearns, M.D.

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Katherine Rogers, Librarian

Hours: 11 to 5, Monday through Friday

If you telephone the library and no one answers the phone, please consider the following possibilities:

1. As librarian I may have gone to the Post Office to mail a package of books or I may be delivering or picking up books.
2. As Executive secretary I may be at the mimeographer's, I may be at the bank, or I may be at Dr. Kohl's office getting some letters signed.
3. As managing editor I may be at the printer's, I may be out getting copy for the *Bulletin*, or I may be out soliciting ads.

So please have patience as I do eventually get back in the office, and am more than happy to help you in any way that I can.

\* \* \*

We are still in need of a few copies of Northwest Medicine. If any doctor has one that he no longer wants, we would be grateful if he would send it down to the library.

\* \* \*

We have received a microfilm viewer that is useful for short articles. It requires no additional light and is relatively easy to use. For articles unavailable in periodicals or bound form the United States Army Medical Library will provide at no cost the films for our viewer.

\* \* \*

For the general practitioner, a well-used library is one of the few correctives of the premature senility which is so apt to overtake him. Self-centered, self-taught, he leads a solitary life, and unless his everyday experience is controlled by careful reading or by the attrition of a medical society, it soon ceases to be of the slightest value and becomes a mere accretion of isolated facts, without correlation. It is astonishing with how little reading a doctor can practice medicine, but it is not astonishing how badly he may do it.

—William Oster.

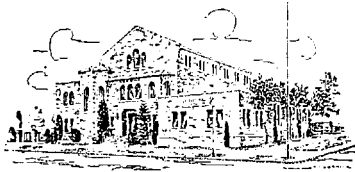
\* \* \*

List of Periodicals subscribed to by Pierce County Medical Library:

American Heart Journal  
American Journal of Clinical Pathology  
American Journal of Digestive Diseases  
American Journal of Diseases of Children  
American Journal of Medical Science  
American Journal of Medicine  
American Journal of Obstetrics and Gynecology  
American Journal of Ophthalmology  
American Journal of Physiology  
American Journal of Psychiatry  
American Journal of Roentgenology  
American Journal of Surgery  
American Journal of Syphilis

(Continued on Page 17)

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*(Continued from Page 15)*

American Practitioner and Digest of Treatment  
 Angiology  
 Annals of Allergy  
 Annals of Internal Medicine  
 Annals of Otolaryngology, Rhinology and Laryngology  
 Annals of Surgery  
 Annals of Western Medicine and Surgery  
 Archives of Dermatology and Syphilology  
 Archives of Industrial Hygiene and Occupational Diseases  
 Archives of Internal Medicine  
 Archives of Neurology and Psychiatry  
 Archives of Ophthalmology  
 Archives of Otolaryngology  
 Archives of Pathology  
 Archives of Surgery  
 Blood  
 British Journal of Ophthalmology  
 British Journal of Surgery  
 British Journal of Urology  
 Bulletin of the John Hopkin's Hospital  
 Bulletin of the National Tuberculosis Association  
 Bulletin of the School of Medicine, University of Maryland  
 Canadian Medical Association Journal  
 Cancer  
 Cancer Bulletin  
 Cancer Current Literature  
 Cancer Research  
 Cincinnati Journal of Medicine  
 Circulation  
 Cleveland Clinic Quarterly  
 Congressional Record  
 Current Researches in Anesthesia and Analgesia  
 Gastroenterology  
 Geriatrics  
 Illinois Medical Journal  
 International Medical Digest  
 International Surgical Digest  
 Journal of Biological Chemistry  
 Journal of Bone and Joint Surgery  
 Journal of Bone and Joint Surgery (British)  
 Journal of Clinical Endocrinology  
 Journal of Clinical Investigation  
 Journal of Experimental Medicine  
 Journal of Laboratory and Clinical Medicine  
 Journal of Nervous and Mental Disease  
 Journal of the American Medical Association  
 Journal of the American Medical Women's Association  
 Journal of the Indiana State Medical Association  
 Journal of the International College of Surgeons  
 Journal of the Iowa State Medical Society  
 Journal of the Kansas Medical Society  
 Journal of the Kentucky State Medical Association  
 Journal of the Medical Association of Georgia  
 Journal of the Medical Society of New Jersey  
 Journal of the Michigan State Medical Society  
 Journal of the Missouri State Medical Association  
 Journal of the Tennessee State Medical Association  
 Journal of Thoracic Surgery

Journal of Urology  
 Journal of Venereal Disease  
 Lancet  
 Laryngoscope  
 Medical Annals of the District of Columbia  
 Medical Arts and Science  
 Medical Clinics of North America  
 Medical Economics  
 Medicine  
 Memphis Medical Journal  
 Mental Hygiene  
 Minnesota Medicine  
 Modern Medicine  
 New England Journal of Medicine  
 North Carolina Medical Journal  
 Northwest Medicine  
 Nutrition Reviews  
 Pennsylvania Medical Journal  
 Physical Therapy  
 Physiological Reviews  
 Postgraduate Medicine  
 Proceedings of the Staff Meetings of the Mayo Clinic  
 Psychosomatic Medicine  
 Public Health Reports  
 Rhode Island Medical Journal  
 Surgery  
 Surgery, Gynecology and Obstetrics  
 Surgical Clinic of North America  
 Texas Reports on Biology and Medicine  
 Texas State Journal of Medicine  
 Today's Health  
 United States Armed Forces Medical Journal  
 Western Journal of Surgery  
 Yale Journal of Biology and Medicine  
 In addition to these which are regularly subscribed to we receive the following by exchange from other libraries:  
 Southern Medical Journal  
 California Medicine  
 Virginia Medical Monthly  
 New York State Journal of Medicine  
 British Medical Journal  
 We also take the following Dental Periodicals:  
 Journal of Dental Research  
 American Journal of Orthodontics  
 Journal of Periodontology  
 Journal of the American Dental Association

I shot a sneeze into the air. It fell to earth—I knew not where. But later on, so I am told, some 20 others had my cold.

—Saginaw City Medical Bulletin.

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## HEALTH NEEDS OF THE NATION

Establishment of the President's Commission on the Health Needs of the Nation is the latest maneuver in President Truman's campaign to socialize the medical profession. This commission, to be financed from emergency funds allocated for national defense, is a transparent fraud on the American people. Every physician and all others associated with us in caring for the health of the nation should clearly understand its absurdities and its dangerous political significance.

The President's statement announcing formation of the commission to "make a critical study of our total health requirements, both immediate and long-term, and (to) recommend courses of action to meet these needs." was dated Dec. 29, 1951. Immediately, Dr. Gunnar Gundersen and I issued statements to the press voicing strong opposition to the proposal and exposing its political purpose.

Dr. Gundersen, of La Crosse, Wis., a member of the Board of Trustees of the American Medical Association, had been named by the President, without Dr. Gundersen's approval, as a member of the commission. He forthrightly disavowed such action, stating "I believe I am correct in assuming that the commission is designed both in its majority membership and in its objectives, as an instrument of practical politics, to relieve President Truman from an embarrassing position as an unsuccessful advocate of compulsory health insurance. I certainly cannot subscribe to such a masquerade, and today have requested that my name be removed from consideration as a commission member."

My own statement pointed out that, as all competent authorities know, "There is no health emergency in this country to require such an investigation or to justify the use of defense emergency funds by such a commission. The health of the American people never has been better . . . and greater progress is being made in providing pre-paid medical care for all who need or desire it than at any other time in the nation's history." I suggested, with all earnestness, that "Congress should put a quick end to this misuse of national defense funds." As individual citizens, we should leave Congress no uncertainty as to how we feel about this obvious misuse of defense emergency funds for a program of political propaganda in a critical election year.

I should like to make it clear at this point that, in attacking the commission, we do not attack the individual members who are serving on it. This is a stacked commission, but among its membership are to be found sincere and able men who have accepted the appointment with the finest intentions. However, in such an obviously political framework and in the short space of time that the commission has been allowed for its work, they will be ineffectual.

Both President Truman and Dr. Paul B. Magnuson, chairman of the commission, have insisted publicly that it is an unbiased, impartial group. The degree of impartiality which may be expected

from this commission is indicated by the following statement of its chairman, Dr. Magnuson, as reported in the January 14 issue of *Time* magazine: "If the A.M.A. hierarchy devoted as much time to care of their patients as they do to political maneuvering, we'd all be better off." If this type of "impartiality" pervades the atmosphere in which the commission meets and works during the months ahead it is clearly apparent that this new commission will become just another adjunct of the Truman-Ewing propaganda machine.

One of the clearest proofs that this is simply another flagrant proposal to play politics with the medical welfare of the American people is its timing. The executive order establishing the President's Commission as of Dec. 29, 1951, states that "The commission shall cease to exist thirty days after rendition of its final report to the President under Section 3 of this order, or one year after the date of this order, whichever shall occur first." The one-year tenure of this commission, as any experienced student of medical affairs will attest, is wholly inadequate for a survey of the broad field projected in the Presidential order. Significantly, the year designated is the election year of 1952, when President Truman and Congressional candidates who have supported his socialized medicine proposals may find it politically expedient to avert a show-down before the people by stating that the whole subject is under study by a Presi-

(Continued on Page 21)

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(Continued from Page 19)

dential Commission and is therefore not an issue in the election.

This proposed survey, to be completed within a year or less, is to cover research of monumental proportions, if the President's outline of objectives is to be followed, research that could not possibly be accomplished with either accuracy or adequacy within less than three to five years.

It is unfortunate that the President refuses to admit the great progress that has been made by the medical profession in improving the health of the nation; he appears wholly uninformed concerning the reports that already have been made on medical progress of the past ten years, and most particularly of the past three. The entire fabric of the administration's case for federal control of the medical profession is woven from obsolete material and inaccurate figures. The people are being asked to believe in an emergency that did not exist even a decade ago and certainly does not exist today. That they are not too impressed is evidenced by the fact that, during the three years of Mr. Truman's most ardent advocacy of compulsory health insurance, more than 25 million additional persons enrolled in the many fine voluntary health insurance plans now available in the United States. Best estimates indicate that at this time over 80 million persons in this country have voluntarily obtained insurance as a cushion against the major costs of illness and the American people are determined to resolve this problem without either government help or interference.

It seems almost incredible that, in the face of all these facts, emergency defense funds should be allocated to a gigantic health survey that cannot possibly achieve its aims in the time allotted, is not necessary, and is so palpably political in its design.

—John W. Cline *Journal A.M.A.*

## IF YOU COULD CHOOSE . . .

While the nation consisted principally of the two classes of landlords and servile cultivators, the latter had, at least in ordinary times, a fund to which they might resort for maintenance, and, although they could not acquire property, they were, in general, certain of food, because it was the obvious interest of those who could command their services, to provide for their support.

This, however, furnishes no solid argument against the blessings of liberty. A prisoner under the custody of his keeper, may perhaps be confident of receiving his bread and water daily, yet, I believe there are few who would not, even with the contingent possibility of starving, prefer a precarious chance of subsistence, from their own industry, to the certainty of regular meals in a goal.

Dr. Johnson's remarks, on marriage and celibacy, may, perhaps, be applied with propriety to freedom and servitude. The one has many pains the other has no pleasures. (Rasselas)\*

\*"The State of the Poor," Sir Frederic Eden, 1797.

## POSTGRADUATE CONVENTION

Los Angeles' largest annually held medical meeting—the Postgraduate Assembly and Convention, sponsored by the Alumni Association of the College of Medical Evangelists School of Medicine—has been scheduled for March 2-4 at the Biltmore Hotel. This convention is the "best in the West."

The 1952 convention features such nationally prominent men as U. S. Army's Major General George Armstrong; Lahey Clinic's Drs. Sara Jordan, Martin Tracey and John Norcross; A.M.A.'s Secretary and General Manager Dr. George Lull; Joslin Clinic's Dr. Priscilla White; Cornell Medical School's Dr. Harold Wolff and Mayo Clinic's Dr. Giles Koelsche, to mention some of the 37 scheduled to lecture and take part in panel discussions.

Scientific exhibits of significant educational and informative value to physicians will also occupy the attention of the expected 1800 attending.

The popularity of last year's three-day "short courses"—held immediately following the assembly—prompts C.M.E.'s Alumni Association to offer them again. Short courses in therapeutics, internal medicine, pediatrics, roentgenology, dermatology, psychiatry, surgery, otolaryngology, urology, proctology, anesthesiology and obstetrics and gynecology are to be given on March 5, 6 and 7. Educators of the West's medical schools will serve on the faculty for these sessions.

Detailed information will be mailed out in the form of a brochure within the next few weeks and will include registration blanks for all phases of the assembly.

For further information write Evelyn R. Strachan, Managing Director, 312 North Boyle Avenue, Los Angeles 33, California.

Smith met Jones on the street. Jones had his head bandaged. "What happened to you?" asked Smith. To which Jones replied . . . "Well, the wife and I were sitting in the living room last night . . . and all was peaceful. She was working a crossword puzzle . . . I was reading the paper. Suddenly she asked, what's a female sheep? I said EWE . . . and when I came to I was lying on the floor with a busted flower pot scattered around.

## Karen Rynning

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## TACOMA-PIERCE COUNTY BLOOD BANK, INC.

Due to the rising costs of producing whole blood at the Tacoma-Pierce County Blood Bank, the Board of Directors has seen fit to raise the unit cost of whole blood as follows: The service charge is raised from \$7.50 to \$8.50 and the penalty charge made in lieu of replacement of the unit of blood used is raised from \$25.00 to \$30.00. This increase in charge is to go into effect January 1, 1952.

Consistent with the policy of the Blood Bank, the charges will be lowered as soon as possible. This is the first rise in charges which the Blood Bank has had to make and as soon as we can make ends meet with a lower charge per unit, the cost will be re-adjusted.

## HAVE A HEART!

The newest unit of the Washington State Heart Association was organized in Pierce County last year under the able chairmanship of Mrs. Donald Plummer. The Tacoma Academy of Medicine has sponsored the organization, and feels that it is entirely worthwhile.

The projects of the last year were limited to the distribution of Heart Literature in the schools and libraries, and classes for cardiac housewives entitled "The Heart of the Home" under the competent direction of Mrs. Evelyn Stein.

This year we are seeking more funds from the public through our Annual Heart Drive in February. Already as a pre-campaign effort many of the doctors have been solicited for donations, and during the campaign all doctors who have not given will be asked to contribute.

We feel that it is not fitting to solicit funds from the public for something that the doctors themselves are unwilling to support; therefore, won't you show your interest in this work by giving to the Heart Drive this year, and supporting your Pierce County unit?

## TV BANNED FROM CARS

At least twenty-four states now prohibit installation of TV sets in motor vehicles within view of the driver, according to a recent compilation. Legislatures of eight enacted such prohibition this year—in California, Florida, Michigan, Nebraska, New Jersey, New York, South Dakota and West Virginia. Measures previously were adopted to the same effect in Alabama, Colorado, Connecticut, Illinois, Indiana, Maine, Maryland, Massachusetts, Minnesota, New Hampshire, North Carolina, Oklahoma, Pennsylvania, Vermont, Washington, and Wisconsin.

—From Bulletin of  
Passaic County Medical Society.

The wife of the congressional representative sat up in bed, a startled look on her face.

"Jim," she whispered, "There's a robber in the house."

"Impossible!" was the reply. "In the Senate, yes, but in the House, never!"

## CEREBRAL PALSY CLINIC

The following letter was received from Dr. Kemp concerning the Cerebral Palsy Clinic:

"To clear up a certain misunderstanding relative to the diagnostic clinic on cerebral palsy to be held in Tacoma, Tuesday, February 26, in the Medical Arts Building Auditorium, this announcement is being publicized.

"Any doctor may refer any patient having cerebral palsy for Dr. Meyer Perlstein's examination and advice. Patients between the ages of 7 and 12 are preferred because patterns are not too definitely established, and treatment can be more effective. But if any patient older than this has some special problem, referral can be made. An attempt will be made to notify the doctor referring the patient of the approximate time of that patient's scheduled examination.

"To register a patient, telephone or send a postcard to Dr. C. E. Kemp, 722 South K St., BR. 4214, as soon as possible. Forms will be sent to you which are to be filled out and then sent to H. S. Whitman, 3717 North 9th, on or before February 15th.

"In case more than 15 applications are received the requests will be screened on that date and you will be notified as to whether or not your patient will be accepted."

## PRELIMINARY ANNOUNCEMENT

### Oregon Academy of Ophthalmology and Otolaryngology

The Annual Spring Convention in Ophthalmology and Otolaryngology will be held in Portland, March 24 to 28, 1952, inclusive. An excellent program has been arranged by the Oregon Academy and the University of Oregon Medical School. Otolaryngology sessions are scheduled on March 24, 25, and the morning of March 26. Ophthalmology sessions will be held the afternoon of March 26, and on March 27 and 28. Guest speakers are:

- Dr. Philip E. Meltzer, Professor of Otolaryngology at Tufts College Medical School, Boston.
- Dr. Francis A. Lederer, Professor of Otolaryngology at the University of Illinois College of Medicine, Chicago.
- Dr. Frederick C. Cordes, Professor of Ophthalmology at the University of California School of Medicine, San Francisco.
- Dr. William Hughes, Professor of Ophthalmology at the University of Illinois College of Medicine, Chicago.
- Dr. Cordes will present the third John E. Weeks Memorial Lecture in Ophthalmology. His subject will be "The Visual Prognosis in Diabetes."

When you are in need of a physician, you esteem him a god. When he has brought you out of danger you consider him a nobleman. When you have been cured, he becomes a mere human. When he sends you a bill, you think him a devil.

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## PHYSICIAN, KNOW THYSELF

It has frequently been said that when two or more physicians get together a medical meeting occurs. Doctors are so engrossed in their profession that they have little time for anything else. Even the conversation around the dinner table is most likely to involve professional experiences during the day.

Most of the physician's activities outside of the home concerns themselves with hospital work, home visits and medical meetings. Very little time is given to an evening at home with the family for strictly social purposes.

Even on those occasions when the physician spends the night out with his wife visiting friends (usually professional), the conversation generally centers around a medical topic among the men, and the ladies spend their time, separately, discussing mutual interests.

It is important that physicians should give a sufficient amount of their time to their professional obligations and keep themselves up-to-date concerning modern diagnosis and treatment. It is this loyalty to the profession that has contributed so much to the progress of medicine.

However, it is also important that physicians should divest themselves of their professional "clothes" and give adequate time to recreation and to contributions in fields other than medicine.

The world today needs leadership more than ever before. Physicians, through their training and experience, have a great deal to offer to our community and to world problems. It will be found relaxing to spend more time and thought on things other than medicine, and thereby help in the solution of the many problems facing humanity.

From purely a social angle, physicians should become "more of the family circle" and not merely feel that their obligation is to provide for the needs of the family. A physician is also a father and a husband, and this relationship means certain obligations which the wife and mother cannot fill. There is certainly a great deal other than medicine which the physician should discuss with his family and social acquaintances. The broader his interests the better-balanced and happier life he can lead.

Our suggestion, therefore, is for the physician to shed his professional clothes routinely and spend more time and conversation on things far removed from his usual environment. It will certainly pay dividends.

—Editorial from *Philadelphia Medicine*.

A fraternity house had sent its curtains to be laundered: It was the second day that the house had stood unveiled and that morning the following note was received from the sorority house across the street:

"Dear Sirs: May we suggest that you procure curtains for your windows. We do not care for a course in anatomy."

The chap who left his shaving to read the note promptly answered: "Dear Girls: The course is optional."

## REPORT ON CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of December 21, 1951, to January 20, 1952, inclusive:

Chickenpox .....	21
Diphtheria .....	1
German Measles .....	20
Gonorrhoea .....	17
Impetigo .....	1
Measles .....	2
Mumps .....	46
Pneumonia .....	2
Poliomyelitis .....	1
Ringworm .....	1
Scarlet Fever .....	9
Syphilis .....	4
Tuberculosis .....	17
Whooping Cough .....	1

## TOO MUCH FOR "NOTHING"

(Associated Press Dispatch)

London, July 26.—A dentist who filled 14 teeth in 55 minutes was censured by the London Council of Britain's National Health Service today.

The council asked the Health Ministry to fine the practitioner 2000 lbs. (\$5600) of his fees. The dentist was identified only as Mr. C.

One patient said he was in the chair 25 minutes and got up with six fillings. A second man testified he had eight teeth filled in 30 minutes flat.

The council said work done that fast could not be up to proper dental standards.

Dental work is free to Britons under the national health service. Dentists get their pay from the Health Ministry.

—From *L. A. Times*.

A friend of ours once was a passenger on a Pullman and was badly bitten by bugs. He wrote to the company to complain.

Back came a reply. It was the first complaint the company had. Inquiry had failed to reveal any explanation for the unprecedented happenings, precautions taken in the past would be redoubled in the future. . . . Then out of the envelope fell a slip: "Send this guy the bug letter."

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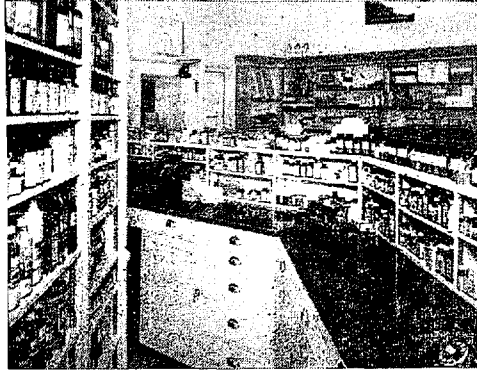
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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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## GUARANTEED ANNUAL WAGE

Recent reports indicate that Philip Murray is serious in his demand that, in the future, the steel companies guarantee to their workers definite annual wage totals. This proposal has been toyed with for a long time. Perhaps the issue is now coming to a head. What are the merits and weaknesses of this idea?

It is hard for any fair-minded person to deny the desirability of stabilizing to as large a degree as possible the incomes of members of the working class. But, as Andrew Carnegie once said, the steel industry tends to be either a prince or a pauper. And, unfortunately, when it is in the pauper phase, a large proportion of the workers attached to that industry suffer greatly from prolonged unemployment. It seems almost unpardonable that, in this age of remarkable advances in the field of science, almost no progress has been made in the direction of eliminating this serious evil. Clearly, something should be done to give the steel workers a higher degree of economic security than they now enjoy. Is the guaranteed annual wage the right way to accomplish this highly desirable end?

Some advocates of the guaranteed wage go no further than to suggest that the guarantees be confined to employees who have been with the given company for a specified number of years. Clearly, the effect of the adoption of such a policy would be to place most of the burden of unemployment upon those members of the labor force having the shorter periods of service with their present employers. This group of workers comprises most of the young men; and they are the ones who have had the least opportunity to accumulate savings, and are most likely to have families of young children. Is it socially desirable to select this group to penalize so heavily?

Other reformers have proposed that every company be required to guarantee to each of its employees only a minimum wage total representing a specified fraction of his regular full-time yearly pay. Were this plan adopted by the steel industry, the effect, in a period when orders for steel were scanty, would be to spread unemployment rather evenly over all the workers instead of concentrating it upon the relatively inefficient members of the working force. Since, from the standpoint of the public weal, efficiency would be rewarded and inefficiency penalized, the results of this type of guarantee would obviously be definitely anti-social.

Clearly, any plan which makes employers pay any considerable amount of wages for work not performed will soon bankrupt the employers unless they can find ways of shifting the burden to some other group of the population or to the government—and thus indirectly to the taxpayers. It follows that, if it is to be socially beneficial, any system of guaranteed wages must be coupled with the maintenance of full employment. If the steel companies were compelled to guarantee full-time annual wages to all employees, would this tend to increase or to reduce the volume of employment in periods of depression?

—Committee for Constitutional Government.

## AID TO MEDICAL SCHOOLS

The Report of the American Medical Education Foundation is not a pleasure to behold. In December 1950 the Board of Trustees of the American Medical Association authorized the establishment of this Foundation in order to obviate the need for federal aid to Medical Education. The American Medical Association led off with a half million dollars. It was presumed, or it was hoped, to make the fund substantial, two, three or five million a year. In ten months the fund grew to \$689,244.90. Less than \$200,000 less than 4% of what was hoped for, was added to our original half million.

There are several observations that can be recorded.

1. The doctors ought to be able to finance their own schools.
2. If schools do not get help, they will have to accept federal aid.
3. If they accept federal aid, they may have to accept federal control.

Why has our Education Foundation failed to produce the desired revenue? Are we too stingy? I think not. The reason most of us do not contribute is because we know Doc Jones down the street will not contribute and he can afford it just as well, probably better than we can.

The only way to make this fund large enough to do a job is to see to it that everyone pays. I'm willing to pay \$50.00 a year for twenty years if everyone else pays too. That would make \$2,000.00, about what I owe in tuition.

How can this be done? Needless to say, the Treasurer of the American Medical Association is not fond of the Special Assessment. I'd suggest sending a double postcard questionnaire to every member of the American Medical Association after suitable publicity in the Journal and in newspapers. Ask each member whether he would favor an annual assessment or dues of \$50.00 for twenty years earmarked for the Medical Education Foundation. In the first place, most of the doctors will faint at being asked for an opinion. When they recover, they may say "yes," they may say "no." If the majority of replies are affirmative, there is a fund of 5½ million annually.

Then, like a government which controls that which it supports, let us advise the Medical Schools to discontinue their duplication of effort in research and spend some of the money turning out doctors.

—H' C. Bornemeier, M.D.

A Scotchman, inviting a friend to his wedding anniversary, explained how to find his apartment. "Come to the seventh floor," he said, "and where you see the letter 'D' on the door, push the button with your elbow, and when door opens put your foot against it."

"Why do I have to use my elbow and my foot?" asked the friend.

"Well, for Heaven's sake! You're not coming emptyhanded, are you?"

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## "THEY" CAN ACT!

If Federal spending continues to increase, it will have to be met either by still higher taxes, or by deficit financing—government borrowing—which means more inflation.

The only other alternative is to cut down on the spending wherever possible. So far, efforts to reduce expenditures have been feeble at best.

A first step in this direction is the reduction of nonessential government expenditures. Projects which may seem desirable in peacetime can and should be pared under present conditions. And the sprawling operations of government also offer a fertile field for savings.

This would mean doing without some government frills, some communities might have to do without yacht basins and there would be fewer government jobs. We might have to do without Federal publicity that costs \$105,000,000 a year and uses 4,000 press agents.

It might be necessary to do without special calendars for congressmen that cost \$6,000 a year—equal to the income taxes paid by 25 families making \$325 a month.

Public opinion is the strongest force in a democracy. It can turn our nation away from the path of economic suicide that has been followed by England and other countries.

It is up to each of us to find out for himself what is happening to our country and then to act to protect Our American Way of Life for ourselves and our family.

*From Read & Repeat.  
Citizen's Information Committee.*

## THERE MUST BE SOME MISTAKE

A recent issue of the weekly Bulletin of the Jackson County (Missouri) Medical Society came up with some startling news.

It reported that Armstrong County, South Dakota, which comprises 518 square miles and has a population of 53, is a county of distinction.

"You can travel the length and breadth of Armstrong County; you can talk to its 53 inhabitants, one by one; you can search the dark corners of its buildings to your heart's content—and nowhere will you find a single person occupying a single foot of floor space who makes his living as a civilian employee of the federal government," the Bulletin said.

"That's right," it added, "there's not a single federal civilian employee in Armstrong County. It is the only county left in the United States which can make that claim to fame!"

Many feel it must be a clerical error and the Bulletin predicts that "heads will roll in Washington when the oversight is discovered."

*—The Dauphin Medical Academician.*

One should never trust a woman who tells one her real age. A woman who would tell that would tell anything.

*—Oscar Wilde, 1893.*

## HEIGHT OF IMPROPRIETY

A writer whose business is to keep in touch with national affairs has said, "Today in Washington circles that formerly advocated Compulsory Health Insurance, it is considered the height of impropriety even to mention it."

What has caused this rather remarkable about-face in political circles that keep their ears to the ground and their eyes on the voter? The answer is obvious. The American people, taken as a whole, want no part of socialized medicine, political medicine, or any kind of medicine that would be under government domination.

There is powerful evidence to support that statement. More than 11,000 organizations—including leading national groups which represent agriculture, labor, industry, the veterans, university women, and so on—have taken a solid stand against Compulsory Health Insurance.

The American Press, a magazine which is concerned with the problems and activities and attitudes of weekly newspapers, reported that greater support was shown for the American Medical Association's campaign to fight government medicine than ever has been shown in any other national campaign—including government wartime campaigns! It is a noteworthy fact that a great majority of our newspapers, rural and urban alike, have strongly opposed Compulsory Health Insurance.

This isn't because the American people believe medicine is perfect. It is because they believe progress can best be made under the present free system—and because they are impressed with the immense strides forward that have already been taken. Today, for example, more than 72,000,000 people are enrolled in one or other of the Voluntary Health Insurance systems. The number thus covered 20,000,000 in two years. We are gradually solving the medical care problem—and solving it without political compulsion.

*—Prescott, Arizona Courier.*

## NAMED FOR A SORE THROAT

A perpetual parental problem is to pick names for new babies. Some are named for desirable relatives, others because mother or father likes a name and wants to try it out on a defenseless infant.

There are so few names and so many babies that a little ingenuity in selecting names may be commended. But originality can be carried too far. Navy recruiters thought so when they signed up a young man from Ardmore, Okla., under the name of Tonsillitis Jackson. They were skeptical of the name until they checked with the folks at home and found that Tonsillitis has five brothers and sisters, whose names are Meningitis, Appendicitis, Laryngitis, Jakeitis and Peritonitis.

The recruit thinks he was named Tonsillitis because his mother had a sore throat when he was born. It requires a rather terrifying case history to account for the names of his younger brothers and sisters.

*—Philadelphia Inquirer.*

## IF IT'S GOOD FOR THE DOCTOR SHAW CAN SUPPLY IT

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## WORDS TO LIVE BY

Perhaps the essence of the liberal outlook could be summed up in a new decalogue, not intended to replace the old one but only to supplement it. The Ten Commandments that, as a teacher, I should wish to promulgate, might be set forth as follows:

1. Do you feel absolutely certain of anything.
2. Do not think it worth while to produce belief by concealing evidence, for the evidence is sure to come to light.
3. Never try to discourage thinking, for you are sure to succeed.
4. When you meet with opposition, even if it should be from your husband or your children, endeavor to overcome it by argument and not by authority, for a victory dependent upon authority is unreal and illusory.
5. Have no respect for the authority of others, for there are always contrary authorities to be found.
6. Do not use power to suppress opinions you think pernicious, for if you do the opinions will suppress you.
7. Do not fear to be eccentric in opinion, for every opinion now accepted was once eccentric.
8. Find more pleasure in intelligent dissent than in passive agreement, for, if you value intelligence as you should, the former implies a deeper agreement than the latter.
9. Be scrupulously truthful, even when truth is inconvenient, for it is more inconvenient when you try to conceal it.
10. Do you not feel envious of the happiness of those who live in a fool's paradise, for only a fool will think that it is happiness.

—Bertrand Russell in *N.Y. Times Magazine*.

## NEW 5-PERCENTER TWIST

Just when Administration spokesmen and explainers were praying that all that five-percenter furor, with its overtones and ramifications of gift mink coats and refrigerators, would die down a bit, Harry himself startles the public with a new twist on the issue.

Ninety-five percent of Federal officials and workers, says Mr. Truman with an air of complacent pride, are honest and trustworthy. There are well over two million people working for the Government. Of these, by the President's own estimate, five percent—or over 100,000 tax-paid people—are neither honest nor trustworthy.

One wonders how long a bank could hold the confidence of its community if it announced that one employee in every twenty might be expected to blow the safe and light out for Mexico any night?

—*Cal. Feature Service*.

"Hey, what are you doing?" yelled the foreman.  
"I'm just sharpening a pencil," answered the bricklayer.

"Well, don't let anybody see you. That's a carpenter's job, you know."

## "IF"

(With apologies to Kipling)

- If you can tell a falsehood with flinching,  
And kid the British workman you're a friend;  
If you legalize your ways of "pinching"  
The money that he's earned the right to spend;
- If you can call your fellow creatures "vermin"  
Because they lead a decent, cultured life.  
And, having preached against it, thus determine  
"Twixt class and class, to foster social strife.
- If you can nationalize the source of fuel  
And coldly make a God Almighty mess;  
If you can make the public take its "gruel"  
And kid them they've got more instead of less;
- If you can make our transatlantic cousins  
Believe that, as a Power, we're still alive;  
That exports are increasing in their dozens  
Although the six-day week's now only live;
- If you can raise the price and cut the "vittles"  
And kid the folks to work with all their will;  
And say, if anyone your scheme belittles  
"It's only Tory propaganda still";
- If your idea of charm is Mrs. Braddock,  
If you think Churchill just a "gutter snipe";  
If you think filthy snook is lovely haddock  
And all of best traditions "silly tripe";
- If you can knock a mighty Empire sideways  
And give it all away in one short year;  
If you can bust the whole exchequer sideways  
And charge the "overdraft" to workers' beer;
- If you can wear at functions open collars;  
If you consider Post War Credits "paid";  
If you can sneer and jeer at Yankee dollars  
And at the same time whine for Marshall Aid;
- If you can fill the unforgiving minute  
With sixty seconds' grace of twist and twist,  
Then Britain's yours, old cock, and all that's in it,  
And what is more, you are a Socialist.

(Seen in a store window in London)

—*From Pittsburgh Medical Bulletin*.

One of the members of the bridge club who had been to a swanky party was making a detailed report to her friends.

"And how," one asked, "did young Mrs. Jones look?"

"Well," was the woman's reply, "you know her habit of always complaining to everybody about how little she has to wear?"

"Well, this was the night she was wearing it!"

First Young Matron: "When I got married I wore blue to show my faithfulness."

Second Young Matron: "When I got married I wore white to show my purity."

Third Young Matron: "When I got married I wore a business suit."

Pierce County Medical Society

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### INTERNISTS

Third Tuesday of each month—6 p.m. at Tacoma Club

### GENERAL PRACTITIONERS (Breakfast Club)

Second and fourth Saturdays—8 a.m. at the New Yorker

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club



*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 7

TACOMA, WASH.

MARCH - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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 President-Elect ..... Miles Parrott  
 Vice-President ..... Burton A. Brown  
 Secretary-Treasurer ..... Gerald C. Kohl

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William Goering	Chris Reynolds
	Frank Rigos

## ALTERNATE DELEGATES

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Herman Judd	Philip Grenley
	Fay Nace

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F. R. Maddison	E. C. Yoder

### Bulletin Staff

Editor	Homer W. Humiston
Managing Editor	Katherine Rogers
Auxiliary News Editor	Mrs. T. B. Murphy

## Meeting of the Pierce County

## Medical Society

Tuesday, March 11, 1952

## MEDICAL ARTS AUDITORIUM

8:15 P. M.

# Program

## PANEL DISCUSSION ON PSYCHIATRY

(Shock therapy, commitment procedure, psychiatric management and treatment.)

DR. WILLIAM TODD

DR. MYRON KASS

DR. JAMES SHANKLIN

## NOTICE

Check back page of Bulletin for calendar of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Mar-ne Photo Service.

## ***The President's Page . . .***

LET'S GET ACQUAINTED! More and more as I attend the many meetings of the County Society, the various hospital staff meetings and other gatherings of medical groups I am becoming aware of this very great need among us. I never fail to have to ask my neighbor: "Who is that doctor over there in the third row?" and he will usually answer, "I've seen him around but don't know his name!"

This Society is not so large that we could not hope to recognize each one by name, his specialty if he has one, and where his office is located. How can we do it? As new members come into the society introductions both at the initial reading of names and final readings would be in order. These new members should make every effort to become acquainted with their colleagues and to make themselves known to the older members of the society. Twenty years ago, when we were not so busy as now my preceptor insisted that in my spare time I pay my respects to this or that doctor. This I did, with a little prodding, and in time was able to call most of them by first name. So if you have a few minutes to spare, drop around, shake hands and "have a few words." You will be amply repaid in your new acquaintance by the added fellowship which makes work easier and more congenial.

W. H. GOERING, M. D.

P.S. March 11 is Election Day. Don't forget to VOTE!!!

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## ***Editorially Speaking . . .***

It had not previously occurred to me that there was such a tremendous difference between the sales efforts of politicians and physicians. I shudder at the thought of posting signs extolling my virtues as a specialist in the places where they would most likely be seen by prospective patients. I should have the same feeling about dropping in at the home of someone who I had heard was a prospective patient for my type of service, and explaining to them what a grave error they would be making to seek help elsewhere than in my office. The seeker for political office operates under quite an opposite code of self laudation.

The other day I dropped in unannounced on some people that I know quite well. I inquired as to the functioning of the organs that I usually treat, and they obviously thought that this information was none of my business. They were kind enough to consider that I might be a little off my rocker rather than I was impertinent. I then told them how well off they would be if a man of my choice were to represent them in the Legislature. Obviously, I know more about the organs that I treat than I do about the Legislature, but, to put it modestly, the latter buildup was well received.

After some several years as a right hand hitter, the attempt to change to a switch hitter is interesting, and more than a bit difficult.

HOMER W. HUMISTON, M.D.

## MEDICAL LIBRARY

Katherine Rogers, Librarian

Hours: 11 to 5, Monday through Friday

We have on file in the library the names of several competent office workers, receptions and registered nurses who are looking for work in doctor's offices. If you need help in your office a call to the library will be well worth your while.

\* \* \*

If any doctor has a copy of S.G.O. for January, 1951, that he no longer wants, it would be greatly appreciated if he would notify the library, or bring it in. We are sending all completed periodicals to the bindery this month, and the above copy is missing. All other unbound periodicals that have been out over two weeks are being called in so that they may be bound. It would facilitate the work of the librarian if these could be brought in without having reminders sent out. So, please, take a look and see if you have any periodicals that are over due.

\* \* \*

The following announcements have been received at the office:

The University of Washington is giving a series of lectures on Applied Anatomy of the Abdomen on Wednesday evenings, March through May, 1952.

The thirteenth Annual Spring Convention in Ophthalmology and Otolaryngology will be held at the University of Oregon Medical School from March 24th through March 28th.

More information on these lectures may be obtained from the library.

The following letter from the American College of Surgeons was also received:

February 4, 1952

Dear Doctor:

We are writing to invite you and the members of your society to attend a Sectional Meeting of the College which is to be held at the Vancouver Hotel, Vancouver, British Columbia, March 31, April 1 and 2, 1952.

On March 31 and April 1, local and visiting speakers will conduct formal and informal sessions on such practical surgical problems as Biochemical Aids in Surgery, Hazards of Delivery for Mother and Child, Breast Tumors, Common Problems of Pelvic Surgery, Surgical Treatment of Pulmonary Tuberculosis, Achalasia, Surgery and Anesthesiology, The Cardiac Patient as a Surgical Risk, Bleeding from the Gastrointestinal Tract, and a Symposium on various Cancer Problems, and another on the Management of Major Traumatic Conditions.

Several excellent surgical motion pictures will be shown, including some of the new films prepared for the Cine Clinic at the 1951 Clinical Congress, and a new stereoscopic film on Radical Resection for Carcinoma of the Stomach, which attracted much attention at the San Francisco meeting.

On April 2, operative clinics and demonstrations will be presented in leading Vancouver hospitals. Detailed programs of these clinics will be posted

at the registration desk during the meeting.

We hope you will announce this invitation at your forthcoming society meeting and that it may be published in your society bulletin. Hotel accommodations may be obtained by writing to Mr. M. H. Burns, Manager, Hotel Vancouver, Vancouver, British Columbia.

Sincerely yours,

Paul R. Hawley, M.D.

*The Director*

J. Russell Neilson, M. D.,

F.A.C.S.

*Chairman, Committee on Arrangements*

## REPORT ON CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of January 21, 1952, to February 20, 1952, inclusive:

Chickenpox .....	49
German Measles .....	170
Gonorrhoea .....	22
Impetigo .....	1
Measles .....	8
Mumps .....	94
Rheumatic Fever .....	1
Ringworm .....	1
Scarlet Fever .....	13
Syphilis .....	5
Tuberculosis .....	8

## PRACTICE, RECORDS AND EQUIPMENT FOR SALE

Dr. Mills E. Lawrence has been called back into the Navy and would like to sell his practice, records and equipment as a unit or each separately. His office, at 2603 Sixth Avenue, will be available after April 1st, at a very low rental. Any one interested may call him at BR. 6842.

Serious Young Man: Do you enjoy Kipling?

Giddy Girl: I don't know—how do you kipple?

## Karen Rynning

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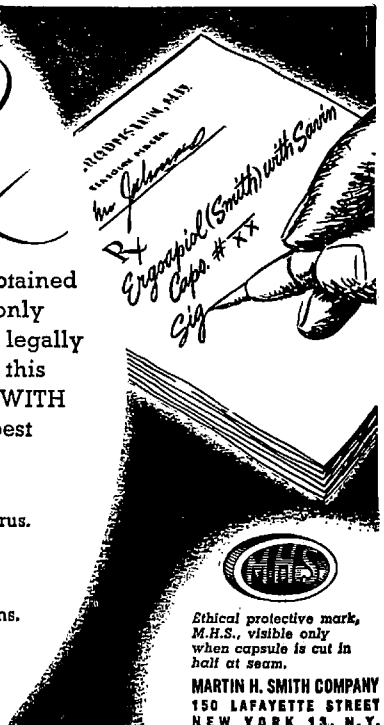
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# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

The Pierce County Medical Auxiliary will meet Friday, March 14th, at the home of Mrs. Haskel Maier, 2707 Henry Road at 12:30 p.m. Mr. Roger Bullock of Saxton's will discuss Interior Design. Mrs. James Vadheim, chairman of the luncheon, will be assisted by Mesdames H. A. Anderson, E. E. Banfield, David Johnson, J. D. Lambing, Richard Rich, Frank Rigos, Max Thomas, Hugh Larkin, Fay Nace, E. J. Fairbourn, Gerald Geissler, Myron Kass, Michael Irvin.

\* \* \*

Jean and Fred Schwind spent a week end skiing on Mt. Hood while en route to a Medical Meeting in Portland.

\* \* \*

Dr. and Mrs. A. B. Heaton also went skiing, but for two weeks at Sun Valley.

\* \* \*

Verna Annest is visiting her family in Louisville. Leo claims he has already lost weight playing both mother and father to their brood of four.

\* \* \*

Apparently all is well on the Larkin home front. Hugh & Charlotte were able to make their long anticipated trip to Honolulu.

\* \* \*

Dr. and Mrs. S. F. Herrmann plan to bask in the California sunshine for two weeks.

\* \* \*

Dr. Herrmann will attend a four day meeting in Carmel.

\* \* \*

John and Lela Robson's trip to La Jolla turned out to be a rest behind barred doors and darkened windows at 424 North C.

\* \* \*

Mrs. Goering is filing for freeholder in the coming March elections. Voters will be presented with a list of 87 names, only 15 of which can be elected. If she is one of the fifteen, Mrs. Goering will spend a very busy summer on revision of the City Charter. Let's all get behind her and vote her in.

## CIVILIAN DEFENSE

The Tacoma Civilian Defense Organization is planning on a day of registration on March 11th, from 10 o'clock until 5, in the Medical Arts Building Auditorium. All personnel from Washington Minor Hospital and Doctor's Hospital, all X-ray men and their technicians, all Laboratory men and their technicians, and all doctors and their office personnel are requested to come in and be registered. Pictures and finger-prints will be taken, and stickers will be provided for automobiles. It is hoped that everyone in the above categories will participate in this comprehensive registration.

## OFFICERS FOR 1951-1952

President .....	Erma Thordarson
President Elect.....	Muriel Nelson
First Vice President.....	Aleva Jones
Second Vice Presiden.....	Helen Kittredge
Recording Secretary.....	Jean Judd
Corresponding Secretary.....	Dorothy Schultz
Treasurer.....	Hilda Lantiere
Bulletin.....	Clara Skinner

## CHAIRMEN OF COMMITTEES

Year Book.....	Helen Jarvis
Membership.....	Edith McGill
Publicity.....	Ruth Murphy
Social.....	Helen Florence
Program.....	Jeannie Schwind
Telephone.....	Gladys Hansen
Blood Bank.....	Dorothy Maier
Legislative.....	Helen Kittredge
Today's Health.....	Merle Herrmann
Public Relations.....	Pat Flynn

## TEN WAYS TO KILL AN ASSOCIATION

1. Don't come to the meetings.
2. If you do, come late.
3. If the weather doesn't suit you, don't think of coming.
4. If you do not attend a meeting, find fault with the officers and members.
5. Never accept an office, as it is easier to criticize than do things.
6. Nevertheless, get annoyed if you are not appointed to a committee. If you are appointed, don't attend the committee meetings.
7. If asked by the Chairman to give your opinion regarding some important matter, tell him you have nothing to say. After the meeting, tell everyone how things should have been done.
8. Do nothing more than is absolutely necessary. When other members roll up their sleeves and unselfishly use their ability to help things along, howl that the Association is run by a "clique."
9. Hold back your dues as long as possible—better still, don't pay at all.
10. Don't bother about getting new members, but if you do, be sure they are grouches like yourself.

—Bulletin of the Hudson County Medical Society.

(It is not anticipated that this article will change anything).

—Editor.

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E. J. POLE, Secretary  
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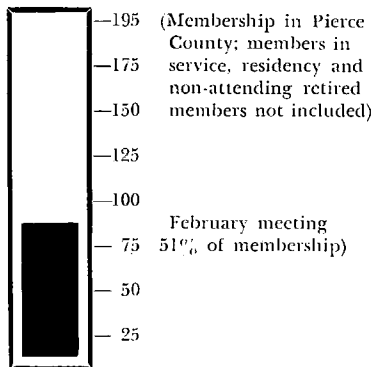
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## ATTENDANCE THERMOMETER!



Previously we have used the number 216 as the number of members of the Pierce County Medical Society and have used this number to compute the averages for the attendance at the meetings. Considering that a number of the members are retired and never come to the meetings, and that several members are in residency in other parts of the county and are unable to attend, it has been decided that a more fair number to compute the average with would be the number of doctors who are available. Therefore, beginning with this issue of the Bulletin we are using the number 195 as a more equitable figure.

## THE FUNCTION OF AN EXECUTIVE

As nearly everyone knows, an executive has practically nothing to do except to decide what is to be done; to tell somebody to do it; to listen to reasons why it should not be done, why it should be done in a different way ;to follow up to see if the thing has been done; to discover that it has not; to inquire why; to listen to excuses from the person who should have done it; to follow up again to see if the thing has been done, only to discover that it has been done incorrectly; to point out how it should have been; to conclude that as long as it has been done, it may as well be left where it is; to wonder if it is not time to get rid of a person who cannot do a thing right; to reflect that he probably has a wife and a large family, and that certainly any successor would be just as bad, and maybe worse ;to consider how much simpler and better the thing would have been done if one had had done it right in twenty minutes, and, as things turned out, one has had to spend two days to find out why it has taken three weeks for somebody else to do it wrong.

—Anonymous.

"Has James changed much in the years he has been away?"

"No, but he thinks he has. He keeps talking about what a fool he used to be."

## NOTES FROM THE SCHOOL HEALTH DEPARTMENT

Doctors who participated last summer in the examination of children preparatory to entering school in the first grade, will be interested to know that they examined more than ninety per cent of the entire entering class. This is a real accomplishment. It is an important event in the life of each of these children since the Doctor's report is transcribed to the School Health Card, which is a permanent record. This card with subsequent notations goes with the child through the grades, and to another school if he moves.

\* \* \*

The private examination, too, is apt to be of much more value than those done in the schools since the family doctor usually knows his patient, and since the parent will be present for the examination. This latter fact is very important to a successful examination and is a great opportunity for health teaching, even though it must be brief.

\* \* \*

Of course, it is highly desirable to have these children return to their doctors for repeat examinations at least annually.

\* \* \*

What would the doctor think of a plan to return these young people to them with a form for re-examination for school records at intervals of, say, three years—first, fourth, seventh, and tenth grades? We might add, we expect to have a more acceptable examination form for this coming year for the first grade children.

We are glad to have this means of expressing our thanks to Walter Cameron for a very interesting and valuable discussion of visual defects in children, at our School Health Forum for teachers and nurses.

Also, to Bill Norton for appearing at the Health Forum recently, to discuss the Wetzel Grid. Bill worked with Wetzel in Cleveland when he developed the Grid., knows all about it and how to talk about it. We also wish to thank Horace Anderson for resolving some cardiac doubts in some high school athletes. These are not only worthwhile services, but also good public relations.

—Dr. D. M. Dayton.

A street cleaner was fired for day dreaming—he couldn't keep his mind in the gutter.

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# The Hospitals . . .

## VETERANS ADMINISTRATION

Allen L. Edwards, Ph.D., of the University of Washington, gave an interesting talk at this hospital on the subject, "Recent Advances in Statistical Methods."

\* \* \*

Dr. Ernest E. Banfield gave an illustrated lecture in the medical conference room recently on "Concepts of Plastic and Reconstructive Surgery." Both lectures were well attended.

\* \* \*

Miss E. Faye Harris, the supervisor of the TBC unit at this hospital is back at work again, fully recovered from her recent surgery.

\* \* \*

Mrs. Laura Christman came out on top in her bout with meningitis and is back on the job after two months' of illness.

\* \* \*

Mrs. Shirley Middleton, Supervisor of the wards for women patients took a week of annual leave and went skiing at Sun Valley last month. She came back in one piece with a wind-burned face.

## TACOMA GENERAL

Dr. Paul M. Mickens of the Internes Staff has been appointed to a University of Washington sponsored Residency in Pathology at the Veterans Hospital in Seattle. He will leave to accept this position on July 1.

Remodelled, redecorated, and newly furnished, the First East Medical Wing will be ready for occupancy about March 1. This wing was made available for fifteen additional medical patients when the Pediatrics Department was recently moved to Ward B. The quarters are most attractive, with decorative wall paper and colorful draperies. There are several private rooms with bath, as well as one double room, and one three bed ward. Mrs. Evelyn Peterson will be head nurse on the floor. She is a graduate of the Tacoma General Hospital School of Nursing, and has been staff nurse and assistant to the head nurse on First North for two and a half years.

\* \* \*

Mrs. Edith A. Randrup, who had been head nurse on Third South for ten years died on January 31. Her efficiency and devotion to duty will be greatly missed.

\* \* \*

Miss Martha Harbin has been named acting head nurse on Third South. Miss Harbin is a graduate of St. Joseph's Hospital, Tacoma.

\* \* \*

Attendance at the February Staff Dinner reached an all time high of 125 doctors. Mrs. Eudora Fulkerson, Chief Dietitian reports that they were served in record time. The members of the Dietary Department especially enjoy these monthly meetings, and to have some of the doctors forget their

special diets for the evening makes the occasion complete.

\* \* \*

Miss Ruth Ammann, Admitting Nurse, will begin a leave of absence on March 3.

\* \* \*

Gloria Jorgenson, Student Nurse, has been elected to represent the Washington State Student Nurse Association at the Biennial Nursing Convention to be held in Atlantic City in June. Miss Jorgenson has served as president of the WSSNA for the past year.

\* \* \*

Last week Miss Helen Mar Jewett, Principal of the School of Nursing, attended a meeting in Seattle of the Board of the Washington State League of Nursing Education.

\* \* \*

Edith Johnson and Blenda Coots of the Business Office have left to devote their full time to home-making. Mrs. Johnson has been on the office staff for seven years, and at the time she left was cashier. Mrs. Coots has been employed for the past two years as switchboard operator and receptionist.

## NEWS FROM AMERICAN RED CROSS

American National Red Cross, in a fourth anniversary review of its blood program, announces it has collected and turned over to the military forces 1,225,000 pints of blood since the start of the Korean War. Approximately 160,000 pints were shipped to the Far East as whole blood, the rest processed into plasma. During the same period, Red Cross collected and processed 1,861,000 pints for civilian use. Dr. George F. Lull, A.M.A. secretary and general manager, renewed the pledge of America's physicians to "do everything possible to make the blood program a continuing success." E. Roland Harriman, Red Cross president, commented on the cooperation received from A.M.A., American Hospital Association, American Public Health Association and the American Association of Blood Banks. He said: "At every stage . . . we have had the unremitting aid and guidance of the American Medical Association and individual physicians."

Red Cross and the cooperating blood banks will be the collecting agency in a National Blood Program now being set up under direction of a committee headed by Dr. G. D. Cummings. The group, which will report to the Health Resources Advisory Committee in the Office of Defense Mobilization, will coordinate all collecting, processing, distributing and research efforts.

Red Cross has set a goal of 300,000 pints per month for military use and 125,000 for civilian, for a total of 425,000. December collections reached 353,000.

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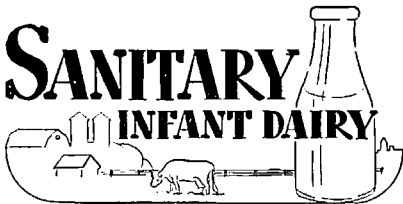


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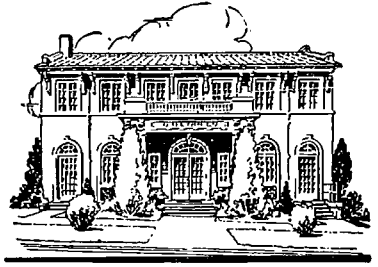


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## UNIVERSITY OF WASHINGTON MEDICAL SCHOOL ADMISSIONS

It seems fitting that an introductory article on the Medical School should deal with the problem of admissions. Certainly this is one of the problems which gives rise to more headaches than almost any other—more headaches for the Admissions Committee and more headaches for those who desire to be admitted.

Figures which have just been released show that in 1950, 22,279 applicants made 81,931 applications to the various medical schools in this country, while in 1951, 19,920 applicants made 70,678 applications. During those two years there were 412 and 387 completed applications respectively at the University, from which 75 students were accepted into each of the two entering classes. While the majority of these accepted were from Seattle and/or the University of Washington, it is worth noting that about 40% of the entering classes were from outside the Seattle area (25% from West of the Cascades and 15% from Eastern Washington) and that 28 other educational institutions were represented, including a number of eastern and midwestern colleges and universities, where Washington residents had matriculated in the pursuit of their pre-medical training.

Probably the most difficult decision that any Admissions Committee has to make is to decide just what kind of applicants are to be admitted. There is no uniformity in admissions requirements, and when the subject is discussed, as it frequently is among the Deans of various schools, it seems that each one is looking for the "right kind of man." He may not be a brilliant scholar (but it helps). He may not be handsome, or wealthy, or even hirsute. He should be, however, an individual who gives some promise of being a credit to the medical profession to which he aspires, whether he be a practicing physician, a teacher, and investigator, or an administrator in public health or industrial hygiene.

It is natural that many legends should have arisen around a procedure for which so many are called and so few are chosen. We hear that it is necessary to be the son of a physician practicing in Seattle, that it is necessary to know the right influential person (political, financial, educational or

other), that it is necessary to have a "straight 'A' average," and many other bits of folk-lore. In order to clear the record, the following are the minimum requirements for admission to the University of Washington School of Medicine:

- a. Completion of at least 3 years of pre-medical training, including work in English Composition, Inorganic and Organic Chemistry, Physics and Biology.
- b. A minimum grade-point average of at least 2.5 (the equivalent of C. plus).
- c. Satisfactory completion of the Medical College Admissions Test (commonly known as "The Aptitude Test").
- d. Submission of an official application which includes transcripts of college work and the names of instructors who will act as reference for the applicant.
- e. Primary consideration is given to applicants from the State of Washington and from Alaska.

After this data has been received and evaluated, the Admissions Committee decides which applicants will be interviewed, meetings are set and each applicant is interviewed by at least three members of the Admissions Committee. Action is then taken by those members, or in some instances, by the entire committee. Applications have to be submitted before January 1st of the year for which application is being made, and the above detailed process generally starts in the Fall and is completed by the end of February or early March.

The Admissions Committee welcomes letters and comments about its work and about the various individual applicants. Phone calls may be routed through MEIrose 0630, Extension 8409, and letters addressed to: "The Committee on Admissions, University of Washington School of Medicine, Seattle 5, Washington.

—*Bulletin of King County Medical Society.*

## THE JOY OF BEING AN EDITOR

Getting out this magazine is no picnic.

If we print jokes, people say we're silly;

If we don't, they say we're too serious.

If we stick close to the office all day,

eW ought to be around hunting material.

If we get out and try to hustle,

We ought to be on the job in the office.

If we don't print contributions,

We don't appreciate genius;

And if we do print them, the paper is filled with junk!

If we edit the other fellow's write-up, we're too critical;

If we don't we're asleep.

If we clip things from other papers,

We are too lazy to write them ourselves;

If we don't, we are stuck on our own stuff,

Now, like as not, some guy will say

We swiped this form from some magazine.

—*The Fisherman, Nov., 1948.*

\*We did.

\*\*And we did too.

"Glasses as your eye  
physician prescribes them"

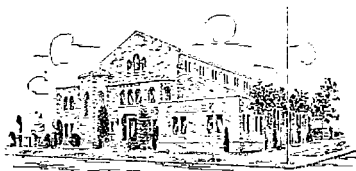
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## FACTS ABOUT A. M. A. DUES FOR 1952

1. American Medical Association membership dues for 1952 are \$25.00.

2. Fellowship dues for 1952 have been abolished.

3. American Medical Association membership dues are levied on "active" members of the Association. A member of a constituent association who holds the degree of Doctor of Medicine or Bachelor of Medicine and is entitled to exercise the rights of active membership in his constituent association, including the right to vote and hold office as determined by his constituent association, and has paid his American Medical Association dues, subject to the provisions of the By-Laws, is an "active" member of the Association.

4. American Medical Association membership dues are payable through the component county medical society or the constituent state or territorial medical association, depending on the method adopted locally.

5. Commissioned medical officers of the United States Army, the United States Navy, the United States Air Force or the United States Public Health Service, who have been nominated by the Surgeons General of the respective services, and the permanent medical officers of the Veterans Administration and the Indian Service, who have been nominated by their Chief Medical Directors, may become Service Fellows on approval of the Judicial Council. Service Fellows need not be members of the component county or constituent state or territorial associations or the American Medical Association. They do not receive any publication of the American Medical Association except by personal subscription. If a local medical society regulation permits, a Service Fellow may elect to become an active member of a component and constituent association and the American Medical Association, in which case he would pay the same membership dues as any other active member and receive a subscription to *The Journal of the American Medical Association*.

6. An active member of the American Medical Association may be excused from the payment of American Medical Association membership dues when it is deemed advisable by the Board of Trustees, provided that he is partially or wholly excused from the payment of dues by his component society and constituent association.

The following may be excused in accordance with this provision: (a) members from whom payment of

dues would constitute a financial hardship as determined by their local medical societies; (b) members in actual training but not more than five years after graduation from medical school; (c) members who have retired from active practice; (d) members who have reached the age of 70, on request, and starting January 1 following the 70th birthday, and (e) members who are called to active duty with the armed forces (exemption begins July 1 or January 1 following entrance on active duty). The last two categories are excused from A.M.A. dues regardless of local dues exemptions.

7. Active members of the American Medical Association are not excused from the payment of American Medical Association membership dues by virtue of their classification by their local societies as "honorary" members or because they are excused from payment of local and state dues. Active members may be excused from the payment of American Medical Association membership dues only under the provision described in Paragraph 6 above.

8. American Medical Association membership dues include a subscription to *The Journal of the American Medical Association*. Active members of the Association who are excused from the payment of dues will not receive *The Journal* except by personal subscription at the regular subscription rate of \$15.00 a year.

9. Members may substitute one of the special journals published by the Association for *The Journal* to which they are entitled as members.

10. A member of the American Association who joins the Association on or after July 1, will pay membership dues for that year of \$12.50 instead of the full \$25.00 membership dues.

11. An active member is delinquent if his dues are not paid by June 1 of the year for which dues are prescribed and shall forfeit his active membership in the American Medical Association if he fails to pay the delinquent dues within thirty days after the notice of his delinquency has been mailed by the Secretary of the American Medical Association to his last known address.

12. Members of the American Medical Association who have been dropped from the Membership Roll for nonpayment of annual dues cannot be reinstated until such indebtedness has been discharged.

13. The apportionment of delegates from each constituent association shall be one delegate for each thousand (1,000), or fraction thereof, *active members of the American Medical Association* as recorded in the office of the Secretary of the American Medical Association on December 1 of each year.

## DAMMEIER Printing Co.

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Tacoma

The editors of the Bulletin take great pride in reporting that Dr. Charles Larson of the Pierce County Medical Society, and Mrs. William Goering of the Auxiliary, have both allowed their names to be placed on the ballot as freeholders for the March election. We need these people in this capacity, and it is the earnest hope of the editors that every member will support them with their vote.

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## SCHOOL MILLAGE

Directors of Tacoma public schools are asking the voters to authorize two extra millage propositions at the March 11 election. If passed, each will be collected only once, appearing on the 1953 tax statements.

School Proposition A is for 3 mills for current operations during the 1952-53 school year. This added income (amounting to about \$321,000) is necessary to bring up the level of local school support somewhat comparable with Seattle and Spokane, where assessed valuations are high enough to support their schools on revenue from the 12 mills regularly allowable for schools in this state.

In 1951 Tacoma's assessed valuation was \$97,872.-446; Spokane's, \$147,980.974; Seattle's, \$466,170.994. On a per pupil in school basis, these valuations divide out to \$4.972 for Tacoma; \$7.195 for Spokane; \$8.492 for Seattle.

School Proposition B is for 6 mills for buildings. Money previously voted for construction has been spent or allocated. However, the district will need between 20 and 30 more rooms by the end of 1953 because of expanding enrollment. Enrollment is increasing about 1,000 pupils per year. In 1960 it is estimated that 31,000 children will attend Tacoma public schools compared with the present 23,000.

Forty percent of the number of people who voted at the last general election must vote on the school propositions to validate the election; 60 percent of those voting must vote "yes" for them to pass. This is a formidable hurdle, but it can be met through cooperation and enthusiasm. Both propositions are needed for a good school program next year. It behooves everyone to speak out in favor of them.

## SOCIALIZED DIVORCES

Staid and patient Britons, accustomed to stand in line for this, that and the other, have been queuing up for six months before court houses under the new socialized legal service program—and the queues grow longer.

The business seems akin to trying to make progress in a revolving door. Since the law went into effect, 34,000 applications have been filed, most of them—27,000—for divorce action. First off, the applicants are "screened" by a special board set up for the purpose. The board decides whether (1) they are entitled to court action, (2) whether they should have it free of charge, and (3) whether they are able to pay part of the costs, ranging from \$28 to \$280.

So far, about 20,000 applications have been ground through the mill, with the remaining 14,000 rejected, abandoned or still under consideration. To cope with all this, the lawyers' trade union has set up 12 area committees, with 112 local committees. And now pressure is on to create yet another special board—this one to attempt reconciliations.

—Calif. Feature Service.

## CASE OF THE SUING CORPSE

Even Mr. Erle Stanley Gardner, the writer-lawyer detective fictioneer, might be stumped at grappling with the incredible situation confronting the City of San Francisco because its public health doctors brought a dead woman back to life.

She is suing the city for damages, claiming that restorative emergency treatment applied to her lifeless person caused burns requiring later medical attention. The lay mind wonders how, if she suffered the alleged burns while dead, any suit over that matter could properly come before the courts of this world. It would seem she should have to wait until she is once more—this time irrevocably—dead, and all those she wishes to sue are dead, and then bring action post mortem.

If, on the other hand, the claimed injuries were suffered after the ministering doctors had hauled her back through the door from death, then earthly courts might have jurisdiction. But who in the world can say just where she was at the time—she herself being unconscious?

Ambulance-chasers of the post-mortem realm might shed legal light on that point, if they could get over on this side of the veil to speak up. But they can't; for Ouija board evidence is inadmissible under the august statutes of this commonwealth.

Mr. Gardner, you take it from here!

—Calif. Feature Service.

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## U. S. PENSIONS HELP MAKE BIG SHOTS IN THE OLD COUNTRY

**16,000 in 90 Foreign Lands Drawing \$6 Million a Year:** Angelo Paisano has worked hard in America. Now he's 65 and he has gone back to Italy to live on his social security pension. He could be a big shot in his native village.

Angelo is one of some 16,000 persons who drew \$6,309,000 monthly pension checks in 90 countries outside the United States last year. That averages a little over \$39 a month—not so much figured in American living standards. But despite higher living costs in Italy and everywhere else, what a man must have in those places to keep up with the neighbors is much less than it is in the States.

If Angelo who, you must understand, signor, is a type, not a real person, is a single man and worked for low wages only part of the time since taxes began to be taken from his pay envelope in 1937, he will probably draw the minimum—\$20 American. At present exchange rates he gets 12,500 lira for his \$20. If he draws the average of \$39 a month, the local bank gives him some 25,000 lira. Not too bad, when you consider that a highly skilled mechanic in Italy is paid around 37,000 lira monthly and by his standards keeps a family fairly well on it.

But even with the minimum of \$20, if Angelo has a wife who is also past 65, they get \$30 a month American, or nearly 19,000 lira.

If Angelo has been lucky and has been paid better than \$3,000 a year in America since 1937, and has worked steadily all the time, he will get the maximum annuity payable today, \$68.50. Since his wife is entitled to 50% additional, their monthly income in good U.S. dollars will be \$102.50, or the magnificent sum of 64,000 lira.

**That's big dough in Angelo's home town.** And if Angelo knows about a black market in U. S. currency he might get considerably more than 625 lira for every one of his good American dollars.

There is no way of knowing whether the 16,000 persons drawing U. S. social security over the world are American citizens or aliens. They might not even have been residents of this country while qualifying for their pensions. Canadians, for instance, living in Windsor and working in Detroit could qualify through the social security payroll taxes as paid by themselves and their employers in equal parts.

**Mexicans can do likewise along their border.**

Furthermore, because old-age pension rolls are confidential under U. S. law, the names of individuals abroad and how much each is getting cannot be learned. It's a good bet, though, that Angelo's neighbors know he's a U. S. pensioner. He probably boasts of it, which is good propaganda for the United States there.

In the last fiscal year that \$6,308,000 in Treasury checks went to 30 countries or colonies in the Western Hemisphere, 23 in Europe, 14 in Africa, 20 in Asia and 3 in the Pacific Islands. Eligibility for 7,401 of them was certified by the New York

regional social security office. Philadelphia certified 2,139; Chicago, 3,176; Birmingham, 454; San Francisco, 2,004 and Kansas City, 729.

The checks are paid in dollars and they're not subject to U. S. income taxes. If a foreign country chooses to tax them, the United States has no control. Checks are sent wherever the payee can be assured of receiving them.

They don't go to Russia or China or any of the Iron Curtain countries. That credit, however, is building up for the pensioners should they go where they can be sure of getting their checks.

Italy had the greatest number of U. S. social pensioners during the last month of account, June, when 5,245 persons got \$210,387 during the month. Canada was second with 3,205 persons drawing \$127,090. Greece was third with 1,219 persons getting \$46,209.

Other principal countries, with number of pensioners and dollar totals for that month were: United Kingdom and Northern Ireland, 908 persons, \$37,468; Sweden, 553 persons, \$24,637; Ireland, 519 persons, \$21,890; Norway, 510 persons, \$21,533; Yugoslavia, 427 persons, \$15,220; Mexico, 531 persons, \$14,611; France, 154 persons, \$6,585, and Japan, 174 persons, \$5,989.

—Chicago Daily News, Sept. 22, 1951.  
via Insurance Economic Surveys.

## WOMB-TOMB-DOOM

Lord Beveridge, author of Britain's "Cradle-to-Grave Security" and "Full Employment Plans," has addressed a "Letter to Posterity" over BBC.

The tremendous leveling down of British incomes in the last ten years, for which he provided intellectual leadership, has resulted in what he calls, "an economically flattened society."

Ten years ago Lord Beveridge hoped to retire at age 70 and spend another twenty years or so on various scientific hobbies. He is now crowding 72: but "To keep up the way of life to which I have become used," said Lord Beveridge, "I have to go on working for money long after the usual age of retirement. . . . I am not sure indeed that, even with these present earnings to help, the savings I made as a young man will hold out as long as I live. I can only hope that I shall not live too long."

—From Life Magazine, Jan. 14, 1952.

Kretschmer, the famous German psychiatrist, has given us an interesting definition of genius. He says, "We shall give the name of genius to those men who are able to arouse permanently and in the highest degree that positive feeling of worth and value in the widest group of human beings. But we shall do so only in those cases where the value rises with psychological necessity and out of the special mental structure, not where a stroke of luck or happy coincidence has thrown it into his lap. . . . The genius is a producer of new and original things, the producer of personally stamped special values."

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## LAMENT VOTING APATHY OF AMERICANS

The United States, proud of its way of government, has the lowest vote turnout of any major democracy in the world, according to a survey recently conducted by Gallup, Inc.

In the last Congressional election held in 1950, only 41 per cent of the eligible voters bothered to cast a ballot, while the 1948 presidential elections succeeded in attracting only 52 per cent of the adult population to the ballot boxes. This clearly indicates that those failing to use the voting privilege are as much responsible for the final result as those who do cast a ballot.

On the other hand, Great Britain's 1951 October general elections drew a whopping 83 per cent of the voting population to the polls. In Canada, the last election attracted 74 per cent to the ballot places.

## ALCOHOLICS ANONYMOUS

The world is full of organizations of various kinds. The United States would seem to have considerably more than its share of these, perhaps because they fit unusually well into "the American" way of life. Most people undoubtedly join such organizations for business, political or social reasons. However, quite a few enroll because they find security in belonging to a group.

Alcoholics Anonymous, perhaps better known as A.A., in some ways is typically American. It was born under adversity and achieved success after a struggle. It was conceived by a drunk lying in a drunk's hospital. This fellow got the idea that if he attempted to help other alcoholics he might thereby help himself. He went to work and found himself able to stay sober for the first time in years. But something was missing because the drunks on whom he worked stayed drunk. He was on the verge of quitting and thus relapsing when he met another drunk in Akron, Ohio. It then dawned upon these two that help must flow two ways. One-sided preaching was useless, but when help was mutually offered and accepted between two suffering, sick and desperate drunks, each of whom sought to help himself by helping the other, a new and successful element entered into the previously hopeless situation. Thus A.A. began in 1935. By the end of the year it had three members. By the end of another year it had fifteen. Since then it has evolved into a membership of 120,000, divided into more than 4,000 local groups.

In some ways A.A. is very un-American. It has almost no money. It has no formal organization. There are no pledges or constraints, no quotas that have to be filled, no records that have to be kept. Seniority confers no favors. No one is ever solicited to join. A man or woman becomes a member by simple declaration. A.A. has only one purpose: to help the sick alcoholic recover, if he wishes.

A.A. ranks are as diverse and exclusive as a telephone directory. In a world where spiritual values have dropped close to the vanishing point, it bases

its entire proposition upon the reality of a spiritual experience. It achieves unity because each member, "for whom one drink is too many and a thousand not enough," has acknowledged his inability to deal with a circumstance that most people can meet with ease. The group is knit by a common experience, by the deep seated recognition of the fact that they each have a problem that is bigger than themselves, and by the knowledge that the security of the individual rests on the security of the group.

Anonymity is of immense significance to the A.A. because it reminds him to place principles above personalities. On the other hand, no member has any desire to conceal his identity or the fact that he is a member of the group. All are in debt to the medical profession because practically all have a record of one or more alcoholic admissions to hospitals. They would like to repay this debt in some small way by helping doctors care for their alcoholic patients. But they can help only if they are wanted.

—Sangamon Co. (Ill.)  
Medical Society Bulletin

## SEMINOLES WANT WAMPUM

The Seminoles, who along with other Indian tribes, have "enjoyed" federal security for many years, now seem to feel that Uncle Sam "gypped" them out of land worth more than \$43,753,796. Oklahoma Seminole Indians have instituted a suit for that much. George Dixon reports, "The Oklahoma tribesmen aver they were forced into a deal whereby the defendant—Uncle Sam—acquired 31,078,400 acres of their choicest property for less than half-a-cent an acre, and an additional 4,032,640 acres of high-class real estate for absolutely nothing.

"They aver that even in those days of low price their land was easily worth a dollar and a quarter an acre; that, in fact, it was sold to homesteaders almost immediately after the grab at not more than \$1.25 an acre."

By George Dixon in  
Columbus Dispatch, Jan. 11, 1952.

## GOLF

Golf increases the blood pressure, ruins the digestion, spoils the blood pressure, induces neurasthenia, hurts the eyes, callouses the hands, ties kinks in the nervous system, debauches the morals, drives men to drugs, drinks and homicide; breaks up the family, turns the ductless glands into internal warts, corrodes the pneumogastric nerve, breaks the edges off the vertebrae, induces spinal meningitis and progressive mendacity, starts angina pectoris, and breeds wind on the stomach. But golf keeps the doctors out in the open air, and gives the people in hospitals and sick-rooms a chance to get well. Public health is better because of golf, generally speaking.

—Sioux City Punch.

A communists is a man who has given up all hope of ever becoming a capitalist.

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## DUES ARE DUE

Dues for the Pierce County Medical Society are considered past due after the 15th of April, according to our by-laws. Please send yours in the office before it becomes necessary to send you a reminder.

## THE FARMER'S STAKE IN THE STEEL WAGE CONTROVERSY

By Fred H. Sexauer

The 16c per hour increase the steel union is demanding is just about what the total hourly earnings of farmers was 20 years ago. But this 16c per hour is what the steel workers' union is threatening to strike for in the midst of the great defense preparation in which steel is held to be vital. Not 16c per hour, but 16c per hour more than the \$1.98½ per hour now received on the average by steel workers. If they get it, and they threaten our defense effort if they don't, the average wage will then be \$2.14½ per hour.

Now, another 16c an hour for steel workers means something for farmers. It means higher costs. For the moment, we'll leave to others the question of whether it is really justified.

Farmers average to work 70 hours per week—so says the United States Department of Agriculture. Their average hourly income is approximately 80c—that is \$2800 per year. To get this they must provide themselves, through savings or borrowings,

with about \$12,000 per worker for capital purposes.

The steel worker at \$2.14½ per hour for a 41 hour week would get \$4,573 per year, and not he but the share owner would have had to save the money with which to provide him with facilities and tools.

It is the steel officials' job—and not the farmers', to worry about the share owners who want an increased return on their savings, through dividends, so that they too can meet inflation costs. But the aged, the widows, orphans and even Mr. Average Citizen himself, who has saved money out of his earnings, are human in their needs—for shoes and food and for a decent place to live. And it doesn't make much difference either whether those savings are savings of today or of 20 years ago.

Perhaps we should not worry too much about the steel executives with their larger-than-average salaries. But they, too, are needed for, to run such a business successfully, men must have better than average brains; and it is brains, not brawn, that make a successful farm or business operation. It takes brains, from the floor sweeper to the crane operator, but it takes more in the realm of management. Only when brains are mixed with brawn does brawn accomplish anything worthwhile, and brain power varies among men as the depths and altitude of valleys and mountains.

But let's get back to the wage increase as it

(Continued on Page 27)

# GLYKERON

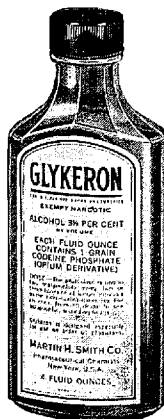
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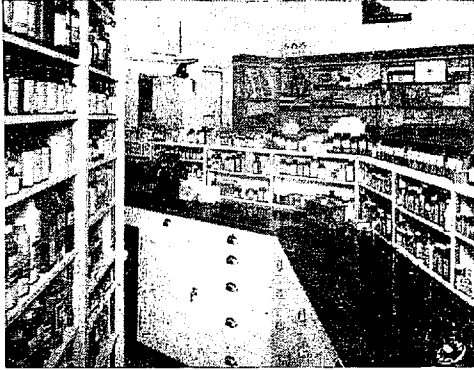
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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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(Continued from Page 25)

affects farmers. Directly or indirectly, the farmer is a heavy user of steel and steel products. The tractor, the combine—the truck, the corn picker—the harrow, the drill—the stanchions, the milking machine—the pumps, the pipes—the gates, the fencing—the cooler, the field chopper—the wagon, the baler—the building materials, the roofing; and in the home, the stove, the plumbing—the freezer, the washer—and on and on, adding to tons and tons and tons of steel.

But the farmer uses and helps pay for other steel as well. He uses and helps pay for the steel in the trucks and railroads and ships that transport the products of the farm and the supplies that he uses.

He uses and helps pay for the steel in the milling plants, the fertilizer plants and the feed mills that process his products and supplies.

He uses and helps pay for the steel in the forge shops that make the parts for his equipment, for the steel in the manufacturing plants that build his farm machinery and the auto and household equipment that he purchases; for the steel in the pipelines that transport the oil and gasoline that he buys.

He uses and helps pay for the steel in the plants that manufacture his telephone, and television, and that print his magazines.

Yes, he uses and helps pay for the steel used in his community school; and even that used by the army and navy, and teachers for whose support he is taxed.

Any increase of wages in steel must be, and eventually will be, reflected in increases in the price of things which the farmer buys, uses, hires—or the services he has to pay for.

But had as such increases may be, the load which will come to him will yet be still heavier.

No segment of our labor group can long stay high above another which exercises equal diligence and skill. Particularly is this true if other groups have equally ruthless, ambitious or heedless leadership, and are able to exercise monopolistic power with which to tie up an essential industry, or a segment of it, in order to enforce their demands.

Who is so naive as to think that such an increase in steel will not lead to an equal drive in coal and oil, in transportation and utilities, in manufacturing and processing, in mining and smelting, in service trades and among civil servants?

And one would be naive, indeed, to think that all will not eventually be affected.

Then, a similar course in price increases in these products and services must inevitably follow. Just as poison seeps through the bloodstream, so the price increase will seep through our industrial and social fabric.

It will show up, not as \$8 per ton or \$16 on a 4,000 lb. tractor, but as \$200 on a 2,000 lb. tractor or 10% increase in cost. It will appear as 1c or 2c per gallon increase in gasoline; 10c per rod in fencing; and, finally, it will show up as \$300 on the teacher's or policeman's salary; or a 10% increase in the cost of food.

It will show up in increased cost of rearmament and, finally, in taxes.

To the extent that steel wages are increased, and while the teacher or policeman gets no larger salary, or while the farmer gets no more for farm products, these wage increases will rest upon their shoulders as an additional weight.

In the long run, the effect of this wage increase will be borne by the farmers, white collar workers, small business and all other groups in and out of civil service who do not have, at hand, a monopoly control over a vital industry that can be coerced to milk the rest of us for the benefit of the ambitious union leaders.

The steel companies, when they yield either to the monopolistic force of the steel union or the pressure of union-leader-dominated government, will be but the instrument by which our earnings will be squeezed out for the benefit of one of the presently highest paid labor groups in the nation.

This is something for each of us to ponder over. Isn't it time for farmers and their wives and friends to protest to The-Powers-That-Be in Washington? They will be speaking not only for themselves but for housewives, white collar workers, and the whole consuming public that lacks such monopoly power as the steel workers' union uses to take advantage of all other groups.

—The Committee for Constitutional Government, Inc.

#### GOOD REASON

"It was this way, Judge," the defendant explained. "I was in a phone booth talking to my girl and this guy grabs me by the collar and pulls me out."

"So you got angry and hit him?"

"Well, I got angry but I didn't get real mad and hit him 'til he grabbed my girl and threw her out too."

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## JOINT COMMITTEE ON MEDICAL EDUCATION

*(Excerpts from the statement of Dr. Stockton Kimball representing the Joint Committee on Medical Education in time of national emergency, to the Committee on Armed Services, House of Representatives, concerning the report of the National Security Training Commission.)*

The Joint Committee on Medical Education in Time of National Emergency represents two independent and separate national organizations that are primarily concerned with medical education, one being the Association of American Medical Colleges, the other being the Council on Medical Education and Hospitals of the American Medical Association.

The Joint Committee does not consider it its function to take a position for or against the principle of Universal Military Training. The purpose of our testimony is to urge that if the Congress decides to establish a program of Universal Military Training, provision be made for an adequate, continuing flow of students through institutions of higher education. Only thus can the requirements of the Armed Forces and the civilian population for physicians, dentists, engineers, intelligence officers and other specialized personnel be realized.

We wish to emphasize that the Joint Committee endorses the principle that all citizens should serve their country and, therefore, firmly believes that those deferred under the provisions of Public Law 51 for special education and training should be, in fact, deferred and not exempted. From a study of Public Law 51, particularly Section 6(b) and (f), we are impressed with the belief that the Congress has recognized the importance to the national health, safety and welfare of permitting those who have the potentiality of serving the nation best after special training to continue without interruption their course of training until it is completed.

With this belief in mind, the Joint Committee testified before the National Security Training Commission in opposition to a requirement that would make it necessary for college and professional students to interrupt their training at age 18½ to take six months of basic training and in opposition to a program that would place these men in the Reserve Corps for seven and one-half years immediately following their basic training.

The Joint Committee's basic belief that the interruption of the training of potential specialized personnel is undesirable in the national interest is unchanged. In view of the fact, however, that the bill drawn up by the National Security Training Commission provides for a universal six months' basic training with inductions scheduled monthly and for voluntary inductions at convenient times of the year, it is our Committee's belief that if all colleges and high schools would adjust their schedules to this six months' period, such a program might possibly be put into effect without producing a serious interruption of the educational process.

On the other hand, the requirement in the proposed bill that all men on completion of their basic military training enter the Reserves for a period of 7½ years, carries a grave threat to the continuing production of the trained specialist essential to national defense. Under such a program all able-bodied future specialists would be subject to the possibility of prolonged postponement or interruption of their training by a call to active military duty. This danger and the need for a safeguard is recognized by the National Security Training Commission. The Joint Committee strongly urges implementation of the suggestion made in the report of the National Security Training Commission but not included in its proposed bill—namely, that the 7½ year reserve liability be postponed until students have completed or discontinued their graduate or professional training.

The Joint Committee further believes that any bill that is adopted should provide assurance that the selection of such students and of their educational programs will remain in the hands of the individual colleges and universities. If such assurance were not given, the possibility would exist that the power to select students for further education and the decision as to the courses of study these students could pursue might be assumed by the National Security Training Commission or some other agency of the federal government. To prevent loss of further time or the possibility that the student, before he can be selected for entrance into college, will be ordered to active duty, the bill should provide specifically that before or during the period of basic training colleges may select those students who are to be allowed to continue their education.

The Joint Committee wishes, however, to re-emphasize the position it took in testimony before the National Security Training Commission, namely, that in preference to the proposals in the bill submitted by the National Security Training Commission, the Committee concurs in the recommendations contained in the report of the Six Scientific Advisory Committees to the National Director of the Selective Service System dated December 1, 1950, which: (1) urge that a student whose aptitude or previous accomplishment indicates that he can make his best contribution to the nation as a trained professional man be placed in a classification or category that will permit him to continue his education uninterruptedly, (2) that a student qualifying for such classification, should be so classified before or at the time he reaches the age for induction for training or service, and (3) that his basic military training be postponed until his specialized education is completed, or until he ceases to pursue his education satisfactorily.

It is urged that a plan similar to that suggested by the Scientific Advisory Committees and later adopted with slight modifications by the Selective Service System be used to implement such a classification in a program of universal military training. This plan provides for defining educational aptitudes as a specified minimum score on a general

*(Continued on Page 31)*

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(Continued from Page 29)

classification test, or a record of previous educational accomplishment sufficiently high to indicate genuine promise of eventual scientific, professional or specialized competence.

The advantages of such a plan for the deferment of promising students are several. It insures that the selection of students will remain in the hands of those most fitted to exercise this function—the colleges and the universities themselves. It avoids the loss of valuable time which could result from requiring those who are able to continue their education to interrupt their studies for a period of six months of basic training. This period represents a diversion of time and effort which might better be spent in the planned sequential educational program. Further, if students should be required to be inducted and go through basic training before acceptance into college and before discovering whether they are to continue their studies, it is likely that for at least the year preceding their induction the uncertainty of their future course would seriously distract many of them from their work.

Another definite advantage of the plan we have suggested is that it would make available to the training program specialized personnel in several categories. Thus, for example, those students who are deferred from military training and service until they complete their medical education would then be available to serve their period of obligatory training and service as medical officers in the universal military training program. In this manner it is likely that an adequate force of medical officers could be available regularly for the universal military training program without the necessity for special legislation requiring certain groups to give additional service after once having gone through the basic training program. Since it provides that any student deferred from training or service will be liable for such training and service for eight years beyond the age at which such liability ends for those not deferred, Public Law 51 insures that students deferred for special training will eventually be available for service as specialized personnel.

—*American Medical Association,*  
*Bulletin 41—Washington, D. C.*

## TRIPLE BROMIDES

### ASSORTED MIX

The Army Institute of Pathology has two and a half million histopathologic slides available for microscopic study . . . The Woman's Medical College of Pennsylvania is not co-educational . . . 2,313,045 veterans were drawing a pension in 1949 . . . Zanzibar, the main source of cloves, is governed by Sultan Khalifa Ibn Harib—if that doesn't sound like a sneeze, what does? . . . maybe the name of the Hungarian Medical School — Magyar Kiralye Pazmany Tudományegyetem Orvosi Fakultasa, Budapest. Gesundheit.

Headline in a Massachusetts paper:  
"Father of six children places blame on wife."

## PRISON DEBATING TEAM WINS AGAINST CRACK OXFORD TEAM ON STATE MEDICINE

Frank G. Dickinson, director of the A.M.A. Bureau of Medical Economic Research, coached two "boys" on a debating team who took the negative side of the subject: "Resolved: That this House recognize the need for a free National Health Service."

The affirmative side was taken by two young students from Britain, members of the Oxford University debating team.

A great deal of literature and statistics was sent by both Dr. Dickinson and the A.M.A. Council on Medical Service to Murdo, the Robber, and Bill, the Bad Check Passer. They were members of the debating team of the Norfolk State Prison Colony at Norfolk, Mass.

The two teams debated the subject before an audience of 600. The judges were former Governor William S. Flynn of Rhode Island, Justice Harold Williams of the Massachusetts Supreme Court, and Dean Erwin N. Griswold of the Harvard Law School.

The judges' unanimous decision was a victory for the Norfolk prison team.

In a "letter of appreciation" to Dr. Dickinson later, Bill, the Bad Check Passer, said that this was the first time the British team had been defeated in 52 debates in which it had participated throughout the eastern part of the United States. In most of the debates, the free national health service subject was discussed. After the prison debate the audience voted, too. The vote was 4 to 1 against.

Bill, the Bad Check Passer, said he thought he clinched the decision of the judges with:

"Guests of Norfolk, voluntary and involuntary, a free national health service will not make medical service better, but worse. The neurotics and malingerers will swamp our doctors and make it impossible for them to tend the really sick. I have been an unwilling native in a socialist Utopia for some time, and I know it will not work. . . . This talk of free service is just political camouflage."

His argument apparently did the trick.

—*A.M.A. Secretary's Letter.*

### LANGUAGE DIFFICULTIES

For those of you who have a few foreign patients, herewith is published the word, DOCTOR, in eight languages:

Swedish—lakare  
Danish—Laege  
Dutch—dokter  
German—der Arzt  
French—le docteur  
Spanish—el doctor  
Portuguese—o doutor  
Italian—il dottore

"To me, old age is always fifteen years older than I am."

—*Bernard Baruch.*

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### GENERAL PRACTITIONERS (Breakfast Club)

Second and fourth Saturdays—8 a.m. at the New Yorker

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club



*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 8

TACOMA, WASH.

APRIL - 1952



TACOMA NARROWS BRIDGE

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1952

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Managing Editor .....	Katherine Rogers
Auxiliary News Editor .....	Mrs. T. B. Murphy

## Meeting of the Pierce County Medical Society

Tuesday, April 8, 1952



## Joint Meeting with the Staff of Madigan Army Hospital

Time: 6:00 P. M.

Place: Officer's Mess



## NOTICE

Check back page of Bulletin for calendar  
of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

### **HOW GOOD A MEMBER ARE YOU?**

The Principles of Medical Ethics states under Article I "Duties of the Profession," Section 2, "Membership in Medical Societies":

"For the advancement of his profession, a physician should affiliate with medical societies and contribute of his time, energy and means, so that these societies may represent the ideals of the profession."

In reviewing the attendance records of our society for recent years, we find that the average drops as low as 30-40%—evidence that there must be a lack of interest and feeling of personal responsibility. To have a 100% attendance record requires only 8-9 meetings of each member per year. Locally there are, however, three regular hospital staff meetings monthly, surgical club, internist society and other specialty groups which have their regular meetings. That adds up to a good many meetings each month, and with other civic organization meetings, one can possibly count on only one or two evenings a week at home. We like to be loyal to all; each has its benefits and interest, and for the most part is for the advancement of the profession. Nevertheless, these should not be allowed to detract from our Society meetings which should be given top priority. This is your organization—you enjoy its privileges—it needs YOU.

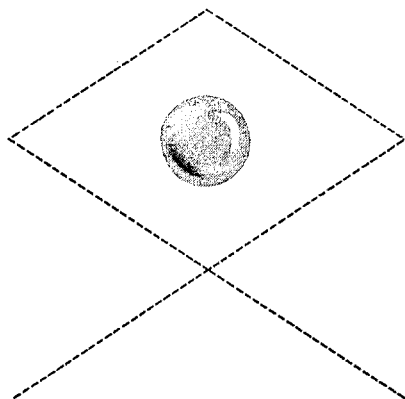
W. H. GOERING, M. D.

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Ascorbic Acid (as Sodium Ascorbate)	100 mg.
Alphatocopherols	5 mg.
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Vitamin D 1,000 U.S.P. or International units	

and also furnishes (approximate amounts):

Iron (as Ferrous Sulfate)	15 mg.
Copper (as the Sulfate)	1 mg.
Iodine (as Potassium Iodide)	0.15 mg.
Cobalt (as the Sulfate)	0.1 mg.
Boron (as Boric Acid)	0.1 mg.
Manganese (as the Glycerophosphate)	1 mg.
Magnesium (as the Oxide)	5 mg.
Molybdenum (as Ammonium Molybdate)	0.2 mg.
Potassium (as the Chloride)	5 mg.
Zinc (as the Chloride)	1.5 mg.

## ***Editorially Speaking . . .***

If the average prospective father were flatly told that he was incompetent, as an individual, to manage his own affairs, he would, and, I believe, should, feel that he had been insulted. Our fair dealer friends seem to believe that if you thusly insult enough people at a time there is political capital in the maneuver. There are before Congress two bills which would reactivate the E.M.I.C. program of World War II with some modifications. Each of these measures would furnish medical services for expectant wives of enlisted men, obstetrical services, and medical services for their children. At present, committee hearings are being held to determine whether or not there is need for such a program. A counterproposal was made, that if real need were shown, the expectant enlisted man's family would be furnished with a cash payment.

Leona Baumgartner, M.D., Assistant Commissioner of Health, New York City, speaking in behalf of the American Public Health Association stated, "We have concluded that any proposal which involves direct cash payments to the family for the purchase of medical care is unsound." Marjorie Shearon had the following comment to make on this testimony, "She (Dr. Baumgartner) mentioned the fact that one solution to the problem would be to provide maternity cash benefits. She cast out that suggestion, saying there would be no way to be sure the money was spent for maternity needs. In other words, families cannot be trusted to spend their own money wisely, and a mother facing maternity would spend the money on riotous living."

If Dr. Baumgartner's testimony were rephrased to apply to an individual enlisted man, I would call it insulting. The colossal arrogance of a representative of the fair deal attitude in insulting all enlisted men en masse by virtually calling them incompetent to manage their ordinary affairs is startling. It would seem that if you insult enough people at a time it may be worth votes.

HOMER W. HUMISTON, M. D.

## RESEARCH STUDY ON SMOKING APPROVED BY PENNA. DIVISION AMERICAN CANCER SOCIETY

The Pennsylvania Division will play a leading role in the American Cancer Society's unprecedented research study on smoking which will require the wholehearted cooperation from two to five years of nearly 10,000, volunteer workers throughout the Commonwealth.

The project, a volunteer statistical research program advocated by National, has been approved by the Division's executive committee and the Cancer Commission. Plans now are being advanced to start it immediately in 34 of the counties which have established headquarters. L. F. Gerber, the Division's executive director, said if any of the other County Units desired to join in the survey they would contact their Field Representatives.

Objectives and purposes of the survey were explained by Dr. E. Cuyler Hammond, Director of Statistical Research Section for the ACS, in a meeting just held at Harrisburg, when he pointed out that lung cancer appears to be on the increase and medical science is desirous of learning if this has any relation to smoking.

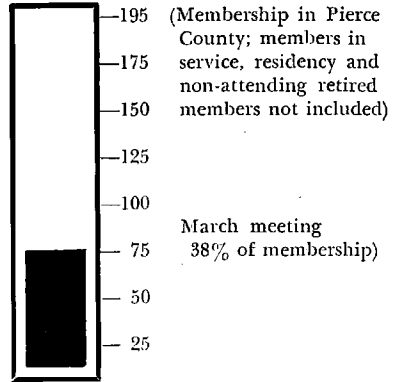
"With one striking exception, namely, cancer of the lung which is increasing at an alarming rate, the age adjusted death rates for other types of cancer have changed little in recent years." Dr. Hammond told the volunteers. "Our research program is aimed at finding means of preventing or of detecting and curing those cases which at present are all but hopeless. Needless to say, our first choice, if we had a choice, would be to prevent cancers from developing. This is the objective of the science of epidemiology. And the objective of the epidemiological study we are beginning is to determine whether or not smoking is a contributing factor in the development of lung cancer—and if so, to what degree.

### Meeting with Madigan

Colonel Max Naimark, of Madigan Army Hospital, has invited the Society to a joint meeting with the staff of the Hospital. Cards are in the mail giving you the data on the meeting, and if you expect to be able to attend the meeting please return the attached card so that we may inform Colonel Naimark of the approximate number who will be there. If you failed to receive a card, please call the office and make a reservation for the meeting. The meeting includes a fine dinner so prepare to go and have a good time.

One of the prominent nose and throat specialists who endorses a cigarette by saying it never irritated his throat — was absolutely honest — because he never smokes.

## ATTENDANCE THERMOMETER!



## REASONS FOR PATIENT DELAY

Of 329 clinic patients studied to determine why so many shun medical care, two-thirds didn't see their doctor until they were in acute distress or under social pressures.

In this study, a patient was guilty of delay and poor medical habits if, after symptoms appeared, he waited three months or longer before consulting a physician or if he refused advice or referral to a suitable physician, hospital or clinic.

Two facts stood out: age and education.

More than two-thirds of the patients more than 60 years of age were doctor dodgers, in contrast to less than one-half of those less than 60. Of those who had not gone beyond grammar school, 57.3 per cent had poor medical-care habits, compared with 42.7 per cent of those who had some high school training.

Sex made little difference—58.5 per cent of men and 49 per cent of women were doctor dodgers. Economic status was no significant statistical factor, although some reluctant patients cited costs as a consideration. First-generation Americans were more medical-care conscious than second-generation Americans.

—C. A. Newsletter, American Cancer Society.

## Karen Rynning

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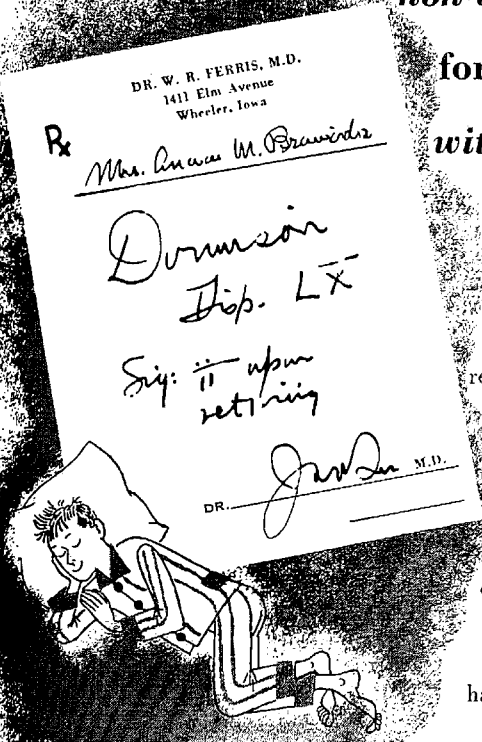
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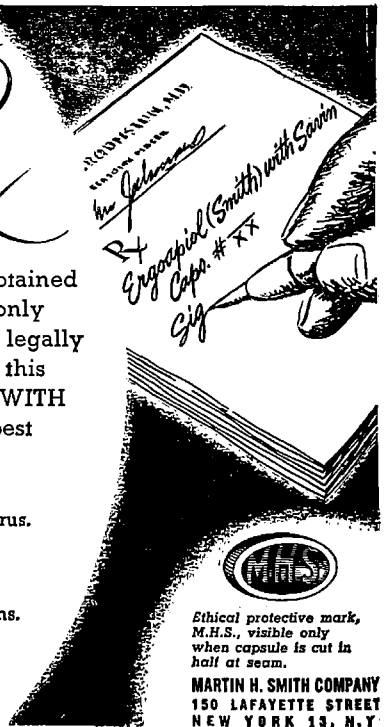
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# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

Members of the Pierce County Medical Auxiliary will meet Friday, April 11, for luncheon at the home of Mrs. T. B. Murphy, 803 Stadium Way. "Let's Bring Spring Indoors" is the subject chosen by Mrs. Wm. M. Goering, guest speaker of the day. Luncheon Chairman Mrs. W. R. Govan will be assisted by Mesdames Lester Baskin, Paul Bondo, Hillis Griffin, John Gullikson, Charles Kemp, George Kunz, Herbert Meier, J. V. Schwind, C. P. Larson, S. S. Sanderson, Wm. Rosenblatt.

\* \* \*

Dr. and Mrs. Myron Kass and daughter Debbie visited Dr. Kass's parents in New Orleans during February, arriving in time to take in the Mardi Gras festivities. Dr. Kass returned to Tacoma, while Gay and Debbie went on to Boston to spend a month with Gay's parents.

\* \* \*

Maxine and Bill Rosenblatt just returned from a vacation of several weeks in Palm Springs. Returning north, driving through snow, they passed Florence and John Gullikson sitting in the ditch. They were heading south for points unknown.

\* \* \*

Sandy and Lou Rosenblatt are planning a short trip to Harrison Hot Springs this week. Maybe they'll be able to find some sunshine up north.

\* \* \*

Several requests have been made for the Green Rice recipe introduced by Kay Anderson and Kay Willard at Emma Bonica's luncheon. Here it is.

- ½ cup melted butter
- 1½ cups top milk
- 2 beaten eggs
- 1 cup parsley
- 1 gr. pepper
- 1 clove garlic (optional)
- 1 small onion
- 1 cup grated sharp cheese or pimento
- 2 cups rice
- 1 teaspoon salt
- ½ teaspoon pepper

Add melted butter and milk to eggs, put parsley, green pepper, garlic, and onion through grinder (med. blade). Add to the first mixture and cheese and rice and mix thoroughly. Bake one hour in moderate oven at 350.

## Mushroom Sauce

Sautee one package mushrooms in butter until tender. Add 2 cans cream of mushroom soup undiluted. Thin with cream to desired consistency.

"Hello, Tower—Come in, Tower, I can't see through this fog and am running out of gas. Give instructions."

"Tower to pilot—Tower to pilot. Repeat after me: Our Father, who are in Heaven - !"

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## ANYONE GOING TO ENGLAND FOR A VISIT?

If any A.M.A. member is planning a visit to England in the near future, it may be well for him to communicate with the office of the secretary of the A.M.A. and possibly satisfactory arrangements can be made to utilize A.M.A. funds which are held in escrow by the British Medical Association.

Dr. George L. Lull, secretary-manager, American Medical Association, received this letter recently from E. Grey Turner, assistant secretary of the British Medical Association:

"You will remember that the A.M.A. has very kindly cooperated with us this year (1951) in a scheme by which three members of the B.M.A. have been enabled to visit the U.S.A. and have been provided with substantial funds of U.S. dollars on arrival. From our point of view this scheme has been a great success and we are immensely grateful to your association for its cooperation. . . . I believe that if the A.M.A. is prepared to repeat the same arrangements next year (1952), the Bank of England would probably be prepared to give us permission. . . . Incidentally, we are still holding 580 pounds sterling here which is owing to the American Medical Association in return for the payments of dollars which you kindly made to our members visiting the U.S.A."

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Katherine Rogers, Librarian

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Has anyone seen St. Joe's copy of Goodrich's *Natural Childbirth*? Mrs. Erickson reports that it is missing and would like to have it back.

\* \* \*

All the completed periodicals are in the process of being bound so once again I make the plea to return any unbound magazines that you have out. If you are getting tired of this message, think how I feel about it. Maybe if I started fining all you recalcitrant members you'd be more prompt about returning material. To those of you who have returned late material without being sent a reminder, my many heartfelt thanks; to the rest of you, boo!

\* \* \*

**A Sample of Interesting Articles from the Library**

In the January issue of Postgraduate Medicine is an article that must, at one time or another, be of interest to most doctors. *Detection of the Dangerous Paranoid Patient* by Drs. Ian Stevenson and Robert A. Matthews. The foreword to the article says "Of all patients with paranoid delusions, only some are potentially dangerous and by no means do all of these become assaultive or homicidal. It is important for physicians to be aware of the potential dangers of paranoid patients and it is equally important for them to be sensitive to the signs of a change in equilibrium within the patient which may lead him to become dangerous. This article discusses clues leading to detection of potentially dangerous patients and of potentially dangerous situations, and describes signs of impending danger."

This article is not written for the psychiatrist, but for the doctor whose practice may inadvertently include a hitherto undetected case of incipient paranoia. It gives very definite clues by which the doctor may be warned of the submerged dangerous personality before it breaks out in the open and becomes an unmanageable problem.

\* \* \*

Sometimes there is an article in a technical or medical journal that is so pertinent to everyday living, one that is so applicable to the average lay person that it is unfortunate it cannot be thus utilized. Such an article is *Food Refusal in Children* by Dr. R. S. Illingworth in the December issue of the *Journal of the Royal Institute of Public Health and Hygiene*. It is a commonsense article that many mothers would do well to consider before they force food down their protesting children's throats. The author says, "By far the commonest cause of food refusal is food-forcing. Practically every case of poor appetite in children who are free from organic disease is due to this. . . . It would be surprising if nature failed to equip human beings with an appetite sufficient for their needs, and yet had remembered lambs, calves and other animals. for one does not see animals having

to be forced to take their food. . . . The absolute essential in treatment is to stop all forcing."

\* \* \*

For the benefit of some of our new members, possibly for some of the older ones, there is an article in *Northwest Medicine*, March 1952, that will be helpful in explaining the organization and operation of the Washington State Medical Defense Fund. The history of its organization and later organization, the reasons for its existence and the benefits to be derived from it are explained thoroughly.

\* \* \*

**Postgraduate School Announcements**

The Michael Reese Hospital Postgraduate School is offering the following courses:

Surgery—Indications. Pre- and Post-Operative Care April 14th to 18th.

Clinical Dermatology—Refresher Course in Diseases of the Skin for General Practitioners. April 21st to April 25th.

Diseases of the Endocrines—Physiology and Diagnostic Methods April 28th to May 9th.

Recent Advances in Internal Medicine—May 12th to May 24th.

Recent Advances in Pediatrics—May 26th to May 31st.

Additional information may be obtained by writing to Dr. Samuel Soskin, Dean, 29th and Ellis Avenue, Chicago 16, Illinois.

\* \* \*

The University of Washington is offering courses in Gynecology (April 21 to 24th), Gastro-intestinal Diseases (date to be announced). Recent advances in Cardiology (date to be announced), Obstetrics (July 7th to July 11th), Pediatrics and Preventative Medicine (July 14, 15 and 16), Practical Psychiatry (July 21 to July 25th). Information regarding fees and hours may be obtained from the University of Washington Medical School.

**GOV. JOHNSTON MURRAY**

"You have been able to scare the very brutes off the politicians, and to date have been able to fend off the advances of the socialistic trend, but you and I both know you haven't stopped it by any means. . . . During all of this light you have failed completely to rally a militant public opinion to your support. . . . What about your neighbors across the alley or your patients who live on the other side of the tracks? Will they come to your rescue? You know they haven't, and unless some changes are made, they probably won't. On the contrary, they may, all too soon, be found casting off their state of lethargy and aggressively joining in the battle against you. When and if this happens, you can kiss your political influence goodbye."

—Governor Johnston Murray, addressing the  
Tulsa County Medical Society.

Little Moron: Have you heard about the little moron who swallowed five pennies and then ran around asking people if they saw any change in him?

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# The Hospitals . . .

## PIERCE COUNTY

Geraldine Ackermann of the laboratory is vacationing at Sun Valley. Her letters tell of skiing, new and old acquaintances and other pleasures she is enjoying at the Challenger.

\* \* \*

The Social Service department of the hospital was sorry to lose two of its members recently. Mrs. Donna Stokes with her husband, W.O.J.G. Henry Stokes and her children, Patricia and Richard, left for Japan.

Mrs. Katie Rives has joined her husband, Jerry, at Fort Sill, Oklahoma, where he is attending Officers' Training School.

\* \* \*

Two new members have joined the Social Service ranks: Miss Rosalie Slocum, a social worker and Mrs. Doris Shelton, secretary.

\* \* \*

Dr. Pollard has just returned from San Leandro, California, where he visited his sister for a week.

\* \* \*

Miss Lillian Wilson, who has efficiently served as evening and night supervisor at Pierce County Hospital for twelve years, is now Assistant Superintendent of Nurses at this hospital. Mrs. Veronica Bailey has taken Miss Wilson's former position. We extend our heartiest congratulations to both and wish them success in their new ventures.

\* \* \*

Mrs. Bradley, Pharmacist, attended the Post-graduate Refresher Course of the College of Pharmacy at the University of Washington Medical School on March 17 and 18. She reports attending lectures under such outstanding instructors as Dr. Herbert S. Ripley, Dr. Robert Davis, Dr. Stuart W. Lippincott and Dr. Leland Powers.

\* \* \*

Miss Ann Bligh has recently joined the staff of the clerical force of the hospital as secretary to Mrs. Lehto, dietician.

\* \* \*

Mrs. Winifred Taylor of the dietetics department is at home from the hospital and is rapidly recovering from her recent illness.

\* \* \*

Mrs. Rosa Ogden is now serving as secretary to the Superintendent of Nurses.

\* \* \*

Dr. and Mrs. Charles Vaught are the proud parents of a son, William, born at Pierce County Hospital on February 12, 1952.

\* \* \*

As the result, to a large extent, of generalized confusion at the initiation of the medical program Initiative No. 178, and at a joint meeting of Dean Edward L. Turner, University of Washington Medical School, Dr. Edwin S. Bennett, Superintendent of Harborview Hospital, the Boards of Trustees of the two hospitals, Dr. Kahl, Dr. Dewey, and myself, suggestion was made that inasmuch as the welfare

medical program was in such a complete mess, it might be desirable in terms of further planning to provide for a study to be made by a total outsider familiar with medical programming, in an effort to perhaps outline further planning to obviate the discrepancies and unfairness of the present initiative. After some ten months of correspondence, we were usually fortunate in obtaining the services of so well-known an authority as Dr. Arthur Bachmeyer.

In Dr. Bachmeyer's study of the Pierce County Hospital, interest was intensified in the specific administrative channels by which all medical matters were handled and finally, the manner in which this administrative pattern dovetailed into, and in some areas conflicted with, basic precepts of the welfare medical program. It is sincerely hoped that the written report of this fairly exhaustive study will be of specific benefit to the medical profession of Pierce County.

*Supt., Pierce County Hospital*  
—J. Morrison Brady, M.D.

## TACOMA GENERAL

Walter A. Heath will be one of the speakers at the Hospital Conference of the American College of Surgeons in Vancouver, B.C., on March 31. His subject is "Hospitals for the Chronically Ill."

\* \* \*

Dr. George Mores of Calgary, Alberta, has spent the past month as a visitor in the Department of Anesthesiology, observing techniques as practiced here.

\* \* \*

April 27 has been chosen as the date for the Capping Ceremony for the Class of 1954. It will be at the First Methodist Church at 2:30 p.m.

\* \* \*

Dr. Eric W. Stern of the Interne Staff has accepted a residency in Anesthesiology for the next year at Tacoma General Hospital.

\* \* \*

The Western Branch of the Washington State League of Nursing Education held a meeting in Bellingham on March 21. It was attended by Miss Helen Mar Jewett, Miss Jean Schenk, and Miss Helen Johansson of the Faculty of the School of Nursing. The main topic for discussion was the results of the last State Board Examinations.

\* \* \*

Miss Rebecca Swanson, Clinical Instructor in Obstetrics, will leave on March 29 to attend the Fifth American Congress on Obstetrics and Gynecology in Cincinnati, Ohio. Sponsored by the American Committee on Maternal Welfare, it will be attended by physicians, nurses, and public health workers.

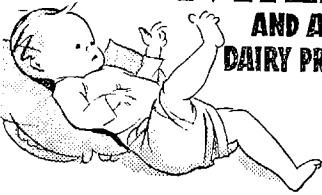
\* \* \*

Miss Borghild Robertson and Dr. Charles Larson of the Tacoma General Staff and the 359th General

(Continued on Page 15)

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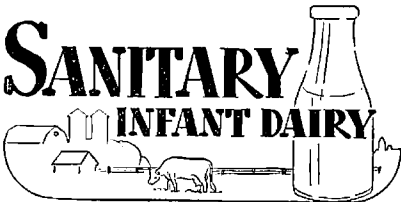


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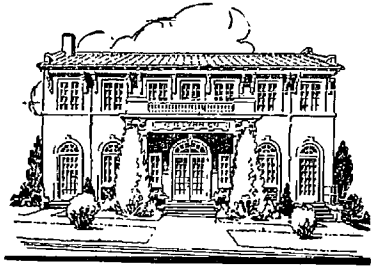


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(Continued from Page 13)

Hospital U.S.A.R. attended a five-day course at Treasure Island on the "Medical Aspects of Special Weapons and Radio-Active Isotopes."

\* \* \*

The Hospital Pharmacists of the Puget Sound Area held their March meeting at Jackson Hall, with Tacoma General Pharmacists, Viora Strait and Fred Boehm as hosts. A talk by Dr. Frank Rigos on "Radiopaque Materials" provided the program. Ice cream, cake, and coffee were served.

\* \* \*

February additions to the Medical Library at Jackson Hall are, "A Textbook of Clinical Pathology" 4th Edition, edited by Seward E. Miller, and "Doctor and Patient and the Law" by Louis J. Regan.

## VETERANS ADMINISTRATION

American Lake, Washington

Kurt Blau, D.S.C. of 909 Broadway has recently been added to our staff and conducts a foot clinic weekly.

\* \* \*

Dr. Theodore C. Ruch, Professor of Physiology and Executive Officer of the Department of Physiology and Biophysics, University of Washington School of Medicine, gave two illustrated lectures at this hospital, the first lecture was on "Present Day Knowledge of the Diencephalon" and the second one on "Present Day Knowledge of Cerebral Localization."

\* \* \*

The graduate nurses are doing something new and interesting in their inservice education conference. With Dr. Gertrude Harrow as group leader they are using the techniques of role-playing to improve their skill in dealing with their patients. Here's the way it works: A nurse gives a brief account of a situation on the ward which was a definite problem to her and she is not at all sure she handled it as well as it could have been handled. The leader calls for volunteers from the group to act out the situation, one taking the role of the patient—the other of the nurse. The same problem may be dramatized by 2 or 3 different role players, illustrating different methods of dealing with the same patient. The group then discusses the different approaches, what it liked about them

and what it didn't like. The role players who take the part of patients tell how what the nurse said or did affected them. Those who play the nurse role analyze their reactions to the patient's behavior and attempt to recognize, through discussion, what operated to make them more or less effective in dealing with this particular patient.

It is the consensus of opinion that this technique of role-playing accomplishes something that talks and lectures do not and the nurses definitely feel that by sharing their problem and methods of handling them with each other they are improving their nursing skills.

## WASHINGTON MINOR

Miss Marion Thornton has returned from her vacation abroad, but is not ready to go back to work yet. She reports that she had a perfectly wonderful time. (Who wouldn't!)

## ST. JOSEPH'S

A unit on the second floor has been redecorated and converted into a lounge for the use of our interns, where a television set among other attractions furnishes pleasure and relaxation during off-duty hours.

\* \* \*

Speaking of interns, Dr. Roland D. Benedict is the father of a new son, Jay Stanley Benedict, a real leap year baby, born February 29th. This eight-pound eleven-ounce newcomer rounds out Dr. and Mrs. Benedict's male quartette. He was welcomed to his home by his three brothers.

\* \* \*

Activities at the Nurses' Residence in recent weeks included a formal buffet supper served in the Residence Lounge to members of the Student Body and Faculty on February 14, and a formal supper given in honor of the Graduate Staff on February 22, in the Lounge.

\* \* \*

A most attractive invitation, bearing a beautiful reproduction of our Chapel Altar on its cover, was issued by the Sisters of St. Francis and the Faculty of St. Joseph's School of Nursing, for the capping exercises of the Class of 1954, which was held at three o'clock on the afternoon of March 23 in the St. Joseph Hospital Chapel.

\* \* \*

Sisters Valeria, Baptista, Paul, Sylvina, and Bona Ventura will represent St. Joseph's at the sectional meeting of the American College of Surgeons at Vancouver, B. C., March 31, April 1, and 2.

\* \* \*

Dr. Hinton D. Jonez, M.D., F.A.C.A., Medical Director of the Multiple Sclerosis Clinic will attend the Graduate Instructional Course in Allergy at the Annual Congress of the American College of Allergists, Inc., at Pittsburg, Pennsylvania, April 4th through April 9th, where he will lecture on "The Use of Histamine in the Treatment of Allergic Diseases."

\* \* \*

(Continued on Page 17)

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(Continued from Page 15)

On March 30, from one to four in the afternoon Mr. Frank Fiorino, head of the Clinical Laboratory, will hold open house at the Laboratory for high school and college students who are interested in pursuing Medical Technology as a career.

\* \* \*

St. Joseph's has recently purchased a Beckman Model B Spectrophotometer with flame attachment, for the Clinical Laboratory.

\* \* \*

Staff Nurses added to the Second Floor Surgical Department are: Mrs. M. Henslee, R.N., Mrs. Elizabeth Ecklow, R.N., Mrs. Rita Brink, R.N., and Mrs. M. Voight, R.N.

The hospital also welcomes our new Dietitian, Miss May D'Pfaff, B.S., M.S., R.D. Miss D'Pfaff was graduated from Kansas State College, Manhattan, Kansas, Class of '35 and interned at Johns Hopkins in 1936. She is a native of Baltimore.

\* \* \*

There was a large attendance at the Staff Meeting and Dinner held March 17th, and at the Dinner on March 21st given at the Top of the Ocean by the Medical Staff to the Governing Board and their wives, and to the Interns and their wives.

\* \* \*

The arrival of three sets of twins within the week set a record for St. Joseph's: Boys, identical twins, weighing 3 lbs. 7½ ozs. and 3 lbs. 3½ ozs., to Mr. and Mrs. Clair deLavern; a boy weighing 5 lbs. 10 ozs., and a girl weighing 6 lbs. 7½ ozs., to Mr. and Mrs. Harold Pitts; and boys weighing 7 lbs. 1 oz. and the other 8 lbs. 1½ ozs. to Mr. and Mrs. John Harron. All these parents are Tacoma residents.

\* \* \*

We are proud of our Library at St. Joseph's Hospital. Since its inception by Dr. Arnold less than two years ago, we have grown considerably, thanks to the Sisters of Saint Francis and you men that have donated so generously. We have recently revised our journal subscription list to meet the needs of the internes, residents and staff doctors. We are currently subscribing to forty journals, plus several that are donated by individual staff men. We are binding only fifteen of the key journals and will continue to use the Pierce County Medical Society Library for any extensive research.

Because our library is relatively new we are fortunate in having many recent books. We do not have any books over eight years old and many of them have 1950 and 1951 copyright dates. We are attempting to have basic, current material available in every specialty.

You are welcome to our library anytime. The librarian is in attendance from eight until twelve a.m. Monday through Friday. However, the key is available at the switchboard at all times, but it is necessary that you sign for and return it. We hope that our library can be of service to you.

Take a look at your tax bills and you'll stop calling them "cheap" politicians.

## TACOMA ACADEMY OF MEDICINE

The Tacoma Academy of Medicine will hold its annual meeting on Saturday, May 24th, in Jackson Hall. Full details of the complete program will be given in the May Bulletin. The tentative plans include an all-day meeting with exhibits, motion pictures and a clinical pathology conference during the morning. In the afternoon papers will be presented by guest speakers, and in the evening a paper by the principal speaker will be presented during the banquet.

The Academy hopes to make this meeting even more informative than the previous highly successful meetings have been.

## PAYING THE PRICE OF ANTI-VIVISECTION

Editor:

Well, I see the anti-visectionists are at it again. They sit in the State House in their fur coats and leather shoes, their stomach full of succulent meat and make a heart-rending appeal for cats and dogs.

I have a few suggestions to make. When one of their number is ill, let him not have any of the wonder drugs, for they were developed for human use on dogs. If one of them is born with eruthroblastosis, the murderous disease of the newborn resulting from conflict of positive and negative RH factors in the parent's blood, just let him die because the technique of removing his poisoned blood and replacing it with healthy blood was perfected on dogs.

If an anti-visectionist has a blue baby, by all means let the child live a life of helpless invalidism, for no sincere anti-visectionist could avail himself of the operation, perfected on dogs, which could restore him to health. And of course, if their pets are ill, they also must not be cured, for were not the medicines which can help them too experimented with on their own kind?

Let those who express horror over the animals in the kennels of experimental laboratories pay a visit to the cancer ward of the Children's Hospital or watch a child in the strangling grip of diphtheria or look, if they can, into their sick dog's eyes and deny him help for his distemper.

—Boston, Mass., Traveler.

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## BRITAIN LAYS COSTLY GHOST OF "FREE MEDICAL CARE"

Great Britain is a land famous for its myths and ghost stories. Most of these turn out to be harmless and many prove amusing. One, however, has ended in tragedy. This is the ghost called "free medical care." Today the British people are discovering that there isn't such a thing.

Prime Minister Churchill's new austerity program, supported by a firm majority in the House of Commons, is particularly significant in slashing the cost of Britain's socialized medicine scheme by 21 million pounds, or about \$58,800,000 a year.

Under this bill a charge of up to a pound (\$2.80) will be made for a course of dental treatment, which will include everything the dentist believes should be done. This will save 21 million dollars a year.

A fee of one shilling (14 cents) will be imposed for drugs supplied through hospital out-patient departments. This will save \$1,400,000.

Old legislation provided a shilling charge for prescriptions. The Laborites never enforced this. Churchill will, to save \$33,600,000 annually. Also, patients will have to pay half the cost of wigs, hearing aids, surgical boots, false teeth, spectacles and elastic stockings.

What this means is simply a partial return to reality in England. Most of the cost of medical care will be paid in the form of taxes. But it is recognition that socialism offers nothing "free."

Medical care—everything else in society—must be paid for. If some escape direct payment they soon find, as Britons have, that they pay indirectly—and heavily—in taxation.

For a long while the ghost of "free" medicine and "free" other things fooled people. They were told that taxing the rich would cover the costs. Today, however, that "golden goose" has been cooked. Taxation has so leveled British incomes that of her 50,000,000 people, only 60 had 1950 incomes of \$16,800 or more. So now the heaviest burden of taxation is falling on the small income brackets.

That is why Britain finds that "free medical care" is a ghost story indeed. That is why Americans should take warning and steer clear of the Ewing plan and other proposals for "free medical care" in this country.

Americans will have only the sincerest sympathy for British cousins in this crisis. They have been the guinea-pigs of the socialist experiment, and it will be our folly if we not profit from their sad expensive experience.

—Philadelphia Inquirer.

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## A BELATED, TIMELY QUOTE

"The world has never had a good definition of the word 'liberty;' and the American people, just now, are much in want of one. We all declare for liberty; but in using the same word, we do not all mean the same thing. With some, the word 'liberty' may mean for each man to do as he pleases with himself and the product of his labor; while with others, the same word may mean for some men to do as they please with other men and the products of other men's labor. Here are two not only different but incompatible things called by the same name—liberty. And it follows that each of the things is, by the respective parties, called by two different and incompatible names — liberty and tyranny.

"The shepherd drives the wolf from the sheep's throat, for which the sheep thanks the shepherd as his liberator, while the wolf denounces him for the same act as the destroyer of liberty, especially as the sheep was a black one. Plainly, the sheep and the wolf are not agreed upon a definition of the word 'liberty;' and precisely the same difference prevails today among us human creatures, even in the North, and all professing to love liberty. Hence we behold the process by which thousands are daily passing from under the yoke of bondage hailed by some as the advance of liberty."

—Abraham Lincoln.

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Vitamin A . . . . .	3000 units
Vitamin D . . . . .	1000 units
Thiamine . . . . .	1.0 mg.
Riboflavin . . . . .	1.2 mg.
Niacinamide . . . . .	8.0 mg.
Ascorbic acid . . . . .	50 mg.

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## "TELEVISION—PSYCHIATRIC ASPECTS"

A timely subject, certainly worthy of reprint, was published in May, 1951, in the *Western Medicine and Surgery*, in which the author, Doctor Philip Solomon pointed out that a great number of people, particularly in the larger cities, have begun to be affected emotionally one way or another by the advent of television. A number of medical problems are apparent. For the most part those which are psychogenic concern the emotional behavior and welfare of children, and exaggeration of normal responses in adults. Probably the most prevalent psychiatric problem arises from the alleged interference of television with children's routine. In many instances the real clash is the same one that has always taken place between parent and child. Parents often think that they are motivated by such arguments as proper bedtime, rest, getting homework done, etc., but are really reacting to unconscious factors. A familiar parental neurosis has always been one of unconscious resentment and rivalry with the child disguised as exaggerated concern for the child.

Television can, of course, be overdone to the detriment of the child. Study of such cases reveals that there is a reason for overdoing television as for overdoing anything. The healthy child, after he gets over the novelty of television, soon levels off to what is healthy for him. Excessive viewing of television can be an escape, a solace, a means of provoking parents, or it can serve in other ways to neutralize basic emotional deprivation. The average normal child seems to be able to absorb an hour or so of television a day with impunity. Younger children and those disturbed by emotional problems should probably be restricted to half an hour or less. The child who continues in obviously excessive television viewing may be a neurotic child whose emotional makeup needs to be thoroughly studied.

Some programs are dangerous for children . . . the eerie, weird, mysterious "suspense" dramas, which invite the participants to regress from reality to early infantile ways of thinking. Adults can withstand the threat, but children have weaker egos and are vulnerable. One aspect of television which has been disturbing many thoughtful people is the fact that it adds to the trend toward passivity in modern civilization. Doctor Solomon believes that the use of television can be more active where group participation in the family is encouraged and where discussion regarding good and bad points of a program is fostered. The real problem of television is to use it and not abuse it. This requires planning, forethought and consideration for the rights and desires of each member of the family. An attempt should be made to determine for each child how much television is good for him. Television should be built into the home, not only physically but emotionally. Like vitamins along with a good diet, television can supplement, but can never supplant healthy active living in the home.

—M.C.M.

## THE UNKNOWN QUANTITY

Perhaps one of the best arguments against attempts to equalize the fruits of human labor under a collectivist society is the infinite variety of human nature. It should be obvious that each person's desires and aspirations defy measurement—in both quality and quantity—by any other person. And since it is impossible to equate what cannot be measured, the collectivist society must fail in this announced objective.

It is perfectly possible, of course, to divide a pound of steak equally between two persons. That is a task requiring only a pound of steak, a set of scales, and a knife—and someone to do the dividing. It is also possible to decree that the two individuals shall have a certain number of leisure hours each day. But it is quite another matter to measure the relative value that two persons will place upon steak and upon leisure, for one is certain to be more fond of steak—or leisure—than the other. What satisfies the soul of one person may have little or no appeal to another—certainly not to the same degree.

Now suppose the purveyor of equality realizes that equal portions of steak will not accomplish this equality which he has set out to attain. He might then undertake to divide the steak unequally by weight, and to reapportion the total number of leisure hours, so that both individuals would be satisfied to exactly the same degree. By what means could he determine what quantity of leisure for one is equal to a certain quantity of steak for the other? At this point, he will have to abdicate from his collectivist throne, realizing that he has no scale by which he can measure any value for any other person.

If it is impossible for a third party to solve even this one simple equation for two persons, it is fantastic to believe that he could solve the infinitely more complex problem of equally satisfying all the desires of all the people. This egalitarian objective could be attained only if all people wanted the same quantities of all things in life. But they do not. Our forefathers sought to preserve the freedom of each individual to pursue, to the best of his ability, the satisfaction of his own particular set of desires—known only to himself. They had the wisdom to realize that in designing a society in harmony with this variation in human wants they were working with, rather than against, a principle of nature. (Madelyn Shepard Hyde of the Foundation staff clipping of Note, No. 44, issued by The Foundation for Economic Education, Inc.)

—*Insurance Economics Surveys.*

### USEFUL FOR BRIDES

The young wife was not anxious to have a family right away, recounts *True*. She visited her old family doctor to seek his advice.

"Well, there's one way that never fails," he said. "Simple, too. You just lean over and touch your toes ten times without bending your knees."

"Is that so?" said the girl. "Before, or after?"

"Instead of," said the old doctor.

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## INFANT MORTALITY MAY SET NEW LOW MARK

The high post-war rate of population growth continued unabated in 1951, thanks to a record number of births and a low death rate. The increase in population for the year, including a moderate gain through immigration, is estimated to exceed 2,650,000. This is about the same as in 1947, which showed the largest increase for any year in the country's history.

The number of births set an all-time high in 1951, the estimated total reaching more than 3,900,000. This includes an allowance for unregistered births. The year's total is appreciably above the previous high of 3,876,000 in 1947 and is more than 200,000 above the figure for 1950. This record makes 1951 the fifth year in succession in which births have exceeded 3,500,000. It is also the eighth year in the past decade that has exceeded the 3,000,000 mark. The births in 1951 correspond to a rate of 25 per 1,000 population, including the armed forces overseas.

The new birth record reflects, in part, the increase in the marriage rate after the start of the war in Korea. Even more important, however, is the break away from the 1- or 2-child family pattern that prevailed prior to World War II, and the tendency toward earlier marriage. The improved economic conditions of recent years appear also to have brought a favorable attitude toward larger families.

The baby crop of 1951, moreover, has an exceptionally good survivorship record. Infant mortality in 1951 may establish a new low; in any event it appears likely to be at least as good as in 1950, when the rate was 29 per 1,000 live births. Thus, 1951 will mark the second year in succession in which the infant mortality rate was below the 30 mark. Only 10 years ago, it was 45 per 1,000 live births, or more than 1½ times as high. If the 1941 rate had prevailed in 1951, the toll of infant deaths in the year would have been more than 65,000 in excess of the actual number. The steady downward trend in infant mortality over the past decade has meant an aggregate saving of about 400,000 infant lives during this period, truly a magnificent achievement.

—Stat. Bull. Met. Life Ins. Co.

## HOSPITAL PROGRAMMING IN CIVIL DEFENSE

It is felt that finally some definite progress is being made for all hospitals in planning for the civil defense program. At this time lay people in the hospital field have been designated as administering each of the existing acute hospitals not only in Tacoma but throughout the county. These lay people, serving as administrators, will work with the doctor assigned to each hospital and together they will comprise the administrative nucleus. All professional and non-professional personnel have been frozen within the administrative framework of the institution in which they are currently employed for the reason that they work effectively in familiar surroundings.

Space has been reassayed and other studies are under way for the completion of the program for the fixed hospitals. At present a study has been initiated to expand into holding hospitals, convalescent units, and regional hospitals. Within the next two months a re-evaluation of bed space can be published. Our current estimate, based on present planning, provides something in excess of 15,000 beds for Pierce County, and final planning should provide for close to 20,000 beds.

To date, Doctors Hospital, Washington Minor Hospital, Tacoma Indian Hospital, and Pierce County Hospital have had identification cards issued for their personnel. A working team from Tacoma Civil Defense Headquarters, in cooperation with the hospitals, has established a program to complete the issuing of identification cards for the remaining hospitals in the community according to the following schedule: Saint Joseph Hospital—April 2nd and 9th; Tacoma General Hospital—April 23rd and 30th, Mountain View Sanatorium—May 7th.

Dr. Murray L. Johnson has expressed his appreciation to those doctors who have already had identification cards issued. To those who have as yet not received identification cards, it is suggested that at your convenience you may avail yourself of this service according to the outline above. On the dates designated the identification card team will be present at the stipulated hospital from 10 a.m. to 4:30 p.m. I am sure your cooperation will be greatly appreciated.

—J. Morrison Brady, M.D.,  
Hospital Coordinator for Civil Defense

### TRIPLE BROMIDES

By Gerry Feigen

SENTIMENTAL MEMORY . . . The following is a question from an old college chemistry exam:

"How many c.c. of ammonia sp.gr. 0.95 containing 12.72 per cent of ammonia by weight are necessary for the complete precipitation of iron as ferric hydroxide after oxidation of 1.3 g of Mohr's salt,  $\text{MgSO}_4 \cdot (\text{NH}_4)_2\text{SO}_4$ ?" You could solve this, once!

—From San Francisco County Medical Society Bulletin.

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## SEX AND SUICIDE

Based upon an examination of the reports of 148 suicides in New Jersey during the first three months of 1949, there appears to be a distinct difference between the sexes, both as to choosing to die by their own hands and in selecting the means to terminate life.

There were three male suicides to every female suicide, and this proportion remained fairly constant even in the monthly figures. The white races were responsible for almost 96% of the total suicides for the three-month period, and for each month the white deaths represented at last 92% of all suicides.

Of the 112 male suicides, hanging or strangulation accounted for 36, or 32% of them. Firearms or explosives killed 30, or about 27% of the total. Poisonous gases were third choice, being selected by 21, or almost 19% of the males.

Of the 36 female suicides, 15, or about 42%, chose poisonous gases, with the second choice being tied between analgesic, or soporific substances, and hanging or strangulation. Each of these two groups was selected by 7, or 19% of the females.

### Vanity—All Is Vanity

The inherent vanity of women may be a big factor in selection of the means of suicide, as at least affecting the appearance of the body. This wish for neatness has been exemplified in many cases over the years where the woman about to

commit suicide, or the sick female about to call a physician, will insist upon tidying the house or her person before taking any other action. The choice of gas may also be influenced by the unfamiliarity of most women with firearms—or by the non-availability of such weapons of destruction.

Men on the other hand may have such an inherent sense of family responsibility that they choose a weapon whose action can be limited to taking only one life, whereas gas might result in the unwished-for taking of lives of other members of the household.

—From *The Medical Way*.

## FROM THE BULLETIN TWENTY YEARS AGO . . .

"On March 13, 1932, thirty milligrams of radium were lost in one of the wards at the County Hospital. The element had been implanted in the mouth of a patient with far advanced cancer, and, even though he knew that radium was being used, the man pulled the needles from the wound and threw them into the drain. He could give no reason for his irresponsible act. The insurance company is conducting a thorough search for the element, which was the property of the Tacoma Radium Society. (Does anyone know whether the radium was recovered?)

# GLYKERON

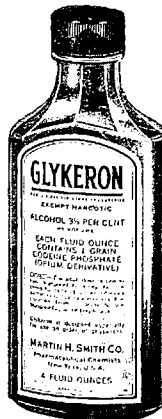
### A Bronchial Sedative

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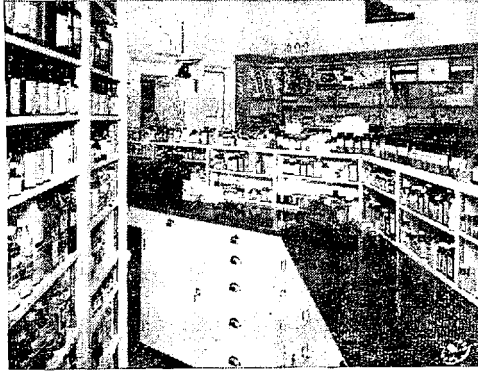
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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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## 25% LIMIT ON FEDERAL INCOME TAX

"There are several bills before Congress to limit by constitutional amendment federal tax rates on personal and corporation income and on gifts and estates to 25%. Today there is a ground swell sweeping across the country, almost in the nature of a tax revolt, protesting against the confiscatory federal tax rates. As of June, 1951, twenty-four states have petitioned Congress to submit such a constitutional amendment to the states for ratification. Such action will become mandatory under the Constitution if thirty-two states so petition Congress. Ratification then by thirty-six states would make such an amendment a supreme law of the land.

"Careful statistical analysis of income taxes and revenue yields in the period from 1913 to 1942 inclusive, show that in reality crushing income tax rates have reduced the productivity and hence the incomes, of the more efficient classes to such an extent that the confiscatory tax rates have yielded no more revenue to the treasury than would have been raised by rates taking a maximum of 26% of any individual's income.

Some of the proposals for 25% limit include provision for lifting the restriction in wartime. In the opinion of Willford I. King, one of the country's leading economists, such a wartime provision would be the height of folly, for "higher rates lessen production—and wartime is the very period in which maximum output is most needed. Wars should be financed mainly by excise taxes levied on most producers. Unlike income taxes, such levies do not tend to reduce output."

Mr. King states further, "One must not overlook the fact that, if recent experience is any criterion, suspension in wartime of the proposed amendment's 25% maximum limit . . . would largely nullify its usefulness. For, though fighting ceased in 1945, we are still technically at war with Germany and Japan, and are now actively engaged in fighting the Red Chinese, though we have not officially declared war on them. So, on one pretext or another, enforcement of the 25% maximum might be evaded indefinitely."

—Columbus Academy of Medicine.

## TIME OF DEATH

At the recent meeting of the American Association for the Advancement of Science, Coroner Dr. S. R. Gerber of Cleveland told how time of death was established in a case that puzzled him in a dead-body mystery. A tendril of vine was growing through the hair of the corpse which was almost completely decomposed. Dr. Gerber called on a professor of botany for assistance. The professor obliged. As a result the validity of a divorce and marriage was established, and property was distributed in accordance with the terms of the dead man's will.

—N. Y. Times.

## CRITICAL TARGET STATUS

Federal Civil Defense Administration's medical supply stockpiling program now is moving ahead after a year of delays, mostly due to reluctance of some states to appropriate matching money. As late as December 1, CDA reported that 15 states containing critical target areas had not yet entered the program. Within the last two months, however, all but four of these either submitted acceptable plans to Washington or are busy working out plans. The funds, matched by states, will be spent for emergency medical supplies, to be stockpiled locally for use immediately after an attack.

CDA disclosed that the situation was changing for the good in announcing allocation of more than \$8 million to 14 states for local medical stockpiles, including such items as burn dressings, litters, blood plasma, antibiotics and surgical instruments.

States already participating in the program, with total budgets for each, are:

California .....	\$3,984,638	Michigan .....	\$ 793,707
Colorado .....	39,632	New Jersey .....	552,360
Connecticut .....	303,903	New York .....	9,486,896
Delaware .....	50,275	Oregon .....	15,504
Kansas .....	97,549	Rhode Island .....	3,766
Maryland .....	398,231	Tennessee .....	197,430
Massachusetts .....	298,674	Washington .....	498,666

Although states are paying half the costs, most of the funds will be expended through CDA, to take advantage of bulk purchasing while at the same time not exceeding the capacity of manufacturers. Federal Civil Defense Administration also has about \$33 million available for setting up and maintaining regional warehouses for medical supplies. These stocks, paid for entirely by U. S., will be held in reserve, to be rushed in to an attacked area to supplement local supplies after the first few hours.

—A.M.A. Capitol Clinic.

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## KENTUCKY PHONES LECTURES TO MD'S

The "party-line" principle gave a boost to post-graduate medical education in Kentucky last month when the first of three educational seminars was broadcast by telephone to more than half of the state's counties. The program, co-sponsored by the Kentucky State Medical Association and the University of Louisville School of Medicine, was presented over a network with 25 listening points ranging from Maysville to Fulton and Harlan to Paducah.

J. P. Sanford, executive assistant of the Kentucky association, estimated that the audience for the first program comprised the largest group of physicians ever to hear a scientific program in the state. At each outlet doctors from one to four counties listened in. Each physician from a subscribing county was provided with a liberally-illustrated outline of the program by the medical school prior to the broadcast.

In establishing a post-graduate telephone seminar, Kentucky follows the lead of Indiana, which now operates a highly successful "telephone network." To alert newspapers and radio stations about the Kentucky series, the Kentucky association circulated a list of towns in which the broadcasts are being received and the names of local doctors making the arrangements.

## REPORT ON CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of February 21, 1952, to March 21, 1952, inclusive:

Chickenpox .....	40
Conjunctivitis .....	2
German Measles .....	51
Gonorrhea .....	9
Measles .....	32
Meningitis .....	1
Mumps .....	100
Poliomyelitis .....	1
Scarlet Fever .....	10
Syphilis .....	3
Tuberculosis .....	24

"... Here is a typical morning breakfast for me when my weight is normal. I start with 2 oranges dressed on a fork, with powdered sugar, because fruit is good for me. A simple starch comes next, such as rice pancakes with maple syrup. After that I have a choice of boiled shad, maitre d'hotel sauce, with saratoga potatoes, poached eggs on anchovie toast, or little fillets of porterhouse steak garnished with watercress.

"If my weight is above normal, I cut out the watercress."

—From My Diet, by Dagmar.

### ANNOUNCING 24-HOUR PRESCRIPTION SERVICE

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Dear Doctor: Our new drug store, with complete prescription service, is now open. Four registered pharmacists are on duty at all hours, day or night. Delivery service by taxi is available. Located in the Park-n-Shop Super Market at 98th and Pacific.

**J. R. Foster, Manager**  
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# Just Fun

## IT MIGHT GO OFF

Greatly agitated, a mother dashed into a drug store carrying her infant child. The druggist hurried to ascertain the cause of her distress.

"My baby swallowed a .22 calibre bullet!" she cried. "What shall I do?"

"Give him the contents of this bottle of castor oil," the druggist said calmly, "but don't point him at anyone."

Visitor: Why it's only 12 o'clock. It seemed much later.

Native: Around here that's all it ever gets. Then we start over.

Junior: "Daddy, what is a sweater girl?"

Daddy: "A girl who works in a sweater factory." (A slight pause.) "Say, where did you get that question?"

Junior: "Never mind that, daddy, where did you get that answer?"

## GEOGRAPHICAL HINTS

With all the talk about young doctors settling in smaller communities, we have borrowed a few names of actual towns from Joseph Henry Jackson, and offer them to the recent graduate—Shapeless, Mass.; Proan, Conn.; Dathly, nIn.; Farmerina, Del.; Income, Tex.; Coco, Colo.; and Ooola, La. Check these with your Rand-McNally, if you think we're spoofin'.

It was morning after a riotous party. Maggie, who was always a judicious celebrator, managed to rise from her bed in a fairly good condition, but Jerry, her husband, was in an awful state. He sat holding his head and groaning.

"Jerry," his cautious wife admonished. "I warned you last night. If you hadn't drunk so much, you wouldn't feel so horrible this morning."

"Drink had nothing to do with it," the afflicted man moaned. "I went to bed feeling wonderful and wake up feeling awful—it was the sleep that did it."

A Kentucky rookie met a brisk second lieutenant. "Mawnin'," drawled the rookie pleasantly.

The outraged loogie teed off on a lecture on military courtesy with emphasis on saluting.

"Lawdamighty" replied the rookie when he was through. "If I'da knowed you was gonna carry on like that, I wouldn't of spoke to you at all!"

In the shipyards, the instructor in riveting was coaching a feminine novice. "Look," he said, "I'm placing the rivet here in the proper place. When I nod my head, hit it with your hammer."

... She did.

The instructor left a wife and four children.

Professor: "This essay on 'Our Dog' is word for word the same as your brother's."

Student: "Yes, sir. It's the same dog."

## TO A FETUS IN FORMALIN

... Thanx to a 20-year-old J.A.M.A.  
Baby pickled in a jar  
Think how fortunate you are  
Bobbing in preservative.  
You have never had to live.  
Some might mourn to see the shelf  
Where your grotesque little self  
Curls in alcoholic sleep;  
But I find no cause to weep.  
Since your death was premature,  
You have only to endure  
Antiseptical affection,  
Deft caresses and dissection.

—San Francisco Medical Society Bulletin.

## POEM OF THE MONTH

Just give me a man  
With a million or two,  
Or one who is handsome  
Would happily do.  
A dashing young fellow  
Is swell any day,  
Or one who is famous  
Would suit me okay.  
But if the man shortage  
Should get any worse,  
Go back to the very  
First line in this verse.

## DEPARTMENT OF ESOTERIC INVENTIONS

1. Salt shakers without holes for not putting salt on food you like to put salt on, but shouldn't because you are on a salt-free diet.

2. Nembutal, Seconal, Amytal and Tuinal sleeping capsules mixed, so that the patient may dream in technicolor.

## LIMERICKAL SPECIMEN

There once was a student named Tesser  
Whose knowledge got lesser and lesser.  
It at last grew so small  
He knew nothing at all  
And now he's a College Professor.

—Bulletin of San Francisco  
County Medical Society.

Out in the middle of nowhere, two trains sped toward each other on the same track until they collided with a tremendous crash.

Reporters flocked to the scene, and one of them was questioning Slim, an old cowhand who was the only witness to the disaster.

"Tell me, Slim, what did you think when you saw those two trains coming together?"

Slim drawled his answer: "I thought that was one H—of a way to run a railroad."

"What are you studying in college now?" asked the fond mother of her son, who was a freshman engineer.

"We have just taken up molecules."

"That's fine. I hope you will like them. I always wanted your father to wear one, but he couldn't keep it in his eye."

Pierce County Medical Society

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club

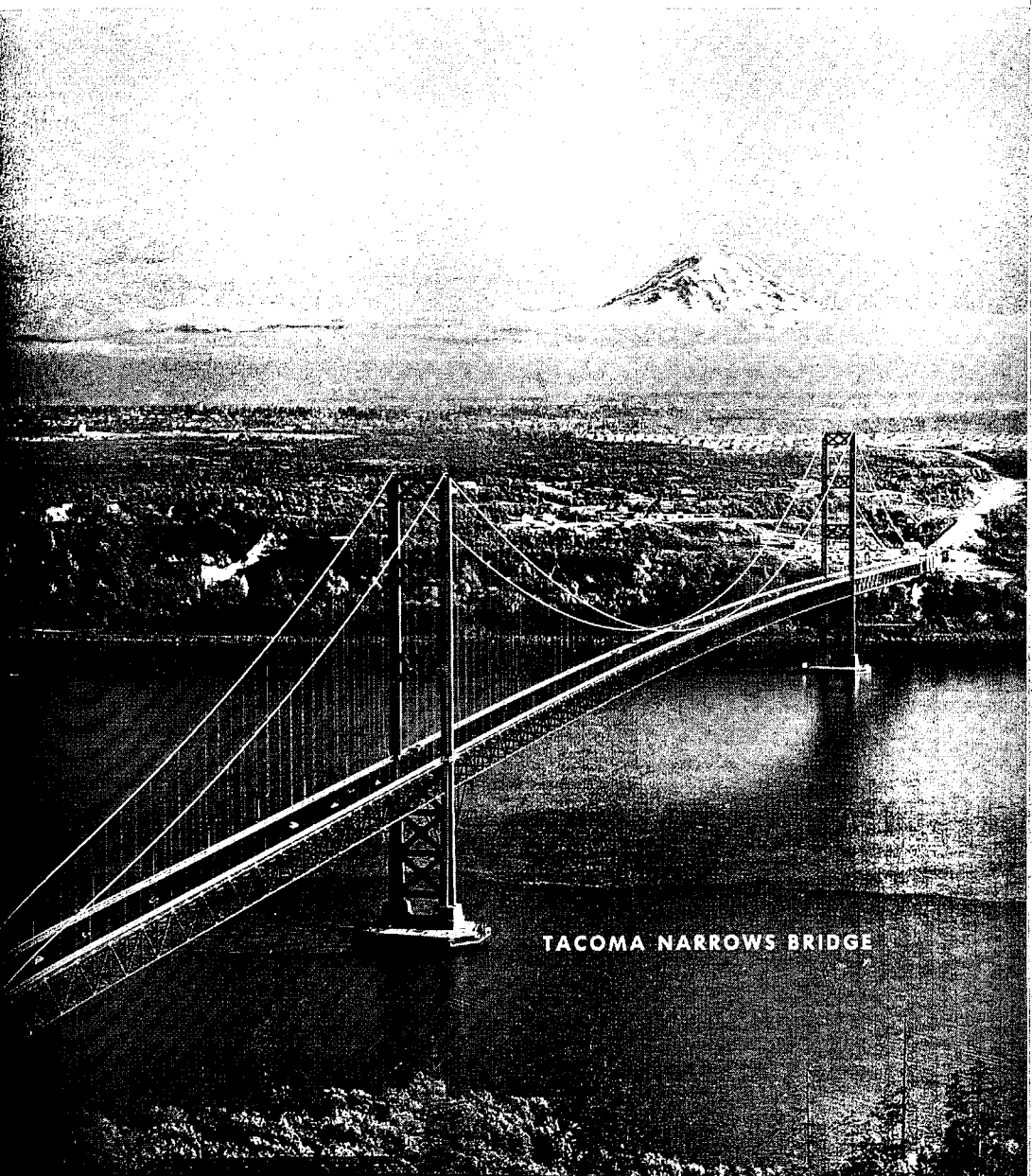


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 9

TACOMA, WASH.

MAY - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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# Program

of the

Pierce County Medical Society

Tuesday, May 13, 1952

**DR. G. R. SPENCER**, Chairman of the Department of Hygiene and Pathology, College of Veterinary Medicine, Washington State College, will speak on **Tumors in Domestic Animals and New Diseases Transmitted from Animals to Man.**

**DR. FREDERICK M. SHIGLEY**, Inspector in charge of the United States Bureau of Animal Industry for the State of Washington will show and comment on a film on the Hoof and Mouth Disease.



The Pierce County Medical Society is honored to have Dr. Reuben Benson of Bremerton, President of the Washington State Medical Association as guest for the evening.



## NOTICE

Check back page of Bulletin for calendar of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

The American Medical Education Foundation ended its first year December 31, 1951. During this period more than 1800 physicians contributed to a total of \$745,000 to the Foundation. During the early months of 1952, there has been a growing interest in the response of the physicians and some organizations and lay persons.

Plans for this year are being formulated for an intensive campaign to raise \$5,000,000 to augment the finances of the medical schools throughout the United States and thus forestall Federal subsidy of our medical students.

Since January 1, 1952 all contributions designated by individual physicians for a specific medical school will be added to the school's grants from the unearmarked funds raised by the Foundation and the National Fund for Medical Education.

The new policy means that alumni or friends of a medical school can make a contribution to a medical school through the Foundation, and the school will receive the full amount of the contribution plus its full share of the unearmarked funds.

Many physicians are indicating by their contributions the debt they owe their Alma Mater while others see in the Foundation an opportunity for the medical profession to again demonstrate its willingness to aid in the advancement of high standards of medical education.

Let us all back this very worthwhile project 100 per cent. Every dollar contributed goes to the medical schools. Not a penny goes for the administration of the Foundation. Every income-tax deductible dollar given to the Foundation goes to the cause for which it is intended.

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## ***Editorially Speaking . . .***

Recently your editor has been reading some of the output of avowed and unavowed socialists. A major objective of the socialist idealists is the creation of a "more humane economic system."

The quality of humanity is something exclusively human. It can not be an attribute of anything else, a horse, war, a political party, a nation, or an economic system.

A horse that fails to win any races for his owner, or takes a finger along with a carrot, is not inhumane. He can't be, he's a horse.

War, using the term generally to describe the settling of international disputes by the use of force is neither humane nor inhumane. Acts of individuals and groups of individuals in the prosecution of modern warfare have become increasingly inhumane. Humans could change the technic of war and make their acts not only humane, but downright amusing, especially on television. (For this I would buy a set.)

Conceive of the "Head Man" of each of the two international major leagues settling their differences personally with 16-ounce gloves of eider down covered with velvet, two-minute rounds, and choice of bourbon or vodka during the 20 minute rest periods, no blows below the navel or above the clavicle. Compare the humanity of either of these contestants with the inhumanity of the infantryman drawing a bead on another human.

Human qualities, honesty, faith, sympathy, understanding, and a host of others, some good, some bad, cannot be institutionalized by political parties, nations, or economic systems.

Man's inhumanity to man certainly influences our politics, our nation's course in international affairs, and the way we conduct our personal business and social life. The implication of the converse is worthy of sober thought. If most of the world's humans were truly humane, it would matter little what systems, economic or otherwise were in use.

Visionaries who ascribe human qualities to the institutions can lead us far astray. Only humans can be humane.

Homer W. Humiston, M.D.

## WASHINGTON STATE PATROL

(The following article has the approval of the Washington State Patrol and is, therefore, factually correct.)

I believe that anyone who has had a personal contact with any member of the Washington State Patrol will not deny that the personnel is above average in intelligence, courtesy and efficiency. This is the direct result of the policy used in choosing prospective officers, in the intensive training program, in the pride the officers have in their organization and, in no small way, in the men who head the group.

Possible candidates for the Patrol must be between the ages of 23 and 30, have at least a high school education, have personal characteristics beyond reproach, and must be six feet tall or over. For a period of six months to a year or more the prospective officer is employed on a civilian basis; he works in the Operator's License Division or the Radio Communications Division until such time as another replacement is needed or until the expansion of the force indicates an added man. He also has to undergo a series of tests, including a mental test, an emotional stability test, and an aptitude test. He must qualify as "acceptable college material" in the intelligence test, be rated as emotionally mature and stable in the emotional test, and show high grade in the social service and a persuasive bracket of the aptitude test. He must meet the rigid physical requirements by successfully passing a thorough physical examination.

Training, at the Patrol Academy in Shelton, consists of four weeks of really rugged schooling: from 6:30 in the morning until 10:00 at night, every day. On Sundays a choice is given between going to church or studying. The candidate studies law, proper driving, rules of evidence, investigation, judo and some forty other subjects. At the end of this period he is sent out with an experienced officer who coaches him in the practical or functioning aspects of that which he learned in the Academy. He may stop cars and make public contacts but only in the presence of the officer coach. At the end of this training period the coach makes certain recommendations, and the candidate is sent back to the Academy for further indoctrination. Sergeant Ranney, whom I interviewed at the Patrol Office in the State Capitol, assured me that no day in a man's life is equal to the one when he first steps out with his shiny badge, his gun on his hip, his uniform sparkingly new, and takes his place among the highly respected officers of the Washington State Patrol.

One factor that Sergeant Ranney stressed, and one which I believe cannot be emphasized too much, is that candidates are chosen entirely on their own qualifications.

The turnover of personnel in the Patrol is surprisingly small; two officers have been working with the force for over twenty-five years; several have twenty years to their credit, and a number have served fifteen years. It speaks well for an organization whose duties are seldom less than arduous that the personnel finds the life so interesting and

fulfilling that they prefer to remain, even in these days of high wages and regular hours in the civilian world.

Sergeant Ranney, with becoming modesty, refused to compare the Washington State Patrol with the State Police of other states, but he did say that the Washington State Patrol has won the National Traffic Law Enforcement award in 1949 and 1950 that is given by the International Association of Chiefs of Police. This award is not given for the number of arrests or for the number of miles covered by the patrol cars, but for the effectiveness of the enforcement program, conviction record, better controlled traffic and for other pertinent factors. And the records show that in the eleven western states, Washington is consistently judged the safest state in the West.

The mission of the Patrol is fundamentally that of making traveling safe and comfortable for the largest possible number of people, but their activities actually cover a much larger area. They assist when planes are reported missing, they look for old people who have lost their way, they give talks on traffic hazards and their elimination, they have weighing stations to check trucks whose loads may be over the limit and thus damage highways. One factor that is not well known is that the State Patrol has police power anywhere in the state; they may make arrest anywhere—city or town, county or highway—that they witness a violation of the law. However, it is the Department's policy to aid in criminal investigations only at the request of local officials.

James A. Pryde, Chief of the Washington State Patrol, has every reason to believe that his organization is doing a highly admirable job in this rapidly growing state, and I sincerely trust that he has the respect and well-wishes of every citizen. Patrolling the highways of the State of Washington is a mighty undertaking, and we are thankful that it is in the hands of those so competent.

"You sure do look worried."

"Boy, I'm booked up solid on worries. I got so many worries on my mind that, if anything happens to me today, it will be two weeks before I can worry about it."—*Selected.*

## Karen Rynning

### PHYSICAL THERAPY

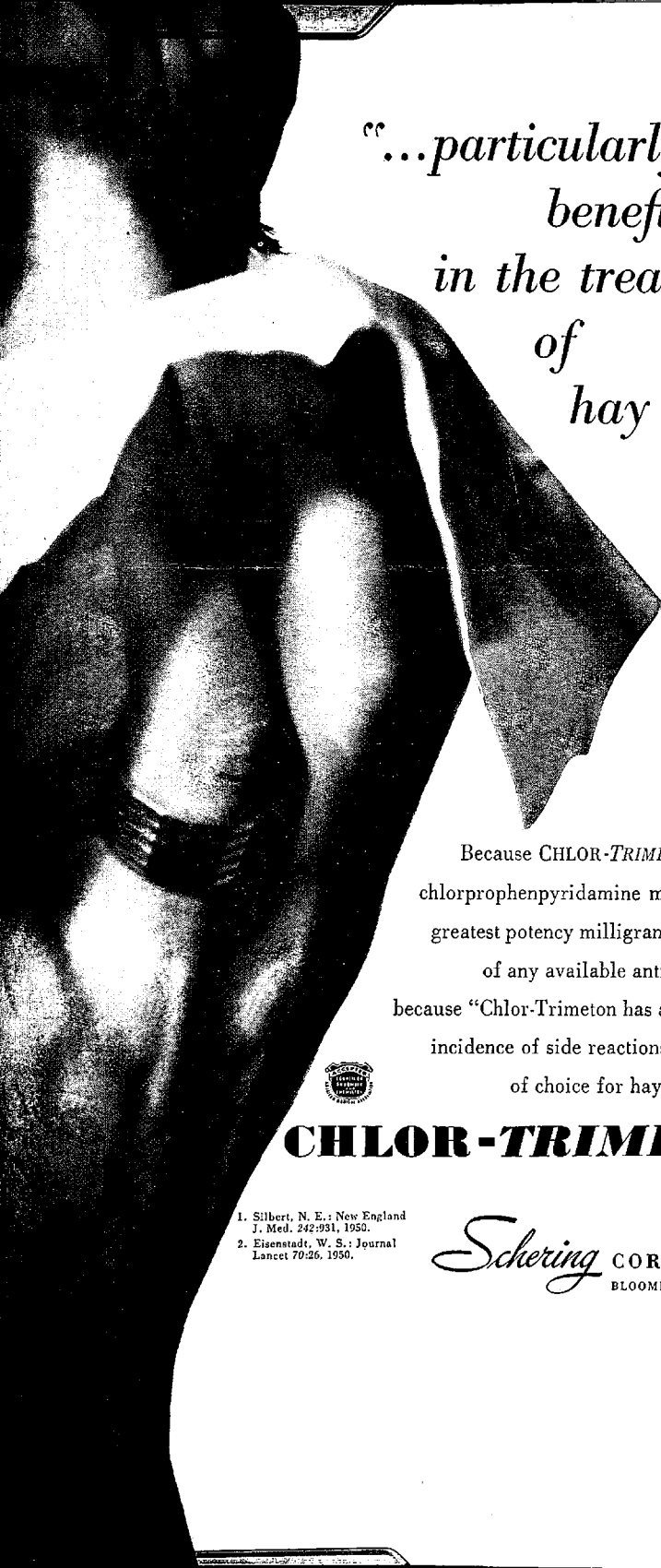
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1. Silbert, N. E.: *New England J. Med.* 242:951, 1950.
2. Eisenstadt, W. S.: *Journal Lancet* 70:26, 1950.

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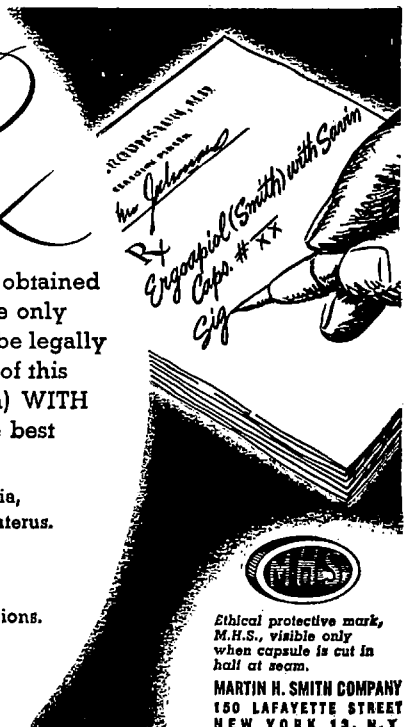
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# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

The Pierce County Medical Auxiliary May Day Luncheon will be held at the Tacoma Country Club at 1:00 p. m. on Friday, May 9th.

Mrs. Robert Florence, the chairman, will be assisted by Mesdames R. A. Norton, C. B. Ritchie, Robert Gibson, William Rademaker, E. R. Anderson and James Vadheim. Reservations must be made if you are planning to attend.

The Coke Party was held April 29th at the St. Joseph's Hospital School of Nursing Home. Pat Flynn was the chairman of the affair.

Gypsy and Lou Hoyer enjoyed a couple weeks vacation in sunny California.

Vancouver, B. C., was the spot of a Medical Convention which attracted the Vadheims, Florences and Govans. Louie and Reg Govan also spent a few days at Harrison Hot Springs.

Our deepest sympathies go to Pat Flynn and her family of the recent death of her mother.

Many thanks goes to the following for the time they volunteered at the Blood Bank, Dorothy Maier, Helen Jarvis, Connie Hellyer, Dorothy Grenley, Hilda Lantieri, Mrs. Otto Shaffer, Jeanne Schwind, Sherry Johnson, Anita Parrott, Mrs. Thomas Hardgrove, Mrs. Wicks, Marjorie Rich, Pearl Baskin, Rose Griffin, Joy Heaton and Ruth Murphy.

Word has been received that Dr. and Mrs. R. Burt are enjoying the Bulletin while they are away from the city.

Helen Scheckner has returned from a visit with her daughter in Denver.

The legislative committee has been busy getting letters sent out to each doctor and his wife to check whether or not they are registered to vote. It has been requested by the committee that each card be returned as soon as possible in order that this survey may be completed.

Dr. and Mrs. Maier will be in Salt Lake City for two weeks attending the Pacific Coast Academy meeting.

## OFFICERS FOR 1951-1952

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Today's Health.....	Merle Herrmann
Public Relations.....	Pat Flynn

## AMERICAN MEDICAL WRITER'S ASSOCIATION

A new service for the benefit of doctors who are writing articles has recently been inaugurated: the American Medical Writer's Association will clarify, correct and edit writings on scientific subjects by doctors. Their prospectus reads:

"The Association has made arrangements with a well known school of journalism associated with a university having a medical school, where such manuscripts will be reviewed by an instructor in the school . . . (This service) is designed to help authors who wish to submit articles to medical journals or kindred publications from which the authors receive no fees. It is not a commercial service and does not concern itself with the selling of manuscripts or ghost writing or the compiling of bibliographies."

More details of this service may be obtained in the office.

## 124,587 Waiting for Operations

The Chicago Daily News reports that in Britain, where medicine has been socialized for nearly four years, there are 124,587 persons waiting to be admitted to hospitals for operations. "There's a scarcity of both beds and nurses plus a bigger demand for operations which now are 'free,' the story said.

—From A.M.A. Secretary's Letter

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## TACOMA'S VISITING NURSES

Tacoma's visiting nurses, who can be reached by calling the County-City public health department, Broadway 9341, are available to citizens who can pay them for their visits as well as to those who cannot.

In fact, the more paying patients who use the visiting nurse service, the more money comes into the treasury for use of the nurses by those who cannot pay.

The nurses have a set scale of fees, beginning at \$3.00 for a visit of an hour or less, and they work only under the patient's doctor's direction. They usually can answer a call within a half day of the time it is placed with the health department. All are graduate registered nurses.

Use of the visiting nurse for hourly nursing care in the home can be provided when full time nursing care is not needed. Sometimes it brings home from the hospital patients who would hesitate otherwise to leave the hospital's care. For instance a business man, a friend of this reporter, remained in the hospital last year a couple of days after his doctor told him he could go home because he, the patient, did not know he could have a visiting nurse come to his home to change his surgical dressing. "I thought those nurses were just for people who couldn't pay," he said. So he held up the hospital bed and used the time of hospital nurses unnecessarily. And, incidentally, he added to his own expenses.

The visiting nurse service is part of the Tacoma-Pierce County Health Department's Nursing Division. This city is one of 40 in the United States in which a private agency combines with the Public Health Department to provide such services. In Tacoma the private agency is the Tacoma Public Health Nursing Association which employed the first public health nurses used here. In 1940 it placed its nurses under the supervision of the director of the city's health department, and now its nurses and the city's nurses operate under the same supervisor of nurses and interchange duties although the association continues to pay its own nurses with the help of the Community Chest and fees from paying patients.

This combined use of nurses is more efficient than when the groups operated separately. They form a common pool with wide experience in all forms of health work under ordinary circumstances and are an invaluable source of help in time of epidemic or emergency.

The National Organization of Public Health Nursing stated recently in a survey of combined services that they are an advantage not only because of the efficiency, and because both public and private financing is needed for public health nursing, but because they develop greater citizen interest in the total public health program.

All calls to the health department for a nurse are answered in accordance with the urgency of the patient's need regardless of ability to pay. But fees collected by visiting nurses go into the private agency's treasury. Since the private agency has no administration costs, the fees are applied directly to the salaries of nurses. Also because of the com-

bined setup the city has the use of graduate registered nurses who come to Tacoma, through the private agency's link with the University of Washington, to train in field work for their public health degrees.

Thus, when a paying patient uses the visiting nurse he pays for a service to his fellow citizen at the same time that he receives the skilled care he himself needs.

Tacoma Public Health  
Nursing Association,  
Public Relations Committee.  
By Jessie Geissler.

## WASHINGTON STATE NURSES CONVENE AT YAKIMA

The 47th annual convention of the Washington State Nurses Association and Washington State League of Nursing Education was held in Yakima, April 15th to 18th. The registration totaled 349 nurses and guests, with 171 of the total being delegates from the various district nurses associations. The Pierce County District was entitled to and had 24 delegates.

The convention opened on Tuesday evening, April 15, with Miss Pearl McIver, immediate past president of the American Nurses Association, speaking on "What Lies Ahead for Nursing."

Miss McIver concluded her talk borrowing the style of a well-known radio commentator. For the future of nursing the speaker predicted:

(1) Acceptance of a broadened concept of health throughout the world with nursing as one of the essential professions in realizing that concept.

(2) The realization that the number of professional nurses will be limited, and their abilities must be utilized economically and that better nursing service will result if various types of personnel (each competent to function in his or her own sphere) are prepared to work as a team.

(3) A revamping of our system of nursing education which will put the administrative responsibility for nursing education in educational institutions and will assure adequate financial support exclusive of the contributions for student service.

(4) And finally, I predict that in America, we shall have a nursing profession which assumes full responsibility for the decisions which rightfully belong to a profession, and shall recognize that any professional service is a joint responsibility of the profession and the consumers of that professional service. Therefore, in providing the nursing service need for the people, we shall plan jointly with allied professional workers and representatives of the general public. Will such a plan of organization not be a demonstration of true democracy in action?

Besides transacting the business of the Association, the nurses enjoyed a banquet dinner in honor of past presidents and had the pleasure of meeting several grand old ladies, as well as some not so old, who have headed the organization during the past 46 years.

If wives knew what stenographers think of their husbands, they wouldn't worry.

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# The Hospitals . . .

## VETERANS ADMINISTRATION

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On May 6, 1952 at 7:30 p. m., Dr. Axel Anderson, Chief, Oral Surgery Section of the Veterans Administration Hospital, Hines, Illinois, will visit this hospital. He will lecture on "Characteristics and Diagnosis of Oral Cancer and Treatment of Traumatic Lesions of the Face." All dentists and physicians in the community are cordially invited to attend.

\* \* \*

Dr. Frank Bowers recently returned from a week's seminar in psychosomatics at the Langley-Porter Clinic.

\* \* \*

Dr. John R. Ryan of Seattle, Washington, has recently been appointed to our medical staff as Consultant in Dental Prosthesis.

\* \* \*

Dr. Roy F. West, also of Seattle, has joined our medical staff as Consultant in Oral Surgery.

\* \* \*

Effective July 1st, we will have our first group of trainees for Occupational Therapy coming from various schools of Occupational Therapy throughout the country. This follows recent approval of our hospital for training purposes by the Research Educational Branch of the Veterans Administration and the American Occupational Therapy Association. This has produced favorable comment by the Occupational Therapy Department of the College of Puget Sound as they have some students who are considering training here. Each group will remain for a three month period.

\* \* \*

Mrs. Louise W. McCausland has been added to our staff as Oral Hygienist, coming to us from Madigan Army Hospital.

\* \* \*

Back to work after having attended the Annual Convention of the Washington State Nurses Organizations in Yakima are: Miss Naske, Chief Nurse; Miss Muehlhauser, Assistant Chief, Nursing Education; Misses Askov and Ryan, Teaching Supervisors; Miss Stranathan, Head Nurse and Miss Bough, General Duty Nurse. They reported an interesting and profitable week in Yakima.

## MOUNTAIN VIEW SANATARIUM

The Mountain View Sanitarium will have its dedication on Saturday, May 10th, with an open house following the dedication. The open house will be continued on Sunday, May 11th. At the invitation of the County Commissioners and the Board of Management of the Hospital a special invitation to members of the Pierce County Medical Society and their wives will give them an opportunity for a preview to be held on Friday evening, May 9th at 8:00 o'clock.

## ST. JOSEPH'S

Recently Dr. T. K. Bowles donated his entire medical library consisting of over a hundred volumes to St. Joseph's Library. A few of the books were his father's, Dr. W. H. Bowles, and are historically interesting as well as valuable as collector's items. Dr. Bowles has been an outstanding general practitioner in Tacoma since 1926. Though he is still very active he retired from his practice in 1947 and has since been enjoying his lovely home and garden.

## PIERCE COUNTY

Norma Johnson and Rhoda Zanow, members of the Mountaineer Club were in the party of thirty Mountaineers, who cruised Commencement Bay and surrounding waters, Sunday, April 20, aboard the Gallant Lady.

\* \* \*

Pauline Chamberlain and her husband, Lyman, had a week-end motor trip to Deception Pass near Bellingham, Washington.

\* \* \*

Pfc. David McKibbon of the Military Police, San Francisco Presidio, is spending a fifteen day furlough with his mother, Mrs. Helen McKibbon of the Social Service Department.

\* \* \*

Mrs. Huntoon Williamson, head of Pierce County Hospital Social Service, was guest speaker during Vocation Days in April at Franklin High School in Seattle and also at Lincoln High School in Tacoma. The groups addressed were composed of students desiring to become social workers. Following this, on Monday, April 14, Mrs. Williamson attended a luncheon meeting of the Directors of Social Centers connected with hospitals, which was held at Sedro Wooley Hospital. Dr. Charles Jones presided over the meeting. On April 20, Mrs. Williamson and Mrs. Hershey, also of the Social Service attended the Washington Social Welfare State Conference held in the Olympian Hotel, Olympia, Washington. The principal speaker of the conference was Dr. Karl De Schweinitz, professor of the Social Service work in the University of California, Southern branch. Dr. De Schweinitz is the noted author of such outstanding works as "Growing Up" and "The Art of Keeping People Out of Trouble."

\* \* \*

Mrs. Bradley, pharmacist, attended the University of Washington Nursery School's refresher course for the graduate nurses of Grays Harbor County at Aberdeen, Washington. The subject of the meeting was NEW DRUGS.

\* \* \*

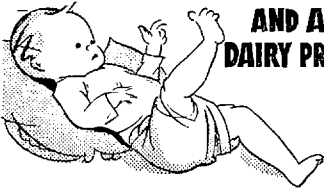
Maxine Harkness of the Record Department is vacationing in Canada. She is accompanied by her sister and husband, Captain and Mrs. Lee Turner. Captain Turner has very recently returned from service in the U. S. A. in Japan.

\* \* \*

(Continued on Page 15)

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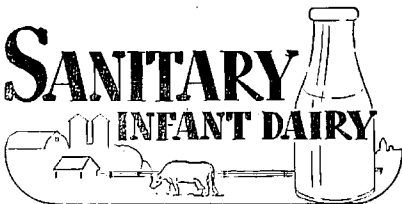


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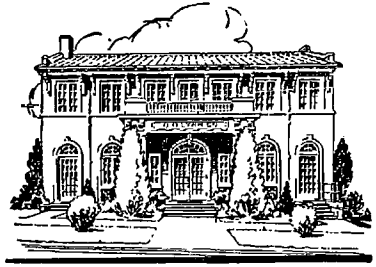


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(Continued from Page 13)

Hospital co-workers of Mrs. Helen Kelly of the Physical Therapy department are anxiously anticipating the complete recovery of Mrs. Kelly from her recent serious illness. Mrs. Kelly is a patient in the Pierce County Hospital.

The Dietary department regret losing Clara Hungate, who has been a valued employee of that department for seven years. Mrs. Hungate is retiring and going to Fort Smith, Arkansas, where she will make her home with her daughter.

Dr. Dorothy Munce, resident, and Pearl Loyst of the Purchasing department, both fishing enthusiasts, report a good catch of trout on the opening day of the season, April 20.

Ruth and Sidney Hulo, who were married last December, have left on a belated honeymoon, destination as yet not disclosed.

Ethel Roberts of the housekeeping department is wearing a beautiful new diamond ring. She has announced her engagement to Mahlon Beeghley. The wedding will be in June.

The hospital is pleased to welcome back Mary O'Neil, of the X-ray Department. She has completely recovered from her recent illness.

Mrs. Mary Lynam and Mrs. Kazu Quaranto attended the Washington State Nurses' Convention in Yakima last week.

Mrs. Mary Morris, O. R. Nurse, is leaving with her husband Sgt. Charles Morris for Moses Lake Air Base on May 1.

Mrs. Marie Amundson, R.N., is retiring from nursing and is returning to her home in Wisconsin. She intends, however, to return to the Northwest, which she has learned to consider her real home during her long service as a nurse here.

Mrs. Nellie Horton's husband, 1st Lieut. Horton, has recently returned from Korea. He is waiting reassignment in Texas. Mrs. Horton will join him presently.

Fatina Baseth, originally a native of Latvia, but for the past two years an attendant in surgery, is

announcing proudly that she passed her American citizenship examination on Wednesday, April 23.

Doctor-Hospital relationships were discussed rather thoroughly at a joint meeting of the Committee composed of representatives from the State Hospital Association and the State Medical Association on Tuesday, April 22nd. It is felt that both associations are profiting by the completely amicable relationship which is being renewed on the basis of cooperative planning for problems involved and occasional areas of friction. It is most interesting to note that these points of friction are in most instances purely misunderstandings. It has been planned that these conferences will be held from time to time whenever problems arise in the minds of either groups as to proper policy formation, either on a state basis or on a local basis.

Civil defense planning was thoroughly reviewed by the Washington State Hospital Association in their semi-annual meeting in Yakima. A tangible, working plan has been adopted and a full-time employee hired to develop hospital services in accordance with the plans outlined by the Washington State Hospital Association. Failure to see any workable compromise of world problems, at least in the near future, emphasizes the need for functional planning in civil defense.

It now appears that the Mountain View Sanatorium will be opening very shortly. With daily inspection of the progress and completion of the Pierce County Hospital Kitchen, it seems possible that the acceptance of the new sanatorium and completion of the County Hospital facilities may run a dead heat. However, everyone is looking forward to the opening of the sanatorium with a great deal of interest. Well-designed facilities and cheerful surroundings will certainly be an asset to the community in every respect.

Mrs. Lelia Robertson for seventeen years head of the Sewing repair department at Pierce County Hospital is resigning this position to become Housekeeping Supervisor of the new Pierce County Tuberculosis Sanatorium. Mrs. Robertson's hospital associates surprised her with a dinner party at Steve's Restaurant on April 24. Mr. Charlie Haddon presided and presented the guest of honor with a corsage of rosebuds and a beautiful Elgin wrist watch, tokens of appreciation for the valued service given by Mrs. Robertson. Eighty-five guests representing each department of the hospital were present.

## TACOMA GENERAL

This month marks the 70th anniversary of the founding of the Fannie C. Paddock Memorial Hospital, which in 1912 was incorporated as Tacoma General Hospital. In honor of this occasion the April issue of "Washington Hospitals" has a feature article about Tacoma General.

Dr. Murray Walker, Resident in Anesthesiology,

(Continued on Page 17)

"Glasses as your eye  
physician prescribes them"

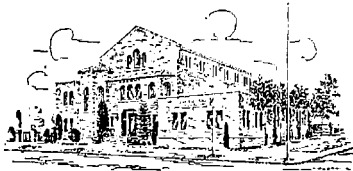
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(Continued from Page 15)

is leaving to enter private practice with Dr. John Havlina.

Dr. Robert Fisher has gone to California where he intends to complete his training in Anesthesiology.

Dr. George Wilde is making plans to move to Shelton, Washington, when his internship is completed in July. He will join Dr. B. N. Collier in general practice.

Dr. William E. Hill, who completes his internship in July, will go to Olympia where he joins the Memorial Clinic as an Internist.

Dr. M. J. Wicks has just returned from New York where he attended the convention of the American Association of Pathologists and Bacteriologists. At the same time he wrote his Specialty Board tests in Pathology.

Dr. Carlos Mena, Resident in Anesthesiology, vacationed recently in his native Mexico.

Dr. Luigi Davoli, now of Toledo, Ohio, was an April visitor. He was proudly announcing the birth of twin daughters on February 18.

Mrs. Nina Mae Garner, Walter Heath, and Carl Rasmussen attended the spring meeting of the Washington State Hospital Association in Yakima. Mr. Heath was moderator for a panel discussion on "Hospital Costs."

On April 1, a course in "Contemporary Developments in Nursing" was started at Jackson Hall under the direction of the University of Washington. Approximately 35 inactive nurses registered for it. As part of the course there will be four hours of ward practice in the Hospital each week for 12 weeks.

Tacoma General Hospital was well represented at the Yakima meeting of the Washington State Nurses' Association, the Washington State League of Nursing Education, and the Washington State Student Nurses' Association on April 14-18. Representatives from the Faculty were Miss Helen Mar Jewett, Miss Helen Johansson, Mrs. Virginia Davies, and Miss Ardyce Overland; from the Nursing Staff there were Miss Borghild Robertson, Mrs. Evelyn Peterson, Mrs. Elaine Rea, Mrs. Geraldine Sawyer, and Mrs. Aline Hatton. Students who attended were Gloria Joergenson, who participated in a panel discussion on "Structure", Nancy Hobbs, Adel Hagen Stewart, Elinor Johnson, and Ernestine Burke.

The Faculty of the School of Nursing has a new Surgical Clinical Instructor, Miss Charleen Finson. Miss Finson is a graduate of Stadium High School, Tacoma, and Providence Hospital in Seattle, with a Bachelor of Science degree from Seattle University. Mrs. Lalage Dean, former Surgical

Clinical Instructor, leaves May 2 to join her husband in Hawaii.

Representatives of the School of Nursing meet quarterly with faculty members of the University of Washington at one of the affiliated institutions to discuss pertinent problems of the training program. On April 25, Miss Helen Mar Jewett and Miss Charlotte Finson attended the Institute at Firlands, Miss Jewett calls to attention the interesting fact that the Schools of Nursing in the State of Washington provide affiliation for or have affiliation with 46 different institutions.

Mr. Russel Hill, Physical Therapist, has been away on an early spring vacation. Most of his two weeks was spent in Rochester, Minnesota.

Mr. John Olliver, for two years assistant in the physical therapy department, left on April 15 to enter private practice in his home town of Vancouver, B. C.

Mrs. Helen Myers attended the Institute for Medical Record Library Personnel which was held in Portland, Oregon, April 7-11. Mrs. Myers is president of the Washington State Chapter of Medical Record Librarians. 45 librarians from as far as South Dakota attended the Institute which was sponsored by the Oregon Association.

The Washington State Society of Medical Technologists held a Seminar on Biochemistry in Wenatchee on April 26-27. Tacoma General Technologists who attended are Lucille Larson, Jane Hill, and Urban TeVrucht. Alice Honan, Western Clinic Technologist and a former Tacoma General student, also attended the meeting.

On April 21, Mrs. Beverly Kozak and Dr. Walter Herron were married in the First Presbyterian Church. Mrs. Herron is a graduate of the Tacoma General School of Nursing, and has recently been on the nursing staff in Pediatrics. Dr. Herron served his internship here in 1950-51.

A seaskic couple lay stretched out in deck chairs, somewhere between life and death. Meanwhile their young son became more rowdy by the minute. Finally the mother mustered voice enough to say:

"John, I wish you would speak to Willie."

The father, unable to lift his head, said feebly: "Hello, Willie."

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## FIFTH OB-GYN CONGRESS NAMES EXHIBIT AWARDS

Three awards and three honorable mentions were presented to scientific exhibitors at the Fifth American Congress on Obstetrics and Gynecology in Cincinnati, March 31 through April 4, 1952, sponsored by the America Committee on Maternal Welfare.

First place was given to "Genital Cytology" by W. Kenneth Cuyler, Ph. D., Louise A. Kaufman, B.A., and Bayard Carter, M.D., all of Duke University School of Medicine and Hospital, Durham, N. C. It consisted of smear slides correlated with the histologic findings as seen by the pathologist, using descriptive caption placards and 100 microscopes.

Second award went to "Fetal Salvage Program—Preconception Treatment Clinic" by Edward C. Hughes, M.D., Charles Lloyd, M.D., Ferdinand J. Schoeneck, M.D., Albert W. VanNess, M.D., and Miss Stella Zimmer, the photographer, all of Syracuse, N. Y. It was sponsored jointly by the College of Medicine, State University of New York at Syracuse; the Syracuse Department of Health; and the New York State Department of Health. The exhibit stressed prematurity, chronic abortion and fetal anomalies.

Third place winner was "Pathology of Perinatal Death" by George W. Anderson, M.D., Trent Busby, M.D., and Robert Nesbitt, M.D., of Johns Hopkins Hospital, Baltimore. The pathology of anoxia, birth injury, congenital malformation and hyaline membrane were shown in color transparencies.

The three honorable mentions went to:

"Care of the Premature Infant" by Elisabeth Larsson, M.D., Milo B. Brooks, M.D., and Robert F. Chinnock, M.D., of the College of Medical Evangelists, Los Angeles. It discussed care of the mother during labor, management of delivery of the premature infant, and nursery care.

"Vaginal Anatomy in Relation to Reconstructive Vaginal Surgery" by Edwin S. Hoffman, M.D., Department of Obstetrics and Gynecology, The Grace Hospital, Detroit. Transparencies from color photos taken at the time of surgery were used.

"Home Delivery Technique" by The Frontier Nursing Service, Wendover, Ky. This organization conducts a demonstration and training field among 10,000 people in a 700 square mile area of the Kentucky mountains. Its nurse-midwives visit many of their cases by horseback, carrying equipment in saddlebags. The exhibit consisted of a replica of a typical log cabin in which they gave a continuing demonstration of a delivery with equipment from their saddlebags.

\* \* \*

Attendance at the Congress totaled more than 4,000, including doctors, nurses, public health workers, interns, residents and nursing and medical students.

Proceedings of the Congress will be published in book form by C. V. Mosby Company by fall. Copies can be ordered from their office at 3207 Washington Boulevard, St. Louis 3, Mo. Price will be about the same as the last volume, of the International and Fourth Congress.

## Doctor's Experiment

In the midst of the discussion about America ability to pay for medical care Dr. Benjamin Broselow of Clayton, New Jersey, has started an interesting experiment. Last January he offered to hold a free clinic for all who felt unable to pay the doctor's fees. In nine months he has treated 400 to 500 patients without charge.

Absence of chiselers astonished him. He expected to deal with a lot of folks who could afford to pay but wanted something for nothing. But only two persons in that class showed up. The others really couldn't afford medical treatment. Since Clayton is a small town, it is not difficult to detect who can pay and who can't.

Most of Dr. Broselow's free patients were old folks with small fixed incomes. In many cases he was able to discover incipient cancer, tuberculosis and hypertension and relieve the condition. Medical colleagues of his county think he is doing a good work.

"I have more trouble with paying patients than with the fifteen or so a week who come to the free clinic," reports the doctor. "When they're told to come back in a month, they wait 30 days; they don't rush back the next day or the next week to pour out a new set of symptoms."

—Wichita Eagle

She: "Do you feel quite at home?"

He: "Oh, not at all. I'm having a swell time."

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## PRESIDENTIAL CANDIDATES

Following are the voting records and attitudes of the various presidential candidates with respect to the issue of Socialized Medicine.

**SENATOR ROBERT A. TAFT, (R), Ohio**—One of medicine's staunchest friends in the United States Senate. He is campaigning vigorously against Socialized Medicine and all forms of State Socialism. He voted against Reorganization Plan No. 1 which, if not defeated, would have created a Cabinet position for Federal Security Administrator Oscar Ewing.

**GENERAL DWIGHT D. EISENHOWER, (R)**—He has made no public statement as yet on the issue of Compulsory Health Insurance or Socialized Medicine. He has spoken out against some socialistic proposals, but his leading backers in the Presidential race include several so-called "Fair Deal Republicans" whose position on the medical issue is at least questionable. General Eisenhower's position may be clarified within the next few weeks. In this regard, yesterday Senator Dirksen (R), Illinois, cabled Senator Lodge (R), Massachusetts, who is at Eisenhower's headquarters, asking that he get Eisenhower to make a public statement on eight key National issues. On our issue, Senator Dirksen specifically asked: "Is he (Eisenhower) for or against Socialized Medicine?"

**GENERAL DOUGLAS A. MACARTHUR, (R)**—Outspoken opponent of Socialized Medicine, Government controls and all socialistic proposals.

**HAROLD E. STASSEN, (R)**—Mr. Stassen took a strong position against Socialized Medicine in a series of articles written for *The Reader's Digest* in January and February of 1950, following a trip to England and a study of the British system.

**GOV. EARL WARREN of California, (R)**—A constant and determined advocate of Compulsory Health Insurance, even though he denies that this is Socialized Medicine. Governor Warren caused Compulsory Health Insurance legislation to be introduced at the 1945, 1947 and 1949 sessions of the California State legislature and fought vigorously, but unsuccessfully, for its enactment. He has become a bitter critic of the medical profession and, if elected President, undoubtedly would sponsor National Compulsory Health Insurance legislation similar to that advocated by the Truman Administration. He has also said in recent addresses that he favors virtually all of the New Deal

legislation enacted during the past 20 years, but feels he could administer the program better than the Democrats.

**SENATOR ESTES KEFAUVER, (D), Tennessee**—In a letter to Dr. R. B. Robins of Camden, Arkansas, a member of the AMA Coordinating Committee, dated January 30, 1952, Senator Kefauver said: "As you know I have heretofore taken my position against the medical bill that is now in Congress. I don't want anything to happen that may bring about Socialized Medicine." Senator Kefauver, however, voted FOR Reorganization Plan No. 1, which would have made Mr. Ewing a Cabinet member, and has supported some other aspects of the New Deal program.

**GOV. ADLAI E. STEVENSON, (D), Illinois**—The current issue of *Newsweek* (April 14, 1952) carries an interview with Governor Stevenson, dealing with major National issues. He was asked the question: "Do you favor compulsory national health insurance?" His answer, according to *Newsweek*, was: "Basically, the problem is how to lift people over the costs of major illness. I don't know whether voluntary plans can do the job. I think the new commission on medical needs may well add some light and remove some heat, enabling us to find a satisfactory solution to this perplexing problem."

**SENATOR ROBERT S. KERR, (D), Oklahoma**—He voted FOR Reorganization Plan No. 1, which would have given Oscar Ewing Cabinet status, and has generally favored New Deal socialistic legislation.

**SENATOR RICHARD B. RUSSELL, (D), Ga.**—An outspoken opponent of most socialistic legislation; he voted against Reorganization Plan No. 1.

**SENATOR HARRY F. BYRD, (D), Virginia**—A vigorous opponent of Socialized Medicine and all forms of Socialism. He addressed the Los Angeles Mid-Winter meeting of the AMA on this issue, December 5, 1951.

**VICE PRESIDENT ALBEN BARKLEY, (D)**—He has supported most of the Fair Deal program. To the best of our knowledge, he has not taken a public position on Socialized Medicine.

Judge: On what grounds do you want your marriage annulled?

Applicant: I have proof, your honor, that her father had no license for that gun!

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## BLUE LAWS OF THE STATE OF WASHINGTON

Did you know that you can go to jail in the state of Washington if, on Sunday, you:

- Operate a grocery store
- Are employed in a grocery store
- Operate a race track
- Promote a baseball game
- Promote any boisterous sport
- Operate a factory
- Are employed in any factory
- Manage a moving picture show
- Are employed in any theater
- Offer to sell your used car
- Rent a fishing boat
- Sell fishing tackle
- Sell a can of worms for bait
- Collect Sunday overtime pay
- Are employed as a plumber
- Are employed as a sheet metal worker
- Are employed as a carpenter
- Are employed as a printer
- Are employed as a meat cutter

Few there are of us who can honestly say that they have never been guilty of at least one of the "crimes" listed above. Are you going to do anything about it? It gives me great pleasure to say that at least one group of people is not sitting idly by content to give lip service to obsolete laws that should have long since gone the way of other absurdities of 1909. This group is called the "Committee for Repeal of Unpopular Legislation" with headquarters in Spokane. A press release about them says "The Committee for Repeal of Unpopular Legislation is an angry group of small business men belonging to both political parties and with different church affiliations who are determined that they will no longer be the victims of the 'old political shakedown racket' which has been forced upon them by the enforcement or lack of enforcement of the Sunday Blue Laws of 1909.

"The Committee feels that the cause of graft and corruption in public office will be removed by the repeal of these ancient, outmoded and discriminating laws. The cause of good government and the convenience of the public can best be served by the passage of this repeal Initiative No. 182.

### It Can Be Done

The small neighborhood grocers of Yakima solved the problem of enforcement of the Sunday Blue Laws in a very simple and effective manner. They "joined up" with the people who wanted to enforce this law against the grocery stores. They declared publicly and loudly that they were going to swear out warrants for the arrests of everyone who worked in a service station or a theater on Sunday in Yakima. This startling proclamation created such a furor of indignation against the Blue Laws that the civic leaders, newspapers and labor leaders of Yakima just got together and declared that this nonsense had to stop—and it did.

This is, of course, one way to attack an evil—make it unenforcable. The other and wiser way is

to attack the law itself—make it not only unenforcable, but untenable. In other words, get rid of it!

The editors of the Bulletin take no responsibility in giving you the name of the above-mentioned Committee. We only know that we believe that it is a step in the right direction. The object of the Committee at the present is to obtain sufficient names to place their Initiative on the ballot. Therefore, if you care enough to try to remedy an obnoxious and unnecessary situation, if you want the state of Washington to continue to be known as a progressive state, if you want to be a law abiding citizen when you rent a boat to go fishing on Sunday or when you put an ad in the paper advertising your car for sale, you can write to Thomas G. Kelley, chairman, Committee for Repeal of Unpopular Legislation, Box 777, Spokane 10., Washington.

Incidentally, if you are interested, there is a copy of the proposed Initiative on file in the Library.

Three slightly deaf men were motoring from the north of London in an old, noisy car, and hearing was difficult. As they were nearing the city one asked:

"Is this Wembly?"

"No," replied the second, "this is Thursday."

"So am I," put in the third, "Let's stop and have one."

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## U. S. Rebukes An Opponent of Socialism

A physical education instructor in the Indianapolis public schools, who recently returned from a year in England as an exchange teacher under the Fulbright act, has been rebuked by the office of education of the federal security agency for speeches lambasting British socialism. This was learned today when the teacher, Frank W. Hamilton, 31, disclosed that he received a letter yesterday accusing him of inaccuracies and lack of tact and judgment in public remarks he has made concerning the situation in England as he found it.

The letter warned Hamilton that such publicity as he has been getting since his return may result in elimination of the Indianapolis area from the international teacher exchange program. It was signed by J. Harold Goldthorpe for the FSA office of education, which administers the Fulbright act.

Hamilton has said in newspaper interviews and addresses before luncheon clubs civic gatherings that "socialism is doctored up communism any way you look at it." He has enlivened his lectures with an exhibit of rationed British foods.

Goldthorpe's letter said that Hamilton's speeches and interviews "will cause undesirable public reactions which will deprive excellent teachers in your area of participating in the fine educational experiences which you recently experienced," adding, "moreover, this kind of publicity will also de-

prive Indianapolis schools and those of nearby communities of well qualified foreign teachers who come to the United States in our exchange program."

Hamilton was cautioned to adopt a "more responsible and mature effort" devoted toward "building better international relations" and was requested to give the office of education an "explanation."

—Insurance Economics Surveys.

## 15,000 More Federal Employees in One Month and Votes

According to the Civil Service Commission, the Executive agencies in the federal government added 15,000 more employees to their payrolls in January, 1952.

There were 2,359,000 civilian employees in the government working in the continental United States as of February 1, 1952.

Tax and spend into Socialism? This is an election year—votes help, too.

A psychiatrist was examining a selectee.

Psychiatrist: What's your occupation?

Selectee: I'm a gag writer for radio.

Psychiatrist: Let's see you invent a gag.

Selectee: (Rising slowly, goes to the door and looks down at the long line of other selectees):

O.K. you guys can go home now, the job's taken.

# GLYKERON

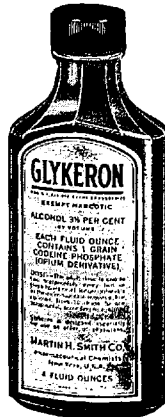
### A Bronchial Sedative

Control the cough that weakens your patient.

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

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

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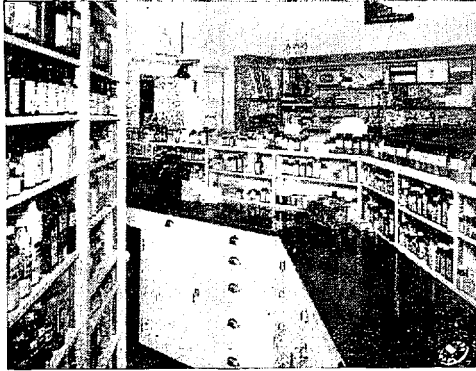
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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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## LETTERS TO THE EDITOR

Pierce County Medical Society  
Medical Arts Building  
Tacoma, Washington

Dear Sirs:

We are in immediate need of a doctor and nurse, man and wife combination, in our community of Holden, Washington, for both industrial work and general practice.

Duties required by the Company include pre-employment examinations and rechecks, care of accident cases, and general welfare of the camp such as checking school children, etc. Salaries paid by the Company are \$592.00 per month for the doctor and \$313.50 per month for the nurse. An apartment is provided at one end of the 5-bed hospital building with heat, lights, electric stove and refrigerator furnished.

Hospital facilities are available for the doctor's private practice. A very fine health and welfare program has been put into effect by the Company whereby it pays for employee coverage and one-half the costs for dependents. The doctor's average income from this plan and other private practice is estimated at between \$300.00 and \$400.00 per month. Thus, the total income possibilities from Company work and private practice ranges around \$15,000.00 per year for the couple, with no cost for office rent or living quarters.

The Holden mine is the largest in the State of Washington and has been operating since 1938. It is located in the Cascade Mountains near the upper end of Lake Chelan. The community is modern in every respect and has an average population of around 600 people.

To provide maximum protection for employees, serious accident cases are sent out by plane or special boat to hospitals at Chelan or Wenatchee, depending upon the patient's choice or other circumstances. Although the Holden hospital is small, it is fairly well equipped. Maternity cases are encouraged to go out in time so as to keep the hospital clear for emergencies or accident cases, but this does not mean that the doctor is tied to Holden exclusively. Because of fast plane service on Lake Chelan, arrangements have been made by the Holden doctor to do his surgical and maternity work there, which has proven quite satisfactory to all concerned. One of the leading doctors at Chelan is a former doctor from Holden, so excellent cooperation is attained.

The best plan for anyone interested would be to visit Holden, meet some of the people and look over the possibilities. Any additional information can be obtained by calling our Company representative in Chelan, Mr. A. N. Snodgrass, telephone Chelan 110.

Any help you can give us in locating a couple interested in this opportunity will be appreciated.

Yours very truly,  
JOHN J. CURZON, Manager

\*\*\*

Dear Doctor:

This will officially notify you that the 63rd Annual Meeting of the Washington State Medical

Association will be held at the Olympic Hotel, Seattle, September 14 through 17, 1952.

Your attention is directed to Chapter IV, Section 8 of the By-Laws which provides that: Memorials and resolutions must be submitted to the secretary-treasurer 30 days prior to the first meeting of the House of Delegates, which will be held Sunday, September 14, 1952.

Please cooperate by sending proposed amendments to the Constitution and By-Laws, Memorials or Resolutions to the Central Office not later than August 1, 1952.

The Board of Trustees, Finance Committee and Defense Fund Committee will hold meetings Saturday, September 13. Hotel reservations should be made with this in mind.

Bruce Zimmerman, M.D.  
Secretary-Treasurer  
Washington State Medical Assn.

## Marriage Licenses Decrease Sharply

The marriage license boom that began at the start of the Korean war has come to an end, according to U. S. Public Health Service statistics. For all of 1951, a total of 1,621,159 licenses were issued, compared with 1,691,673 for 1950. However, in the first six months of 1951 licenses were 6% ahead of the same period in 1950, but in the last half of 1951 they had declined to 12% below the total for the second half of 1950.

The power of will.—"My husband," remarked a Philadelphia matron, "was a confirmed smoker with a tobacco heart when I married him a year ago, but today he never touches the weed."

"Good," said one of the group. "To break off a lifetime habit requires a strong will."

"Well, that's what I've got," said the wife.

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## Changes in the Membership and Fellowship Structure of the A.M.A 1949-1952

1918 to 1949

Prior to 1950, and since the year 1918, all physicians who were active members of their State Society were non-dues paying members of the American Medical Association.

Of the 144,211 members of the A.M.A. in June, 1949, 77,723 were listed as fellows. Fellows paid dues to the A.M.A. and received THE JOURNAL A.M.A.

1949

The House of Delegates of the A.M.A. assessed all members of the A.M.A. \$25.00, but this assessment was voluntary and not compulsory. This was the only assessment made.

1950

There was no assessment in 1950. The A.M.A., for the first time, set the dues for membership in the A.M.A. at \$25.00 a year. If these dues were not paid by the end of the year the member was dropped for non-payment; before he could be reinstated, it was necessary for him to pay the delinquent year's dues.

The 1950 dues did not include a subscription to THE JOURNAL A.M.A.

A member in 1950 again had to pay fellowship dues to receive THE JOURNAL A.M.A. or could subscribe to it separately.

1951

The membership dues in the A.M.A. in 1951 were \$25.00 and included a subscription to THE JOURNAL A.M.A. Fellowship dues were reduced but no longer included a subscription to THE JOURNAL A.M.A.

1952

The same as 1951, except that there are no fellowship dues and fellowship cards are not being issued. Fellowship will probably be abolished after the Annual Meeting of the A.M.A. in June, 1952.

The following summary will further clarify the changes from 1949 to 1952:

*Membership in The American Medical Assn.*

Membership dues in the A.M.A. never included Fellowship dues. Membership dues have been payable only through the County and State Societies.

1949—Assessed \$25.00 but payment *not compulsory*.

1950—Dues \$25.00 *did not include* THE JOURNAL.

1951—Dues \$25.00 *included* THE JOURNAL.

1952—Dues of \$25.00 *include* THE JOURNAL.

*Fellowship in the American Medical Assn.*

Fellowship in the A.M.A. was dependent upon membership in the State and County Societies and the A.M.A. Fellowship dues were payable in addition to the membership dues.

1949—Dues of \$12.00 *included* THE JOURNAL

1950—Dues of \$12.00 *included* THE JOURNAL

1951—Dues of \$5.00 *did not include* THE JOURNAL.

1952—No fellowship dues for 1952.

*Subscription Price of The Journal A.M.A.*

Since January 1, 1951, the price of THE JOUR-

NAL has been included in membership dues; rates below for 1951 and 1952 are for non-members, and laymen. Anyone may subscribe to THE JOURNAL. 1949—\$12.00; 1950—\$12.00; 1951—\$15.00; 1952—\$15.00.

## REPORT ON CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of March 21, 1952 to April 21, 1952 inclusive.

Acute Hepatitis .....	2
Chancroid .....	1
Chickenpox .....	32
Erysipelas .....	1
Diarrhea .....	1
German Measles .....	46
Gonorrhoea .....	8
Measles .....	16
Meningitis .....	7
Mumps .....	107
Scarlet Fever .....	6
Septic Sore Throat .....	1
Ringworm .....	3
Tuberculosis .....	7
Vincent's Disease .....	2
Whooping Cough .....	1

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## Public Relations - A Definition

Public relations has been described as "good performance, properly understood and appreciated." Another definition states that "public relations consists of two parts: do good or be good, and then tell about it."

In terms of the medical profession, these definitions might be combined into one: "The public relations of medicine consists of the rendition by all physicians of the highest quality of medical care, delivered to the public at all times and under all conditions in a manner which the public can understand and appreciate, followed by the education of the public and the profession alike in the fact of such delivery and/or availability of service."

If this combined definition is used, it is readily seen that "the rendition by all physicians of the highest quality of medical care" places an obligation on each physician to uphold his own part of the program. The establishment of friendly relations between the medical profession and the public is something which cannot be turned out by a hired man; public relations to be performed satisfactorily, must be done by yourself. Physicians cannot mistreat their patients as individuals and expect them to love the profession collectively.

Just as public health is the index of the individual "healths" of all members of the public, so the public relations of medicine is the index of the individual public relations of each physician, added together to make the whole.

Each physician must take his own part in any program for the profession as a whole; as a starting point, each physician must recognize and abide by a reiteration of the doctor's dedication to the public interest.

—From "Public Relations for the California Medical Association"

## Specific Substance Found for Use Against Radiation

Dr. Shields Warren, Director of Atomic Energy Commission's Division of Biology and Medicine, reports that a specific substance has been found to work against radiation poisoning and that the discovery is of "very real significance." In testimony before the House Appropriations Committee, Dr. Warren said it has been determined that an emulsion of bone marrow will protect experimental animals against radiation, and added:

"The material in itself is not so important as the fact that one gets protection. That is, the bone marrow itself is not so important as the fact that you can get protection by the substance that is formed there. This is an injection from which we ought to be able to get a specific chemical substance that can be used here. This is the same sort of scientific lead as was the failure of bacteria to grow on mold-contaminated plates, when the initial discovery of penicillin was being foreshadowed. It is very early in the process, but this is the first time a specific substance has been found which will work against radiation."

## Medical Schools in Vast Expansion

A survey conducted by the New York Times a few days ago showed the greatest expansion program in the history of medical education, to cost \$250,000,000, is now underway in this country.

The Times surveyed 80 medical colleges and 48 state commissioners of education through questionnaires.

According to the survey, medical colleges will spend, within the next few years, \$50,000,000 for laboratories, \$30,000,000 for classrooms and \$20,000,000 for dormitories. Another \$100,000,000 is earmarked for research and special projects. In addition, the immediate cost for establishing new medical institutions will run above \$50,000,000, making an over-all expansion program of a quarter of a billion dollars.

"To meet the increasing demands for more physicians and medically-trained men," the Times said, "at least 10 states have taken steps to build new medical schools or expand their two-year basic science schools into four-year institutions."

"In the current academic year—1951-52—the medical colleges admitted the largest freshman classes in recent history, a total of 7,381 . . . Despite the expansions now taking place, large numbers of qualified applicants are unable to gain admittance to any medical college in this country. Many of them seek places in foreign institutions. The records indicate that 20,000 individuals applied for admission to American medical schools for the current college year. As many of them applied to more than one institution, the total number of applications was more than 70,000, or an average of 3.5 a student."

## Doctors at the Dishpan

The U. S. Army could draft all doctors under 31 and use them in non-medical jobs, even as dishwashers. So states Major Robert Hillis in defining the Army's legal position with respect to manpower.

This statement came during a court hearing on a doctor's petition for release from the Army, on the ground that he was illegally drafted as a private. The pros and cons of the case are up to the court. But this broad statement by the Major will make a lot of people think twice.

For one thing, it seems to support the frequent condition that the Army is wasteful in its manpower policies. For another, it reminds any who may have forgotten why in American philosophy it is basic that civilians control the military and not the other way around.

We doubt that the Army would set doctors to washing dishes. It needs them too badly as doctors. But many people will feel that the Army should not have that right even though so far—it hasn't been exercised.

Only a doctor's wife should be clothed with such drastic powers.

—The Philadelphia Inquirer.

"I'se wants a ticket for Florence."

Ticket Agent (after ten minutes of weary thumbing over railroad guides): "Where is Florence?"

Mammy: "Settin' over dere on de bench."

Pierce County Medical Society

Medical Arts Building  
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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club



*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 10

TACOMA, WASH.

JUNE - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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 President-Elect ..... Miles Parrott  
 Vice-President ..... Burton A. Brown  
 Secretary-Treasurer ..... Gerald C. Kohl

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A. A. Sames	C. Macill
T. H. Duerfeldt	Miles Parrott

## DELEGATES

Homer Humiston	Frank Maddison
William Goering	Chris Reynolds
	Frank Rigos

## ALTERNATE DELEGATES

Robert Florence	Glenn McBride
Herman Judd	Philip Grenley
	Fay Nace

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### Entertainment

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	Philip Kyle

### Diabetes

	H. A. Anderson, Chairman
Frank R. Maddison	Edwin Fairbourn
	James Lambing

### Grievance

	J. F. Steele, Chairman
L. A. Hopkins	H. W. Humiston
F. R. Maddison	E. C. Yoder

### Bulletin Staff

Editor .....	Homer W. Humiston
Managing Editor .....	Katherine Rogers
Auxiliary News Editor .....	Mrs. T. B. Murphy

## TENTATIVE GOLF TOURNAMENT DATE

### June 20, 1952

Please return your postcards as soon as possible indicating whether you want a golf tournament this year or not. We must have at least fifty participants to make this annual affair a success.

☆ ☆ ☆

## NOTICE

Check back page of Bulletin for calendar of special meetings

☆

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## *The President's Page . . .*

June and summer vacation-time is here again. It is important that we relax from the stresses and strains of professional work. Let's take time to play this summer.

### Happy Vacationing

WILLIAM H. GOERING.

## *Seven-Course "Meal" for Red Blood Cells*

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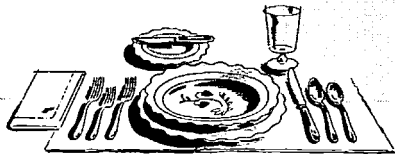
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PULVULES

# Reticulex

(LIVER, B<sub>12</sub>, IRON, AND VITAMINS, LILLY)

## GENERAL PRACTITIONER OF THE YEAR

At the April meeting of the Pierce County Medical Society, Dr. Lewis A. Hopkins was selected as the outstanding General Practitioner of the year in Pierce County. He was born in North Bend, Nebraska, in 1884, and followed the peregrinations of his parents in Nebraska, Illinois, and Iowa. He received a B.S. degree from Grinnell College, Grinnell, Iowa, in 1909. The next six years included two years of employment, two years at Cornell University Medical College, and two years at Rush Medical College, where he received his M.D. degree in 1915. This was followed by a one year internship at Cincinnati General Hospital.

After one year of practice in Chicago, Dr. Hopkins entered the army as a 1st Lieutenant in the Medical Corps, serving about eighteen months until the Armistice. The succeeding four years were spent in general practice in Grinnell, Iowa.

Twenty-nine years ago, in 1923, Dr. Hopkins came to Tacoma where he has been in practice ever since. After one year with the Rich Clinic, he practiced three years in the Rust Building. He was one of the first tenants of the Washington Building in 1926, and one of the first in the Medical Arts Building in 1931.

Dr. Hopkins has repeatedly been asked by his fellow practitioners to accept positions of responsibility in their various organizations. Dr. Hopkins served as President of the Pierce County Industrial Medical Bureau 1935-1939. He was Medical Director of the Pierce County Industrial Medical Bureau from 1939 to 1944, and President of the Pierce County Medical Society 1946-47. He was editor of the Pierce County Medical Bulletin from 1947 to 1951, and for the past four years has been a member of the Board of Trustees of Northwest Medicine. At various times Dr. Hopkins has been on the Board of Trustees of the Pierce County Industrial Medical Bureau, and of the Pierce County Medical Society, and of committees of the Washington State Medical Association. He is a dutiful Kiwanian and a member of the First Congregational Church of Tacoma.

"Bess" became Mrs. Hopkins in 1914. They have three children and seven grandchildren. Lewis' pride in these ten is obvious when he mentions them.

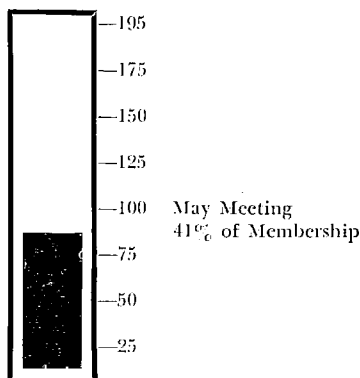
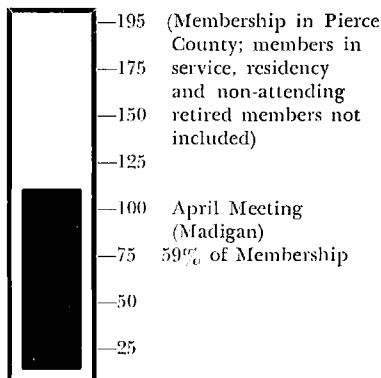
Over the years Dr. Hopkins has contributed freely of his time for Community efforts. He has served on the Board of the Family and Child Service, and is now on the Board of the Goodwill Industries. He has been interested for many years in the complex problems involved in the distribution of medical care, both from a practical and a theoretical standpoint.

An outstanding general practitioner must have many superior attributes as a physician, a human being and a citizen. Dr. Hopkins' patients testify as to his dutiful attitude in the role of physician. His fellow practitioners testify as to his intellectual honesty. Members of the community testify as to his untiring efforts as a citizen.

At the conclusion of our interview, he said, "I have not done anything outstanding." Whether the individual items of performance or achievement are outstanding is unimportant. The summation adds up to a really outstanding general practitioner.

HOMER W. HUMISTON, M. D.

## ATTENDANCE THERMOMETERS!



## MEDICAL LIBRARY

Katherine Rogers, Librarian

Hours: 11 to 5, Monday through Friday

The library will be closed during the first week in June as the librarian is going to take a vacation. During the day a key to the library may be obtained by doctors in the Building Office, and at night from Washington Minor Hospital as usual.

\* \* \*

In order that all doctors will have the benefit of the latest periodicals the current issues will not be allowed to be checked out of the library until another issue has replaced them. This action has been taken at the request of members who like to spend their rare free moments reading in the library.

\* \* \*

You have by now received a form from the office asking for information about your activities. This form was sent out at the request of Washington State Medical Association to be used in their files as source material on members. It would be greatly appreciated if they were returned as soon as possible. Please do not lose yours as only a sufficient

number were mimeographed to supply each member with one copy.

\* \* \*

We sincerely hope that even a few members of the Society will heed Dr. Dille's request at the May meeting for volunteers to review technical books. These are new books and are donated to the library with the review printed in Northwest Medicine. We are not getting our share of these free books, and you can help us get them by reviewing them. We will make the arrangements—all you have to do is read the book and write a report on it.

\* \* \*

We have bibliographies in the Library on the following subjects:

Werner's syndrome  
 Amylase  
 Idiopathic auricular fibrillation  
 Anticoagulants—dicumarol, heparin  
 Mitral commissurotomy  
 Intravenous use of ACTH  
 Bell's palsy  
 Scleroderma and sclerema  
 Myasthenia gravis  
 Retinitis pigmentosa

\* \* \*

We are in desperate need of a few copies of the February Bulletin. Some of our advertisers want tear sheets, and the February issue seems to have been completely depleted. If you have one please call the office and it will be picked up or send it down when you have time.

\* \* \*

By the time you read this issue of the Bulletin, your librarian-managing editor-executive secretary Mrs. Rogers will be no more. By virtue of marriage to Irvin H. Miller she will henceforth use that name. To remember the change of names will no doubt be difficult, and a complete acceptance will take time, but she won't mind if you forget—for awhile.

**YOUR VOTE IS VITAL!**

**Whatever Your Party . . . REGISTER!**

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# Karen Rynning

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1. Perloff, W. M.: *Am. J. Obst. & Gynec.* 58:684, 1949.

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When prescribing Ergoapiol (Smith) with Savin for your gynecologic patients, you have the assurance that it can be obtained only on a written prescription, since this is the only manner in which this ethical preparation can be legally dispensed by the pharmacist. The dispensing of this **uterine tonic**, time-tested ERGOAPIOL (Smith) WITH SAVIN—only on your prescription—serves the best interests of physician and patient.

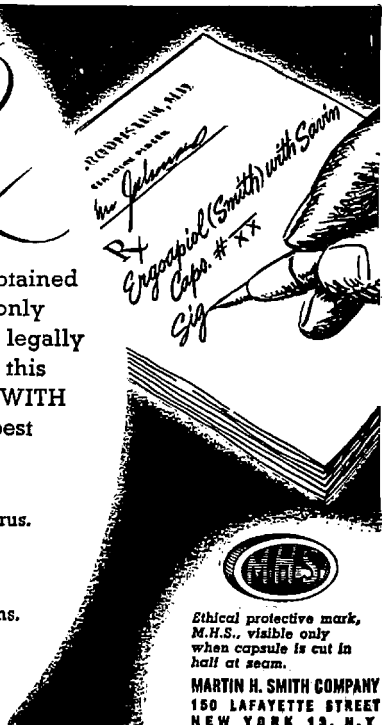
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In ethical packages of 20 capsules each, bearing no directions.

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# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

Mrs. Everett Nelson was installed as the new president of the auxiliary at the last meeting of the year, which was held at the Country Club. The officers for the coming year are:

- President .....Mrs. Everett Nelson
- President Elect .....Mrs. S. R. Lantiere
- First Vice President.....Mrs. George S. Kittridge
- Second Vice President.....Mrs. Robert Gibson
- Recording Secretary.....Mrs. Robert Florence
- Corresponding Secretary.....Mrs. W. Howard Pratt
- Treasurer .....Mrs. Eugene Hanson

\* \* \*

Mrs. T. G. Atkins gave a very interesting talk on India. She and her family lived there for three years.

\* \* \*

Don and Kay Willard are the proud parents of a new daughter. Kay returned to the hospital after being home for a few days to have her appendix removed. Hope that you are on the road to recovery now, Kay.

\* \* \*

Dr. and Mrs. Kemp also have a new comer in their household. They also have a daughter.

\* \* \*

Fay and Ross Wright are planning a boat cruise over the holidays. The first of the month they will vacation in the east. Kay will visit her family in Kansas City, while Dr. Wright will be in Chicago.

\* \* \*

George and Lorraine Kunz have scheduled a trip on an oil freighter which will take them to Los Angeles.

\* \* \*

Pat and John Flynn enjoyed a fortnight of sunshine in California.

\* \* \*

Dr. and Mrs. Thordarson attended the Pacific Coast Academy Meeting in Salt Lake City.

\* \* \*

Thank you, Muriel Nelson, Helen Jarvis and Connie Helleyer for the time you gave at the Blood Bank.

\* \* \*

Joan Anderson will be the Publicity Chairman this next year. If you know any news call Joan at PR. 6771.

### OFFICERS FOR 1952-1953

- President .....Mrs. Everett Nelson
- President Elect .....Mrs. S. R. Lantiere
- First Vice President.....Mrs. George S. Kittridge
- Second Vice President.....Mrs. Robert Gibson
- Recording Secretary.....Mrs. Robert Florence
- Corresponding Secretary.....Mrs. W. Howard Pratt
- Treasurer .....Mrs. Eugene Hanson

### CHAIRMEN OF COMMITTEES

- Year Book.....Helen Jarvis
- Membership.....Edith McGill
- Publicity.....Ruth Murphy
- Social.....Helen Florence
- Program.....Jeannie Schwind
- Telephone.....Gladys Hansen
- Blood Bank.....Dorothy Maier
- Legislative.....Helen Kittredge
- Today's Health.....Merle Herrmann
- Public Relations.....Pat Flynn

## LETTERS TO THE EDITOR

Dear Sir:

This is in regard to obtaining an expert consultant for the Air Force Hospital at McChord Field near Tacoma. I hope it will be possible for you to disseminate the following information in your bulletin or through whatever channels you have available in that we have no direct communication with any particular members of your society.

The position is entitled expert consultant to the Surgeon General, Air Force, in psychiatry. It would entail a half day visit at the convenience of the consultant weekly or every other week. The work would involve consultations with individual doctors and the Staff in regard to diagnosis, treatment and disposition of psychiatric cases. If the consultant desires, he may prepare and present didactic material, although this is not necessary. The work would be entirely professional with no administrative strings attached.

The pay is \$50.00 per visit plus reimbursement for transportation. The requirements are certification by the American Board of Psychiatry and Neurology in Psychiatry or in both Psychiatry and Neurology. The prospective consultant must be a member in good standing of the local medical society.

Any one interested should contact W. Dean Lindgren, Capt. USAF (MD) 325th Medical Group Hospital, McChord Air Force Base, Tacoma, Washington.

Thank you for your assistance.

Sincerely yours,

—D. H. Wilson, Major MC

Acting Chief, NP Service.

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## TAXES AND THE SWISS NAVY

The tax burden Americans are carrying today is almost unupportable. People are thinking about taxes as they never thought of them before. For, in addition to income taxes, there are hidden taxes of such size that realization of them brings a taxpayer up short.

Did you know, for example, that hidden and other taxes on an annual income of \$1,500 amount to \$390? Ar that (for a family of three), with an annual income of \$3,500, the taxpayer shells out \$815.50 in hidden taxes, in addition to an income tax of \$280, for a grand total of \$1,095.50?

Did you know, as revealed by a report from the national Chamber of Commerce in Washington, that whereas there is an income tax of \$928 on a \$7,000 salary, hidden and other taxes come to \$1,350 for a total of \$2,278? Did you know that a man making \$20,000 pays \$4,412 in income tax and \$4,988 in hidden and other taxes, for a total of \$9,400—nearly half of what he makes?

Hidden taxes are taken from you in hundreds of ways. There are liquor taxes, tobacco taxes, stamp taxes on stock transfers, estate and gift taxes, corporation taxes, transportation taxes, safe deposit box taxes, sugar taxes, telephone taxes, employment taxes, admission taxes, et cetera.

One can't see them and doesn't think about them much and takes them for granted. But break down the price of something simple like a loaf of bread. It sells, say, for 20 cents, but its actual value is only 15 cents—five cents goes for taxes.

A gallon of gasoline costs, say 26 cents; 12 cents represents its actual value—the other 14 cents is tax. A 21-cent pack of cigarettes is worth about nine cents; the other 12 cents is tax. A quart of milk that costs 23 cents is worth about 14 cents; the other nine cents is tax. A pound of beef that costs 90 cents is worth about 58 cents; the other 32 cents is tax.

Realization of these hidden taxes makes the known taxes doubly hard to take, when evidences of waste and inefficiency come to light. And sometimes it is difficult to imagine why your tax money has to be spent throughout the world. The national Chamber of Commerce, reinforcing its demand for a 5.8 billion dollar foreign aid program, recently alleged that billions of United States dollars are going into a huge waterway system in France, one feature of which is to provide a 354-mile seaway from the Mediterranean to Lake Geneva, 1,230 feet above sea-level in the heart of the Swiss Alps. At this point, Russel C. Harrington, chairman of the Chamber's committee on government expenditure observed, wryly, that "no doubt a Swiss navy could make a fine contribution to the defense of western Europe."

The Chamber believes that 14.4 billion dollars worth of trimming could be done on the president's budget.

The Transportation Association of America, declaring that "we are headed for a period of deficit spending and neither transportation nor other

enterprise can long survive present trends," has already announced a nation-wide plan to mobilize one million citizens to demand a slash in the federal budget to the level of expected revenues, and to reduce taxes to not over 25% of the national income. The association urges upon citizens the following program: Insist that your congressmen and senators make drastic reductions in the budget; select honest and competent men and women as candidates for public office, regardless of political party; commit such candidates to a sound federal fiscal policy in advance of their election; tell the story of the nation's dilemma to employees and neighbors; and GET VOTERS TO THE POLLS ON ELECTION DAY.

The final recommendation is by far the most important.

—*Cleveland Plain Dealer Editorial, Apr. 7, 1952.*

## CALL ARMY MEDICAL RESERVISTS IN JULY

Two hundred and sixty-five officers of the Army Medical Service Reserve will be ordered into active military service in July, the Department of the Army has announced. This is in addition to the original call up of 290 officers made in March.

Included in the new group are 232 physicians, 25 dentists and 8 veterinarians. Quotas have been assigned to each of the six Army areas in the continental United States, as well as U. S. Army, Pacific, and U. S. Army Caribbean.

For the first time in the history of the Army Dental Corps, dentists with a Priority II rating will be called. This is due to the fact that the listing of officers available under Priority I has been exhausted.

Under the law, Priority I registrants are defined as those educated at Government expense and others deferred from service to pursue a medical or dental education, who spent less than 90 days on active service in World War II following their training. Priority II registrants differ only in that they have spent more than 90 days but less than 21 months on active service in World War II following their training.

However, the Army is selecting those with the least amount of creditable service first and no one with more than 12 months of previous service will be called. Physicians and veterinarians will continue to be selected entirely from the Volunteer Reserve, classified as Priority I.

Medical officers selected will be ordered into the active military service for a maximum period of two years.

The group of 265 will be drawn from the Army areas as follows:

First Army, 69; Second Army, 34; Third Army, 19; Fourth Army, 19; Fifth Army, 85; Sixth Army, 25; U. S. Army Pacific, 6; U. S. Army Caribbean, 8.

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**Whatever Your Party . . . REGISTER!**

**Whoever Your Choice . . . . . VOTE!**

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# The Hospitals . . .

## VETERANS ADMINISTRATION

American Lake, Washington

Dr. Norman Reider, Chief of the Psychiatric Service at Mt. Zion Hospital, San Francisco, California and Assistant Clinical Professor of Psychiatry, University of California Medical School visited this hospital on May 16th and held an interesting discussion on psychotherapy based on psycho-analytic principles.

\* \* \*

National Hospital Day was observed at this hospital on Sunday, May 11th. The general public was invited to visit the hospital and observe first hand the facilities available for the care and treatment of our hospitalized veterans. Approximately nine hundred visitors attended, were given the opportunity of meeting the staff, touring the wards and occupational therapy shops. Entertainment was furnished by many veterans' organizations drum and bugle corps, drill teams and patients' baseball game. A reception was held in the main auditorium and refreshments were served.

\* \* \*

Mr. Richard G. Jones, Assistant Manager, recently returned from San Francisco where he attended the annual conference of The Association of Western Hospitals.

On June 27, 1951, at 1:30 P.M., Dr. Margaret A. Kennard, University of British Columbia, Vancouver, B. C., will speak at this hospital in the Medical Conference Room on "The Neurophysiology of Emotional Disorders." All physicians are cordially invited to attend.

## TACOMA GENERAL

A two-year record for births was established in April. The 222 babies born during that month make the largest total since March 1950.

\* \* \*

Trustees elected to the Board at its annual meeting are Dr. R. H. Huff, Mr. R. A. Mueller, Mr. Gerrit VanderEnde, Mr. Harold Baird.

\* \* \*

Dr. Charles Larson has been notified that the Cancer Diagnostic Clinic of Tacoma General Hospital is on the approved list of the American College of Surgeons. Madigan Army Hospital and Tacoma General are the two hospitals in Washington which have this approval.

\* \* \*

Drs. W. H. Pratt, Philip Backup, and Robert Chambers have been admitted to membership on the Medical Staff.

\* \* \*

Dr. Charles Reberger has been called to active duty in the Navy, and will report May 30th to the Naval Hospital in Bremerton. He has served two

years of his residency in Pathology at Tacoma General.

\* \* \*

Dr. Carlos Mena goes to Pierce County Hospital on July 1 as Chief Resident in Anesthesiology.

\* \* \*

Walter Heath has been named chairman of the "Governor's Council for Aging Population," which is a 15-member committee to explore the well-being of our elder citizens.

\* \* \*

The National League of Nursing Education has informed Miss Jewett that it has granted temporary accreditation to the School of Nursing, and that full accreditation should be applied for. This means that the school is rated in the upper 25% of the schools in the United States, the rating being based on such factors as curriculum, faculty, library facilities, and evidence of arriving at objectives expressed in its stated philosophy.

\* \* \*

On June 14, the 359th General Hospital USAR affiliated with Tacoma General Hospital reports for two weeks of summer camp with headquarters at Madigan Army Hospital. Going from Tacoma General are Borghild Robertson, Betty Sato, Kenneth Ollar, and Dr. Charles P. Larson, commanding officer.

\* \* \*

Mrs. Eudora Fulkerson reports excellent results from the use of the new Diabetic Exchange List which is sponsored by the American Diabetic Association, the American Dietetic Association, and the U. S. Public Health Service. Because it is easily understood, patients are able to plan more varied meals when using it.

\* \* \*

Walter Heath attended the annual convention of the Association of Western Hospitals in San Francisco. On May 14, he was an "Honored Guest," and at the banquet he made the speech accompanying the presentation of a gift to the retiring president.

\* \* \*

Mrs. Nina Mac Garner also attended the San Francisco meeting of the Association of Western Hospitals. She was a member of the nominating committee of the Purchasing Section.

\* \* \*

Carl Rasmussen flew to San Francisco to be present at the Institute on Credit and Collections of the American Hospital Association.

\* \* \*

Mrs. Eudora Fulkerson, Chief Dietitian, and Miss Elaine Lagos, Therapeutic Dietitian, were delegates to the Biennial Pacific Northwest meeting of the Washington State Dietetic Association which convened in Spokane.

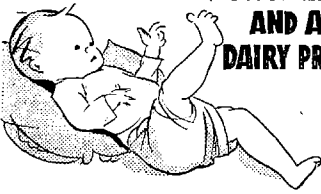
\* \* \*

Dr. M. J. Wicks and Dr. Charles Larson attended

(Continued on Page 15)

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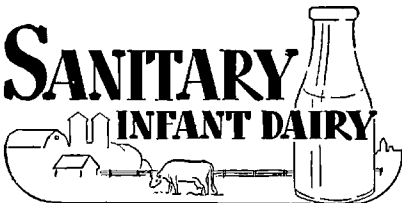


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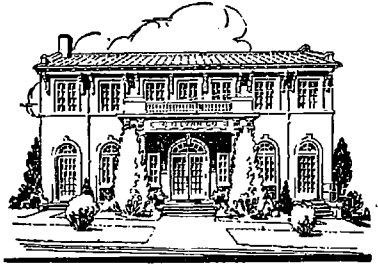


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(Continued from Page 13)

the spring meeting of the Pacific Northwest Society of Pathologists in Spokane on May 16-17.

\* \* \*

The Biennial Convention of the American Nurses Association, meeting in Atlantic City in June, will have three delegates from Tacoma General. Students Delores Jean Pigg and Gloria Joergensen Schuh will represent the School of Nursing and the Washington State Student Nurse Council. Miss Helen Johanssen, Nursing Arts Instruction, will represent the Hospital. Miss Johanssen will go on to New York where she will attend summer school at Teachers College, Columbia.

\* \* \*

At the Wenatchee Convention of the Washington State Society of Medical Technologists, Lucille Larson was elected to the office of President-Elect. Tacoma was selected as host city for the 1953 convention of the Society.

\* \* \*

Washington medical technologists join those of Oregon, Idaho, and Montana as hosts to the National Convention of the American Society of Medical Technologists meeting in Portland in June. The Washington group will be in charge of registering the 1000 delegates. Attending from Tacoma General will be technicians, Lucille Larson, Jane Hill, and Urban TeVrucht; and students, Aldythe Iversen, and Jurell Powell.

\* \* \*

Mrs. Alice Baird, who has been a member of the admitting office staff for ten years, has left to make her home in Coeur d'Alene, Idaho.

\* \* \*

The "In-Service" program for professional nurses will be discontinued for the summer months. The eight lectures in the series have been well attended and the program has been most successful according to the chairman, Mrs. Ellen Wilson.

\* \* \*

Mildred Berg, junior student nurse, is this year's recipient of the scholarship presented annually by the Woman's Auxiliary to the Pierce County Medical Society. Mrs. John Flynn, scholarship chairman, made the presentation.

\* \* \*

Miss Leona Forsberg has completed for this year her activities in student nurse recruitment. During the school year 1951-52, she visited 33 high schools in the western part of the state. Largely because of her efforts the School has been successful in enrolling the full quota of students during the past three years.

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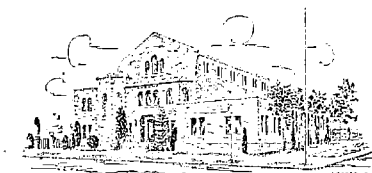
## PENSIONS FOR PHYSICIANS

Recently physicians have been renewing their interest in several pension proposals. Self-employed physicians are now among those groups not under the Social Security Act. An argument frequently used to attempt to persuade older professional persons to urge extension of the act is a so-called bargain feature: for example, to take an extreme case, it is pointed out that a person approaching the age of 65 can pay a minimum of \$121.50 during the last 18 months and receive a social security pension of \$80 per month for himself at age 65 plus a monthly pension of \$40 for his wife at age 65; moreover, the wife's pension would be increased to \$60 per month if she outlived her husband. Actuaries estimate that the single premium at age 65 for an insurance company annuity paying these benefits would be about \$23,000. Monthly pensions of \$120 received once or twice would exceed the minimum cost. The attractiveness of this lure is greatly lessened when a professional man approaching age 65 asks himself: "Who is going to pay for my pension under the Social Security Act if I do not pay for it?" The obvious answer is that the balance of the cost must be paid by the working population, by the profession's younger colleagues, by their neighbors, by their children, and perhaps by their children's children. This is a moral question for all those approaching age 65 who are considering the desirability of coming under the Social Security Act. They must decide whether they want to pay their own way for their own pensions or want younger persons to bear the burden. Moreover, the actions of the House of Delegates of the American Medical Association have indicated other objections to bringing physicians under the Social Security Act, notably, that the pension does not start at age 65 unless the eligible person ceases to earn more than \$50 per month and that the extension of Social Security increase the threat of compulsory health insurance.

Physicians should be interested in the Reed-Keogh Bill (H.R. 4371 and H.R. 4373), which would amend the Federal Internal Revenue Code so as to enable self-employed professional persons to exclude from current taxable income amounts sufficient to finance a reasonable retirement annuity. In other words, this bill would provide for the self-employed the counterpart of the pension that the company physician, lawyer, dentist, accountant, engineer, architect, and chemist can expect from his employer. It would be a voluntary pension plan. The purpose of the bill is to remove the discrimination in federal income tax laws initially created in 1942 against the self-employed in the matter of pensions. A self-employed person would, of course, have to declare the annuity as it is received during his retired years as taxable income; that is, the bill provides for tax deferral until the retired years of life of certain portions of income received during the working years of life. The bill does not permit tax avoidance as such.

(Continued on Page 17)

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(Continued from Page 15)

For several years the Director of the Bureau of Medical Economic Research and the Director of the Bureau of Legal Medicine of the American Medical Association have been cooperating with representatives of more than a score of professional organizations in the study of tax deferments for professional persons. On January 11, 1952, these representatives created a Coordinating Committee on Retirement Benefits for the Professions and the Self-Employed, at the suggestion of the Special Committee on Retirement Benefits for Lawyers of the American Bar Association. The chairman of both committees is Mr. George F. Roberts, a lawyer of New York City. A smaller steering committee of only five members of the coordinating committee has been established. One member, in addition to Mr. Roberts, represents the American Bar Association, and the other three represent the American Medical Association, the American Institute of Accountants, and the American Farm Bureau Federation. The steering committee met in New York City on March 21 and in Washington on March 25 to consider amendments to the Reed-Keogh Bill that would prevent any person from obtaining more than a moderate pension under its tax deferment provisions. The House Ways and Means Committee has decided to hold hearings on this bill, at which time certain amendments will be proposed by the steering committee. It may be that the limits in the bill on the amount of annual income excludable from income taxes, that is, \$7500 or 10% of earned income—whichever is the lesser amount—will be modified. Every self-employed professional man should urge his Congressman to follow closely this bill and urge other self-employed persons, such as farmers, other sole proprietors, and partners to do likewise.

Another notable feature of this bill which was designed primarily for the retirement needs of the self-employed, is that it offers the same opportunity to the employed to defer taxes. The employed person can exclude annually from current taxable income 10% of his earned income—but not more than \$7,500—minus any amounts contributed during such taxable year by his employer to a pension plan approved by the Treasury Department. By extending equal opportunity to the employed the lawyers who drafted this bill hope to assure its constitutionality even though it appears unlikely that many employed persons would seek the tax deferment benefits provided.

Each year several billion dollars are paid by employers irrevocably into pension trusts and insurance annuity contracts for the benefit of their employees. Neither the employer nor the employee who is benefitted pays any current income tax on this vast sum of money, although the employee will declare the employer's share of his pension taxable income when he receives it years later. Simple justice requires that a similar opportunity for tax deferment be given the self-employed, especially professional men, whose peak earnings, bunched into a comparatively few years, are hit hard by steeply progressive income tax rates and who are

forbidden by law to practice their professions as corporations. Either the counterpart of these industrial pension systems should be made available to the self-employed or the provisions of the 1942 Revenue Act providing income tax deferment for the employee for his employer's annual contribution to approved pension plans should be repealed!

—Bureau of Medical Economic Research.

## DURHAM HUMPHREY LAW BECOMES EFFECTIVE APRIL 26

New Federal Legislation affecting all physicians and pharmacists becomes a law this month on April 26.

Known as the Durham Humphrey law it affects doctors primarily by changing the procedure in writing prescriptions. Below is a brief outline of the changes.

1. After April 26, all drugs unsafe for over-the-counter sales will bear the legend "Federal Law prohibits dispensing without a prescription."
  - a. Prescriptions for drugs bearing above legend cannot be refilled without an OK from the prescriber. (If refill instructions are omitted from the prescription it must be treated as NO REFILL by the pharmacist).
  - b. All prescriptions should be marked with one of the following: Refill PRN; no refill; refill x times; or refill for a certain length of time.
  - c. Prescriptions (except narcotics) may after April 26 be LEGALLY telephoned to a pharmacist by the doctor or his nurse or secretary if he has given them the authority.
2. Phoned barbiturate prescriptions must be reduced to writing, signed by the doctor himself and in the hands of the pharmacist within 72 hours.
3. Narcotic prescriptions may not be phoned. The only exception in extreme emergencies and then the prescription must be delivered to the pharmacist when the patient receives the medication.

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## SUPREME COURT RULES IN FAVOR OF OREGON MEDICAL SOCIETY

The United States Supreme Court in a seven-to-one decision April 28, dismissed an appeal of the government against the Oregon State Medical Society, eight county medical societies, Oregon Physicians Service, and several physicians who are or were officials of these organizations. Previously a U. S. District Court had ruled against the government's antitrust violation charge and a direct appeal had been taken to the U. S. Supreme Court.

The controversy in Oregon began in 1936 when the medical society opposed contract practice of medicine sponsored by private firms and commercial insurance companies. At that time the medical society charged that medical treatment and service was dependent upon company approval and in some cases the advice of physicians was disregarded. The medical society raised the ethical objection that third parties were entering the doctor-patient relationship. The medical society in an effort to bring about reform of prepaid medical service within the state, decided in 1941 to render itself such service on a nonprofit basis. After seven years of successful operation of the society plan the government brought suit charging the society with monopolizing the business of providing prepaid medical care within the state.

The Supreme Court said at one point, "Objections of the organized medical profession to contract practice are both monetary and ethical. Such practice diverts patients from independent practitioners to contract doctors. It tends to standardize fees. The ethical objection has been that intervention by employer or insurance company makes a tripartite matter of the doctor-patient relation. Since the contract doctor owes his employment and looks for his pay to the employer or the insurance company rather than to the patient, he serves two masters with conflicting interests. In many cases companies assumed liability for medical or surgical service only if they approved the treatment in advance. There was evidence of instances where promptly needed treatment was delayed while obtaining company approval, and where a lay insurance official disapproved treatment advised by a doctor."

And at another point the Court said, "Since no concerted refusal to deal with private health associations has been proved, we need not decide whether it would violate the antitrust laws. We might observe in passing, however, that there are ethical considerations where the historic direct relationship between patient and physician is involved which are quite different than the usual considerations prevailing in ordinary commercial matters. This Court has recognized that forms of competition usual in the business world may be demoralizing to the ethical standards of a profession."

Mr. Justice Clark, who was formerly the Attorney General of the United States, took no part in the

consideration or decision of the case, probably for the reason that the government suit was commenced during the time while he was serving as Attorney General.

Mr. Justice Black, the lone dissenter, did not write a minority opinion. The majority opinion was written by Mr. Justice Jackson.

## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of April 21, 1952, to May 21, 1952, inclusive:

Ascariasis .....	1
Chickenpox .....	51
Conjunctivitis .....	1
Encephalitis .....	1
German Measles .....	16
Gonorrhea .....	10
Influenza .....	1
Malaria .....	1
Measles .....	18
Mumps .....	116
Pneumonia .....	4
Scarlet Fever .....	3
Syphilis .....	1
Tuberculosis .....	17
Whooping Cough .....	1

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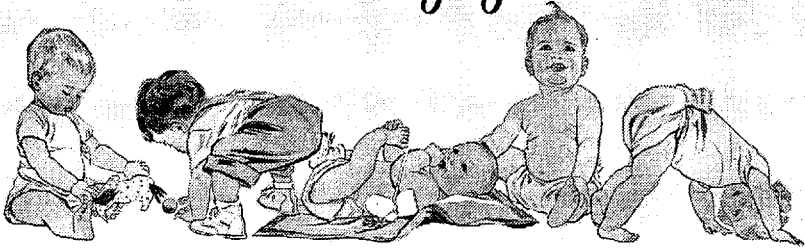
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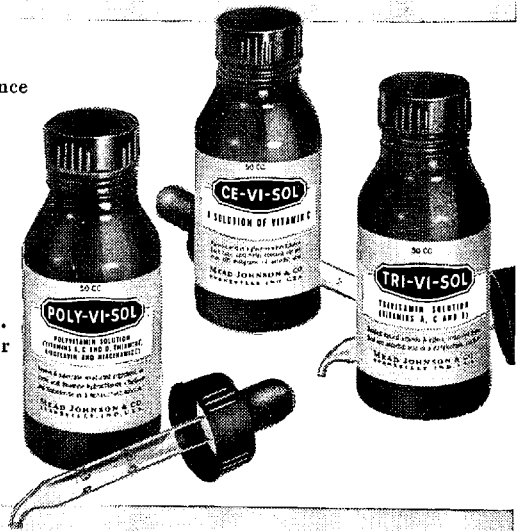
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stable at room temperature; may be autoclaved with formula
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specially designed, easy-to-read dropper assures accurate dosage
- Convenient . . .  
may be given in formula, fruit juice or water, or dropped into mouth



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<b>POLY-VI-SOL</b> Each 0.6 cc. supplies	5000 Units	1000 Units	50 mg.	1 mg.	0.8 mg.	5 mg.
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## I AM THE BILL OF RIGHTS

*Reprinted from New York Daily Mirror*

I am YOUR Bill of Rights and if I could speak, this I would say:

I am 161 years old, having been born on December 15, 1791.

I am the first ten amendments to the Constitution. Until I was written into the Constitution that document was like a body without a soul.

I am your BILL OF RIGHTS.

Don't take me for granted. Like all mortal creations, *I can be killed.*

The giant shadow of totalitarian state-slavery moves over the world. Wherever that shadow falls, I am obliterated. That shadow *has* fallen over the United States.

Three men—Thomas Jefferson, James Madison and George Mason—fathered me. As men brought me to life, I can be slain by men—and will be slain unless YOU and YOU and YOU traditionalist Yankee Doodle Americans organize to *defend me.*

I am the BILL OF RIGHTS.

I am freedom of religion, freedom of speech, freedom of the press, freedom of assembly, I am the privacy and sanctity of your home, I am your guarantee of trial by jury, as I am the policeman who guards your property rights.

Cruel and unusual punishment and excessive fines and bail cannot be visited upon you so long as I am *alive.* I order that *all* rights not specifically mentioned in the Constitution shall be retained by YOU—the people. I am the rights of the States against engulfing centralized power.

I am the BILL OF RIGHTS—your signed lease to spiritual, mental and physical freedom. I ask you to mediate on all my ten clauses. Memorize them. Engrave them on your hearts.

My existence depends on your vigilance—on how vigilantly you watch your rulers. And my eternal enemies known as *dictators*, are abroad in the world and *here* in the United States.

Personal unlimited power has destroyed the liberties of many peoples in ancient and modern times. *It can* happen to you, and maybe, subtly and unknowingly to you, it is *happening.*

Put every law that is proposed in Washington and elsewhere into the crucible of MY TEN COMMANDMENTS. Your question must always be: Not what does a law *give me*, but what does it *take away* from me?

I am the BILL OF RIGHTS.

When I am violated, a *part of you dies.*

I am 161 years old. Will I reach my 200th year? *That depends on you and your children.*

Certificate of health.—Civilian: "Where can I find a doctor honest enough to tell me there's nothing wrong with me?"

Friend: "Join the army, Pal."

**YOUR VOTE IS VITAL!**

**Whatever Your Party . . . REGISTER!**

**Whoever Your Choice . . . . . VOTE!**

## DEDUCTIBLE?

The American Medical Association has taken another step in its long fight to get the Internal Revenue Bureau to permit physicians to deduct expenses incurred in the pursuit of postgraduate study from federal income taxes.

The A.M.A. has been interested in this question for a long time. Thirty years ago the internal revenue commissioner ruled that a doctor's postgraduate expenses were personal in nature and, therefore, not deductible for income tax purposes. On numerous occasions the A.M.A. House of Delegates expressed the viewpoint that this ruling was in error and urged its reversal, but, to date, all efforts have been futile.

Recently, the A.M.A.'s legal department learned that a case was pending before the U. S. Tax Court in Washington involving the right of a lawyer to deduct expenses incurred by him in taking a special course on federal taxes. Since the lawyer's problem and that of the physician are identical, the A.M.A. filed a brief as a "friend of the court."

The A.M.A. set out numerous arguments in support of its stand.

The brief said that "in order to maintain and preserve their professional practice, lawyers, doctors, architects, engineers and accountants necessarily engage in a continuous process of education throughout their professional lives. For professionals cannot adequately serve their clients or patients unless their precious fund of knowledge is always kept fresh and intact. . . . The expenses of maintaining professional competence easily qualify as deductible business outlays. Obviously, the sums paid are directly connected with a trade or business. They are intimately related not only to the various professions, but to the production of income from those professions."

The brief also pointed out the inconsistency in the Internal Revenue Bureau's stand. The bureau allows a physician income tax deductions for subscriptions to medical journals, expenses of attending professional conventions, dues paid to professional societies, and the costs of professional texts and services. Yet it does not allow deductions in connection with other postgraduate study involving attendance at formal courses.

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## EXPECT 30,000 IN CHICAGO FOR A.M.A. SESSION

More than 30,000 persons—15,000 physicians and 15,000 persons allied with the medical profession—are expected for the annual A.M.A. meeting in Chicago, June 9-13. Most of the activity will center at Navy Pier, not far from Chicago's Loop. The A. M. A. Technical and Scientific exhibits will be located in this huge structure, which extends more than half a mile into Lake Michigan. Part of the Pier is now used to take care of the overflow enrollment at the University of Illinois. The Pier was completed in 1914 at a cost of nearly five million dollars.

The Scientific Assembly will open with the General Scientific Meetings, Monday, June 9, at 9 a. m. These meetings will be held at Navy Pier, where the registration bureau also will be located. Registration will begin Sunday, June 8, at 10 A. M. At the Palmer House, the House of Delegates will meet for several days, as will various committees and councils.

In the Scientific Exhibit will be found special exhibits and question and answer conferences covering a wide variety of subjects.

A.M.A. members are cordially invited to visit the A.M.A. headquarters during the Chicago meeting. Visitors will be welcome any time from 8:30 A.M. to 4:00 P.M. Guides will be available for tours through the building.

For the first time, through the medium of television, doctors and the public alike will be able to see what's happening at the American Medical Association's annual convention.

Plans are underway for two, half-hour coast-to-coast telecasts of the convention on Tuesday, June 10, at 9:30 p.m. (E.D.S.T.), and at another date to be announced later.

The programs will be carried over the NBC television network and will be sponsored by Smith, Kline and French Laboratories in cooperation with the A.M.A.

The telecasts, which will be conducted on a strictly scientific and educational level, will present some of the highlights of the 300 scientific exhibits to be displayed at Navy Pier.

These historic telecasts, besides transmitting important medical news to the physician at home and to his patients, will serve to demonstrate that the doctor's quest for lifesaving knowledge never ends. The programs will show one of the ways a doctor continues to learn.

—From Secretary's Letter A.M.A..

**You Can't Be a Good Citizen Unless You  
... V O T E ...**

**You Can't Vote Unless You  
... R E G I S T E R ! ...**

"Why don't you like girls?"

"They're too biased."

"Biased?"

"Yes, bias this, and bias that, until I'm broke."

## DID YOU KNOW?

—that in Japan there is only one cow for about every 413 persons, while in the United States there is one cow for about six persons?

—that the per capita consumption of butterfat in the United States has remained almost constant since 1920?

—that there are vast, untapped, high nutrition food reserves in Central America provided by common weeds and a variety of other edible plants?

—that the important nutrients of milk and cream remain in ice cream; there is no loss in freezing?

—that the daily net addition to the world's population is estimated to be nearly 60,000 at present?

—that over three-fourths of the farms in the United States produce some milk?

—that about one out of every thirteen persons now in the United States is 65 years of age or older?

—that the largest cheese ever made was the 22,000 pound Cheddar shown by Ontario cheesemakers as part of the Canadian exhibit at the World's Fair in Chicago in 1893? The curds from 12 cheese factories for three days were required to produce it.

—Nutrition News.

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**Method** . . . includes education of patient to reverse the attitude toward drinking, to re-form the sense of values, to create new patterns for the life of sobriety.

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## NEWS FROM THE SCHOOL HEALTH DEPARTMENT

Children entering school in September will soon be coming to doctor's offices for examinations. They will bring a new examination form which we hope will be an improvement over the old forms.

This examination is an important event to each of these children. The form will be filed as part of the child's health record.

We are attempting the organization of a plan to have these examinations of school children by the family physician repeated every three years. If the plan is completed, those pupils entering the fourth, seventh, and tenth grades in September, will present themselves to their doctors with the new health form during the summer. These examinations, in addition to the present entering examination, will give a more complete health record for the schools.

Many families have their children examined by a doctor every year or oftener. It is hoped that this plan will stimulate more parents to follow this practice.

Present day medical knowledge and skills now offered by local doctors, are far in advance of what is being used to prevent and cure disease. Periodic examinations help find and cure diseases and defects, and also give the family doctor a chance to do

some health teaching since the parent will accompany the child.

Dental caries are the most common defect. In some areas it is almost incredibly bad. It would be a shocking experience for some doctors if they could see some of the dental conditions in many high school pupils. Prevention must be stressed and doctors must develop a feeling of responsibility for this teaching if conditions are to improve.

We want to extend our grateful thanks to Dr. John Robson for addressing the School Health Forum recently. He discussed, "Epilepsy, and the Brain Damaged Child." His presentation was most interesting and stimulated a lot of discussion. These Health Forum Meetings are a very important point of contact between school personnel and the medical profession. The programs have all been decidedly worthwhile. Our problem is how to make a larger attendance possible.

The lady of the house was entertaining her club when the pattering of tiny feet was heard on the stairs. She raised her hand for silence. "Hush," she said softly, "the children are going to deliver their goodnight message. It gives me a feeling of reverence to hear them . . ."

There was a moment of silence—then shyly. "Mamma, Willie found a bedbug."

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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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## THE POWER OF YOUR VOTE

One morning in 1844, a grain miller in De Kalb county, Indiana, was walking toward his mill. It was election day but he had work to do that would keep him busy all day and he had decided to forego casting his ballot. Before he reached his mill, however, he was stopped by friends who persuaded him to go to the polls. It so happened that the winning candidate for the De Kalb county position won by just one vote—and the miller had voted for him.

When the Indiana Legislature convened the De Kalb man cast the deciding vote that sent Edward Allen Hannegan to the United States Senate. (Until 1912, the legislatures elected U. S. Senators.) And then in the U. S. Senate the question of Statehood for Texas came up for a vote. The result was a tie vote. But Senator Hannegan, who was presiding at "President pro tempore" of the Senate, cast the deciding vote, from the chair, in favor of admitting Texas.

### In 1948 In Ohio Too

These incidents clearly demonstrate the potential power of a single vote. The miller's act of voting affected the destiny of the whole state of Texas. What happened in the last presidential election in Ohio is another illustration. Ohio's 25 electoral votes went to the successful presidential candidate in 1948 by so slim a margin that a single additional vote in each of Ohio's voting precincts could have reversed that result. One single person who didn't vote in each voting precinct thus had the power to change the political destiny of Ohio, and it might well have affected the destiny of the nation or even the world.

In that 1948 presidential election only half the American people of voting age voted—48,000,000 out of a possible 95,000,000. The percentage of people who vote regularly in all elections—local, state and national—is drastically lower: only 20 per cent, or one out of every five of the eligible, vote regularly.

### Get-Out-The-Vote "Tool"

The act of voting, and voting intelligently, is the most important single responsibility of American citizenship. The surest way we have of improving the character and usefulness of our government, on all levels, is for every citizen to inform himself on the issues and candidates and vote on the basis of what's best for the community, state and nation.

## SURPRISE

With his publicity funds cut from \$170,000 to \$77,000, Oscar Ewing apparently is going to have to dismiss 21 of his proposed 33 publicity staff men. Orchids to the Chavez Senate sub-committee on FSA Reports for its recommendation on this cut back. Miracles will never cease even in the FSA.

It has been estimated that government spending in June, 1951, was at the fantastic rate of \$150 million an hour. Agencies are apparently trying to get rid of last year's budget in order to seek new and higher appropriations for 1952.

## ACCORDING TO GOSPEL OF OSCAR EWING

In a press release covering the annual report of the U. S. Public Health Service for 1951, Federal Security Administrator Ewing preached the same old gospel: "the year's end found 40,000,000 American still without the protection of full-time local health services."

"Only half of the 3,070 counties of the United States are served by public health departments," the news release said.

For propaganda purposes, Oscar has a habit of tossing figures around with complete abandon. Sometimes, however, he confuses an issue by contradicting his own figures. He has used the 40,000,000 figure time after time. Yet he had this to say when he testified on local public health units at hearings before the House Committee on Interstate and Foreign Commerce on May 8, 1951:

"... the 40,000,000 figure was geared to the fiscal year 1949, and was based on 1940 population figures adjusted to 1949 by the Census Bureau on an estimate basis. Since then, new and accurate population figures have become available as a result of the 1950 decennial census, and we have just completed—within the last two or three weeks—a recomputation of these figures. The recomputation shows that the population served by the 1,301 full-time health units—serving 1,734 counties and 268 cities is approximately 119,000,000, leaving about 31,000,000—instead of 40,000,000—not served by full-time units."

This was his testimony May 8, 1951. But in April, 1952, he was still using the 40,000,000 figure!

Another interesting fact is that while the press release mentioned 40,000,000, no reference was made to this figure in the annual report itself.

—AMA Secretary's Letter.

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## PHILIP MORRIS LOSES DECISION

The Federal Trade Commission announced early in February the Hearing Examiner's Initial Decision Number 4794 has held against the advertising claims that Philip Morris cigarettes "are non-irritating or less irritating than other brands" because of the moistening agent they contain.

The Hearing Examiner, Earl J. Kolb, said that smoke from all cigarettes, including Philip Morris, is an irritant. His findings of fact state that the extent of the irritation is dependent upon the tolerance of the individual smoker, the frequency and rapidity with which cigarettes are smoked, the length to which they are smoked, and the extent to which a smoker inhales.

In a news release from the American Medical Association on March 28, it is stated that excessive smoking can harm the vocal cords.

The release, based on an editorial in the *AMA Journal* of March 29, carried the following interesting observations:

Known as smoker's larynx, the injury begins as a localized swelling of part of a vocal cord, and later develops into a fibrous tumor or tumors of one or both of the vocal cords if the irritation persists. These tumors may vary in size and shape, and are influenced by the duration of the lesion and the intensity of exposure to irritating factors inherent in the smoking process.

Varying degrees of hoarseness and vocal fatigue are usual clinical manifestations of smoker's larynx. The longer the period of smoking, the firmer the growth of the tumor and the hoarser the smoker.

Complete stoppage of smoking is an effective measure only during the early stages. If the lesion does not show pronounced improvement after 24 hours of abstinence from smoking, it can be considered permanent, in which case treatment requires removal of the tumor by surgical means.

This report from the A.M.A. is of general interest to the medical profession particularly in view of current cigarette advertising campaigns, which utilize extensive mass means of communication to emphasize claims for irritation-free qualities of cigarettes in terms of their effect on the human voice, capitalizing on the testimony of popular actors, musical comedy stars, opera singers, and others who extol the virtues of the advertised brands and ascribe to their brand of cigarettes an innocuous effect on their laryngeal structures.

## New TB Drug

Isonicotinic acid hydrazide, the widely and prematurely hailed new drug tried in tuberculosis treatment, is a simple synthetic compound made from a coal tar base, the formula for which had been on the chemist's shelf for 40 years.

Unfortunately news of the drug broke in the lay press before scientific papers had been published and when less than 200 patients had been treated for periods ranging from a few weeks to a maximum of eight months.

## WITH OUR MEMBERS

Dr. Hinton Jones is the author of a very comprehensive article on the Management of Multiple Sclerosis in the May 1952 issue of *Post Graduate Medicine*. The article was presented at the thirty-sixth (St. Louis) annual assembly of the Interstate Post Graduate Medical Association.

Dr. John Bonica was offered the professorship in anesthesiology at Georgetown University, but he turned it down! Among other reasons that led to his decision is the fact that living in the Puget Sound area is preferable to existence in any other, and the Bonicas feel that the happiness of their family is of paramount importance.

### YOUR VOTE IS VITAL!

Whatever Your Party . . . REGISTER!

Whoever Your Choice . . . . . VOTE!

## WHO'S OPS?

It can't be propaganda, because government agencies aren't supposed to propagandize. So it must be education. Or maybe it's a public information campaign.

Whatever it is, a government agency, the Office of Price Stabilization, has embarked on one of the biggest husker ventures ever: a campaign to sell the virtues of "your OPS" to you and you and you.

OPS has plastered the country with 64,000 billboards. It is printing and distributing tons of literature. It is holding "discussion clinics" whenever it can find two people willing to sit down and listen to the pitch. It is using 300,000 bus and streetcar cards and a million posters for display in stores.

"Your OPS" is selling itself on 1700 radio stations. It sponsors noted economists like Bob Hope and Martha Tilton (she learned economics singing with Benny Goodman's band) who plead with their listeners to "fight the home-front enemy" by supporting OPS.

Unfortunately for OPS, the public doesn't seem to be interested. It may be because prices of most food items and consumer goods are selling well below OPS ceilings. It may be because OPS has made itself ridiculous by issuing thousands of gobbledegook regulations and bulletins that practically nobody understands. It may be because people generally are becoming fed up with unwarranted controls and interference in their daily lives.

But don't think OPS isn't trying. It is spending 69 million dollars this year—all of it your money. And it's pulling out all the stops in an effort to persuade you to persuade Congress to keep "your OPS" alive for another year.

—*Calif. Feature Service.*

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. . . V O T E . . .

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## IF IT'S GOOD FOR THE DOCTOR SHAW CAN SUPPLY IT

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## THE PHARMACISTS HAVE FUN, TOO!

Some people have funny ideas about drugs, and they have strange ways of expressing themselves. Many a note to the drug store written in all seriousness started a laugh when it got there. It was someone trying to be funny, who wrote: "Please let me have a bottle of Scott's Emulsion for the baby. It has the hooping cough until Saturday."

Neither was the fellow, evidently kept awake by the baying of the hounds, who's message ran: "Please give me something to poison an ugly, worthless, night-barking dog."

As a rule drugs and medicine are not easy to spell, and when Antiphlogistine was a popular household remedy there were many queer twists put on the spelling of it. It was "Anti Fluid Digestion" or "Infinite Justine Plaster" or "that plaster that you put in water before you use it" or "Alabastine, a sauce that you put in water before using it," or "Anafjestion for rubbing swollen ankles.

Paregoric becomes "Pegoric," "Pargolic" or "Paragarlic." An order for "Sal Petica, it foams when you put it in water and it also makes the bowels move," means of course Sal Hepatica, which someone else refers to as "Salts of Epidemic." Syrup of Ipecac is called Syrup of Eppenquack or Applejack, while Aspirin is often written "Ashburn" or "Asburn." An order was received for "I. O. & S. Excelsior" and someone wrote "Agrol for the noise" but received Argyrol Solution for the nose. A real hard guy wanted "Cast Steel Soap." A note said: "Please give him medicine that you rub on a baby's gums when they are cracking teeth," while another one asked for "a croup steamer to steam a baby for nomania."

Strange names are invented for medicines. A call for "Red Iodine" might mean Mercurochrome Solution; "Black Castor Oil" might mean Castoria or Fluid Extract Cascara; "Cold Nose Tooth Paste" turns out to be Kolynos and not a nasal jelly. "Serice Bebe Hole" means an infant syringe, while corn salve is described as "Medicine for corn on the finger of the foot."

Sometimes a word is left out, like the note asking for "A box of baby." This should have been referred to the stork. One asking for the "Best insect for beds you have" got a reply that the old reliable variety was still in popular use but was out of stock. "A remedy for one who drinks" is a request received before the days of Antabuse. While a fifth of some standard brand might be an agreeable remedy for the patient, the prescribed would probably prefer a base ball bat.

Then there was a call for "Something to keep the ORDER from a sick room," and one for "A mouthwash caused from bad teeth." A person who did not wish to be misunderstood wrote: "Salve for a sore on the cheek of the face." But the meanest are of all was from the unkind person who wanted "Something for sour feeling and sore head; you know the kind yourself."

—Bernard A. Foote,

Luzerne Co. Med. Society Bulletin.

## Government Gives Nothing for Free

With his plan for socialized medicine blocked for the moment, Federal Security Administrator Ewing has turned his sights on another scheme: socialized higher education.

He wants the federal government to finance scholarships for 50,000 high school graduates every year, and the President is backing him by putting \$0 million dollars in the budget to pay for the scheme.

Commenting on the proposal, the Charlotte (N.C.) Observer said, editorially: "It has long been an accepted principle that public education is the function of the state and not of the federal government. But not until Oscar Ewing came on the scene was it ever suspected that the United States government was obligated to provide a college education for anybody.

"Whenever Mr. Ewing comes forward with one of his devices to give Washington bureaucrats a stranglehold on another aspect of life in this so-called free America, we should remember that the Supreme Court has held that the Federal Government has a right to regulate whatever it subsidizes."

—From Secretary's Letter A.M.A.

## House Passes Fair Trade Bill; No Action Yet In Senate

By a vote of 196 to 10, the House passed and sent to the Senate a bill (H.R. 5767 by Rep. McGuire, Dem., of Conn.) amending the Federal Trade Commission Act so as to give federal sanction to fair trade laws now in effect in 45 states. The bill would return to the states the same power to police fair trade prices that they exercised prior to the Supreme Court's Schwegmann decision in May, 1951. In that case the court held that states were in violation of the anti-monopoly laws if they required retailers to charge specific prices for items that had been in interstate commerce.

The bill would return two specific powers to the state: (a) the right to require compliance from all merchants, including those who had not signed agreements with the manufacturers, and (b) the right to enforce price schedules on items that had traveled in interstate commerce.

Following last year's decision, price-cutting, particularly in pharmaceutical items, occurred in a number of cities. The House bill was strongly supported by such groups as the National Association of Retail Druggists and the National Wholesale Druggists Association. Opponents included the American Bar Association, the American Farm Bureau Federation and the C.I.O. There has been no indication what action will be taken in the Senate.

—Capitol Clinic.

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club



*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 11

TACOMA, WASH.

JULY - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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## New Senate Legislation

Mr. Murray of Montana, and Mr. Humphrey of Minnesota have presented to the Senate a bill "to amend the Federal Old-Age and Survivors Insurance System to provide insured aged persons and their dependents, and survivors of deceased insured persons, with insurance against the cost of hospitalization." Briefly the bill would provide the following:

1. The benefits would include bed, board, nursing, ambulance, operating room, and usual drugs and appliances when hospitalized.

2. The exclusions would include surgery, domiciliary care, hospitalization for tuberculosis and mental conditions.

The maximum annual hospitalization would be sixty days, and the number of persons eligible is estimated by the FSA at 7,100,000. The Administrator of the Federal Security Agency would prescribe and promulgate rules and regulations for the conduct of the program. Each state would merely act as the agent of the Administrator in carrying out details, functioning through its designated health agency. In the event that a state would refuse to accept the agency agreement the FSA Administrator would operate the program within such state. The cost of the program has been estimated at between \$191 and \$235 million annually at the outset, and the plan is to be financed entirely by the federal government from the Social Security Trust Fund.

The bill has been referred to the Committee on Finance.

## PHS REPORTS POLIO INCIDENCE 18% ABOVE LAST YEAR

Incidence of poliomyelitis has been "significantly higher" this season over the comparable period last year in eight states and Hawaii, according to PHS. It lists the following cases reported since March, with last year's cases in parentheses: Ohio, 24 (6); Iowa, 20 (9); Missouri, 15 (6); Florida, 67 (52); Mississippi, 64 (18); Louisiana, 89 (49); Texas, 467 (278); California, 202 (159) and Hawaii, 39 (1). The national totals are 296 cases this year compared with 162 for the same period in 1951, or an increase of nearly 18%.



## NOTICE

Check back page of Bulletin for calendar of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

(In the absence of Dr. Goering, President of the Society, the Managing Editor is taking this opportunity to get a few things off her chest.)

I like doctors. In fact, I think they're wonderful. I want this clearly understood before I go any farther. I think that the medical profession is deserving of the greatest possible credit—as a profession. But with individual doctors the situation sometimes changes. Credit isn't a static thing; you have to go on deserving it. Everyone is familiar with the character who was a hero for a day or an hour during maybe World War I, and who hasn't done a single creditable act since then, preferring to rely on the glory that once was his. I don't say for a moment that doctors are in this category, but some of them seem to feel that a doctor's degree entitles them to wear a crown or perhaps a halo. As far as the laity is concerned that crown vanishes when a doctor refuses to make a home call unless payment of his charges is assured, when he doesn't keep an appointment within an hour or two or maybe not at all, when his bill is a flat demand for payment and not a statement of charges, when he is rude or curt on the telephone. Unfortunately, the list could be added to ad infinitum.

A patient wants to believe in his doctor like he believes in his parents or his church, but the minute a doctor fails to merit the patient's belief and respect he has failed, in part, as a doctor. Perhaps you, as a doctor, don't want to be anything more than a medical man. Unfortunately, you don't have that choice. When you became a doctor you became custodian of the lives of your patients and as such they are entitled to more than just professional knowledge. They are people—entitled to courtesy, respect, fairness, but most of all to the feeling that they as people, not as patients, are important. That is the priceless heritage of each of us—the right to feel that our life is important. And importance doesn't necessarily stem from merely treating a patient's ills: professional ability is the criterion by which a patient chooses a doctor; your humanity is the factor which keeps him your patient.

If you think I'm being rough on you, go back and read the first sentence of this article. It's because I like you that I am writing this. I want other people to have the same respect for your profession that I do.

THE MANAGING EDITOR.

*For a Weeping Dermatitis*

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(CYCLOMETHYCAINE, LILLY)

## **Editorially Speaking . . .**

(The Editor's page this month was written by Dr. Lewis A. Hopkins as Dr. Humiston is on vacation.)

### **A MODERN FABLE**

In the southern corner of the distant province of Unis lies the tiny hamlet of Statesman. Here Ackerman had lived and reared a large family of which the three eldest were boys. Amurt, th oldest, had had the sole care for many years of the family's most valued possessions, a Guernsey cow. Amurt always gave her plenty of good feed even though it made the family's simple fare more simple. When small crops came to Statesman Amurt gave much milk to the poor until his good name was known, even throughout Unis.

The younger brothers, Retorb and Hans, were jealous of Amurt and his control of the family cow, and they planned to unite and take her from him. Retorb would say, "I know a great deal because I have gone to the village school and can take better care of the cow than Amurt." Hans would say, "I have hunted in the forest and once helped to kill a bear. I can protect our cow from the fiercest dogs."

They always talked about working together, but more and more often Retorb said to himself, "The cow will be mine," and Hans said to himself "I want the cow and I am going to have her."

One day the three brothers went to the pasture where the Guernsey was feeding. Retorb said to Amurt, "I know better than you how to care for our cow. Now she will be mine and I will stop giving away so much milk." Hans said, "No, she is mine because I am a brave hunter and can keep the dogs away."

Then Retorb took hold of the cow's horns and Hans took hold of her tail, and each one pulled with all his might. Suddenly the horns and the tail came off, and Retorb and Hans rolled over and over. Amurt followed the cow to the barn and got a large pail of rich milk.

When the villagers learned what had happened they smiled because the milk from Amurt's cow came to them generously, and it was very good.

LEWIS A. HOPKINS.

## MEDICAL LIBRARY

Katherine Miller, Librarian

Hours: 11 to 5. Monday through Friday

The response to the recent plea for copies of the February issue of the Bulletin was nothing short of wonderful. It is very gratifying to know that not only do our doctors read the Bulletin, but that they will take the time from their very busy days to institute the search that must have been necessary, and also to get the Bulletin to the office. Many thanks, doctors.

\* \* \*

We again have several applicants on our list for work in doctor's offices: lab technicians, registered nurses, receptionists, secretaries. If you doctors would call the office before you try the professional employment agencies you would save the girl that you eventually employ a good bite out of her first month's salary as we operate for free. Our placement service is becoming quite well known and we have applicants coming in nearly every day.

\* \* \*

Do you know that there are nine other periodicals published by the American Medical Association any one of which may be substituted for the AMA Journal? A call to the office will take care of it for you.

## CAUGHT IN AN ILLUSION

A sort time ago a number of spokesmen for the grocery business appeared before the Senate Banking and Currency Committee and denounced Office of Price Stabilization red tape and the inflexibility of many of its regulations. One of the most impressive witnesses was a New England super-market owner who dealt vividly with OPS orders governing the sale of meat at retail. The regulations, he said, force butchers to sell the customers bone and fat which ordinarily would be cut off.

He illustrated his point by showing the Committee a heavily fat-rimmed steak which had been cut in accordance with OPS specifications. It would sell for \$4.37. He then said that the same steak without the fat would sell for \$3.90. The housewife would get the saving, and there would be no loss to the butcher, who'd sell the trimmed fat to a rendering plant. But OPS regulations don't permit it.

The people who write OPS regulations are not necessarily authorities on production and distribution. They may have had no experience in these fields at all. They are political appointees, and many of them are power-hungry zealots, to whom control for the sake of control is the big thing. Their jobs and promotions largely depend on their seeming importance. So the orders go out in flood-like volume and confusion reigns supreme.

The incident of the steak is typical. The consumer who thinks the controls are really helping him is caught in a politically-created illusion.

—*Industrial News Review.*

## "NO DOCTOR SHORTAGE"

Testifying before the President's Commission on the Health Needs of the Nation in Washington, Frank G. Dickinson, Ph.D., director of the Bureau of Medical Economic Research of the AMA, said that "there has not been to date a realistic study which supports any valid claim that a national doctor shortage is pending."

Dr. Dickinson brought out some good points. He said that "since people need everything, it can be safely assumed that there are unmet needs for medical services, legal services, dental services, Grade A milk, shoes, and any other goods or services which sell for a price. Since all needs are relative, it follows that all unmet needs are relative. Any approach to the study of regionalization will fail at the start if it is based upon the notion that unmet needs are absolute."

Dr. Dickinson pointed out that in recent years two estimates of the doctor shortage for 1960 have been made by the federal government.

"Both of these attempts," he said, "assumed a national shortage rather than bothering to prove a national shortage."

He said further that many factors have been ignored in the two studies for making a reasonable estimate of the surplus or deficit in the 1960 supply of physicians.

"What do physicians do for people? What would more physicians do for people?"

"The median age of the dying has jumped from age 30 in 1900 to age 67. Volumes are being turned out currently on the social and medical care of the aged. Although a physician must always try as hard to prolong the life of an 80 year old man as he would to prolong the life of a 10-year-old boy, the formulation of national policy on the need for physicians must seriously and sympathetically consider the increasing number and percentage of older people—products of medical progress."

—*Los Angeles County Medical Society Bulletin.*

## Karen Rynning

PHYSICAL THERAPY

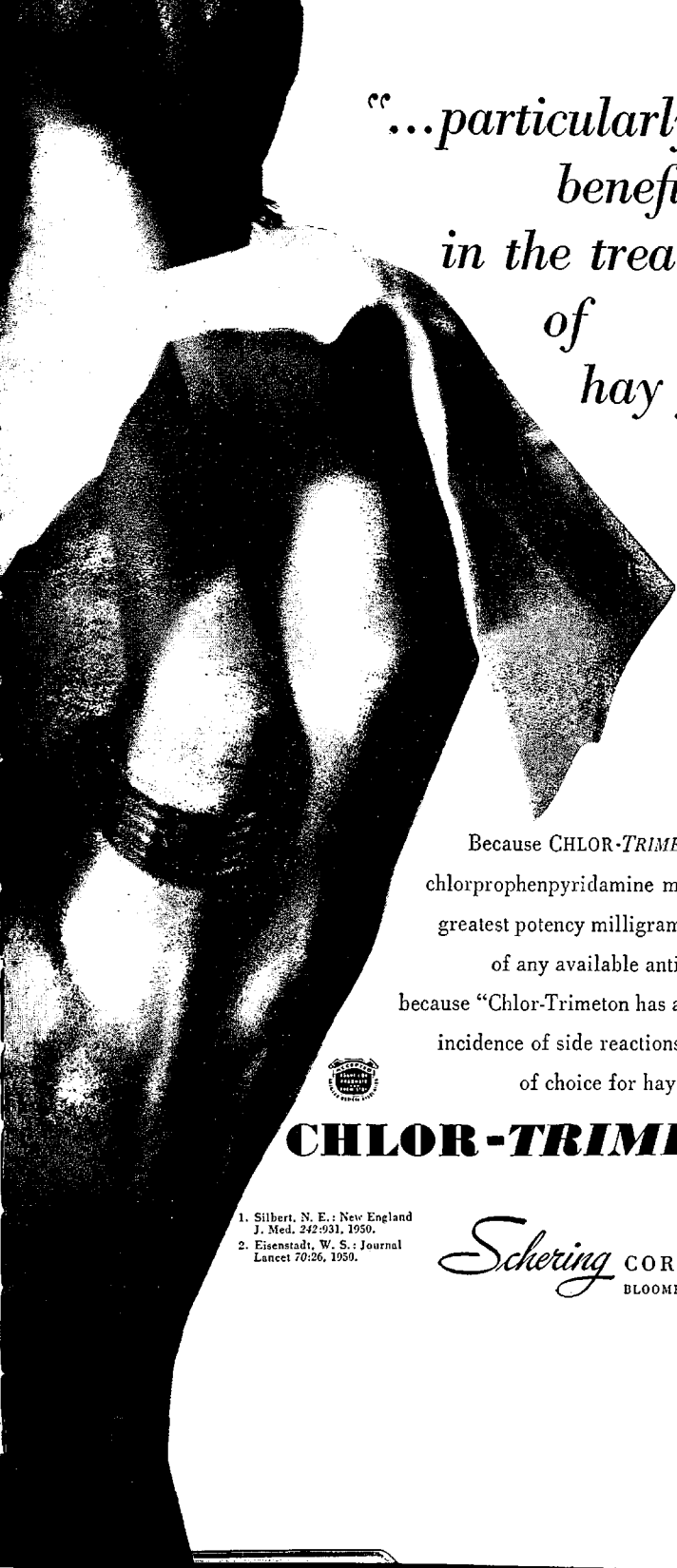
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1. Silbert, N. E.: *New England J. Med.* 242:931, 1950.
2. Eisenstadt, W. S.: *Journal Lancet* 70:26, 1959.

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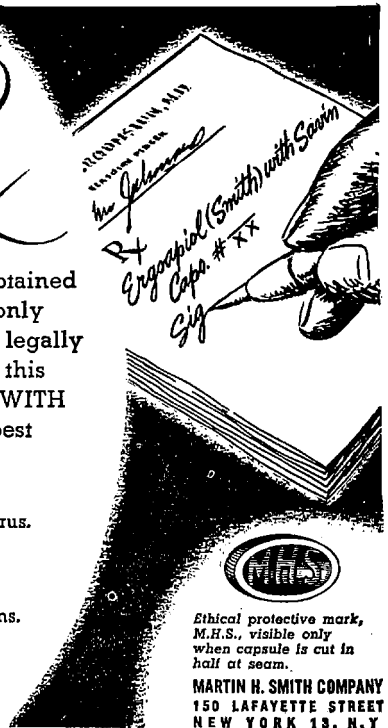
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# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

## THE PRACTICAL NURSE

What should the young woman or the young man choose in the nursing field? To be a registered professional nurse or a practical nurse?

To those who ask these questions, we answer that each performs a unique service, but together, as members of the health team, they perform the most important service of all—helping to keep this nation healthy.

This is recruitment time for both the professional and the practical nurse. Every professional and civic group can help with guiding the right people to these fields of work and with the finances which will be needed for scholarships and for developing more vocational centers where the practical nurse may have a year of training for her work.

After a year of study in the field of practical nursing, the one so trained will be ready to care for mothers and new babies, the aged and infirm, orthopedic, tuberculous, or psychiatric patients, and convalescents. She may work in homes, hospitals, and health agencies. The trained practical nurse may give all the nursing care, under the direction of the doctor or registered nurse, to the less seriously ill, or assist the professional nurse in caring for those who need the skills of both team members.

We ask again that professional and civic groups help with recruitment for both fields of nursing. This is urgent NOW.

## SCHIZOPHRENIA

The chance of total or partial recovery from schizophrenia has nearly doubled in the past 25 years, according to a study made by the National Association for Mental Health. The study indicated that one out of every twelve children born in 1952 will at some time suffer a mental illness sufficiently severe to require hospitalization. A much greater number will develop less severe mental illness or other personality disturbances, according to the study. The study showed that nine million persons, or one in 16 in the U.S., now suffers from mental illness and other personality disturbances. Of this number, 1,500,000 are severely ill. In addition, mentally deficient now total about 1,500,000. The number of patients in mental hospitals is rising steadily, and has increased 20 per cent since 1940, with the present total of 650,000 approximately equal to the total number of patients in all other hospitals combined.

"Darling," she cooed, "I've just read that a man up north exchanged his wife for a horse; would you?"

"Never," he dutifully replied, "but I'd hate to have someone tempt me with a good car."

## OFFICERS FOR 1952-1953

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## U. S. POPULATION PEAK HELD TO BE OUT OF SIGHT

The country's population, once thought to be leveling off, may hit 200 million by the year 2000 and no peak is in sight, according to the slide rule experts. A recent study by the research department of the Chamber of Commerce of the United States indicates that the next few years will see big increases in the number of old people and of young people, with a smaller change in the middle age group.

### Expect 169 Million by 1960

The report notes that the total population doubled in the first half of the 20th century, and that a further increase to about 169 millions is expected by the year 1960, when the next census will be taken. Based on the estimate for 1960, the chamber says: "We can expect an increase of one-third in the age group of 65 years and over. The group under 20 years of age will rise by about 14½ per cent, while the age group of 20 to 64 years, those making up the bulk of the labor force and armed services, will increase by only about 6.9 per cent."

The effects of this growth will be felt in many fields of the economy. It is estimated, the chamber notes, that farm production will be boosted 20 per cent over 1950 levels in less than a decade to meet food demand. Millions more of new homes will be wanted.

—Insurance Economics Survey.

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((The following article is from the Congressional Record and is printed in its entirety):

**Question of the Week**

**EXTENSION OF REMARKS**  
of

**Hon. George H. Bender**  
OF OHIO

IN THE HOUSE OF REPRESENTATIVES  
Wednesday, May 28, 1952

Mr. BENDER. Mr. Speaker, can somebody say something without offending anyone?

**MEDICAL COLLEGES IN VAST EXPANSION**

The greatest expansion program in the history of medical education, to cost \$250,000,00, is now under way in this country.

Almost every college of medicine in the United States is planning to increase its physical facilities. New laboratories, additional classrooms, modern dormitories and special research clinics are on the drawing board or actually under construction.

At present the country maintains seventy-three four-year institutions of medicine, and seven two-year colleges. Commissions or fact-finding committees have been set up in at least ten states to map plans for the development of new medical colleges. Some of the existing two-year schools will be expanded into regular four-year, degree-granting colleges of medicine.

These findings are based on a nation-wide survey conducted by "The New York Times," in which the eighty medical colleges and the forty-eight state commissioners of education were reached through questionnaires.

In the current academic year—1951-52—the medical colleges admitted the largest freshman classes in recent history, a total of 7,381 students. The total enrollment has been growing steadily since the end of World War II. Now it is slightly above 26,000, compared with 23,000 five years ago.

Despite the expansions now taking place, large numbers of qualified applicants are unable to gain admittance to any medical college in this country. Many of them seek places in foreign institutions. The records indicate that 20,000 individuals applied for admission to American medical schools for the current college year. As many of them applied to more than one institution, the total number of applicants was more than 70,000, or an average of 3.5 a student.

More state and municipally owned medical colleges keep out non-residents than ever before. One-fourth of the schools exclude all students who do not reside in the state, while more than 50 per cent give preference to residents. Some of the medical colleges admit only two or three out-of-state applicants in any entering class. The Council on Medical Education reports that seventeen public colleges do not admit non-residents this year, compared with nine in 1948, seven in 1947 and none in 1946.

Of the total freshman class admitted last year

by state and municipal schools, less than 7 per cent were non-residents, compared with 17 per cent ten years ago.

As a result of these geographical restrictions, some of the medical colleges have few students from which to choose. In some instances a medical school is forced to take nearly everyone who applies, while other colleges can accept only one out of every twenty or thirty applications. This makes for uneven scholarship. Whereas A or B students may be turned away in the big-name Eastern private colleges, low B or even C students are accepted in the states that enforce non-resident regulations.

**Contrasts in Admissions**

These figures, prepared by Dr. John M. Stalnaker, director of studies, Association of American Medical Colleges, suggest the wide variations that exist among institutions:

Medical School	Size of Freshman Class	Total Number of Applications Acted On
Alabama .....	80	251
Arkansas .....	90	185
Colorado .....	80	188
Georgia .....	89	249
Iowa .....	120	158
North Dakota .....	36	83
South Carolina .....	70	148

By contrast, here is the size of entering class and total number of applications acted upon by institutions that have no geographical restrictions:

Medical School	Size of Freshman Class	Total Number of Applications Acted On
Albany .....	50	1,410
Boston .....	72	1,353
Chicago Medical .....	72	1,538
Columbia .....	120	2,034
Cornell .....	86	1,831
George Washington .....	95	1,824
Harvard .....	114	1,374
Jefferson .....	166	2,592
New York Medical .....	128	2,879
New York University .....	140	2,072
Pennsylvania .....	135	2,180
Syracuse .....	76	2,284

Commenting on this wide discrepancy in the number of applications received by various colleges, the Council on Medical Education observes:

"Those schools that restrict admissions to residents of a single state will probably have the greatest difficulty in finding suitable students to fill all their available places."

According to Dr. Stalnaker, a few of the schools with such restrictions are at this time taking almost everyone who applies. Some of the applicants are ill-qualified for the study of medicine, have poor academic records and poor test scores but nevertheless are admitted.

—From *Dauphin Medical Academician*.

Next best thing.—The foreman on a political job ran short of shovels and wired Washington for more. The next day he received this reply: "Have no more shovels. Tell men to lean on each other."

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# The Hospitals . . .

## TACOMA GENERAL

Mr. A. L. Babbit, Assistant Manager of the Bank of California, was recently elected President of the Board of Trustees. He succeeds Mr. Harold Woodworth, who held the office for seven years. Mr. Babbit has been a member of the Board for sixteen years, and has served as Chairman of the Executive Committee as well as Secretary of the Board. Mr. E. A. White now becomes Secretary, and Mr. Roe Shaub, Vice President.

Reporting as internes on July 1, were Dr. Glenn H. Brokaw, a graduate of the University of Oregon Medical School; Dr. Charles R. Veirs from the Medical School of the University of Oklahoma; Dr. Gordon P. Smith, State University of Iowa Medical School; and Dr. Rodney A. Brown, University of Washington Medical School.

Dr. Albert Venables of Victoria, B. C., has begun a residency in Pathology. Dr. Venables is a graduate of the University of Alberta in Edmonton, and served with the Royal Canadian Navy during War II. His post-war experience includes general practice in Newfoundland, residencies in Pathology at Jubilee Hospital in Victoria and the Washington State Tumor Registry in Seattle, a surgical residency in the Veterans Administration Hospital in Victoria, and a year of post-graduate study at the Royal Cancer Hospital in London, England.

Upon completion of his internship in July, Dr. Paul Mickens will be associated in general practice with Drs. Rosenblatt and Bondo.

On the first of July, Dr. Kyle Chapman began a residency in Anesthesiology. He is a graduate of the Medical School of Northwestern University and served his internship at St. Luke's Hospital, Chicago.

Dr. John Bonica presented a paper, "The Management of Intractable Pain with Nerve Blocks," at the Chicago convention of the American Medical Association in June.

Walter Heath's talk on hospital economics before the South Tacoma Kiwanis Club included such interesting facts as these: Hospitals constitute the fifth largest industry in the United States; their annual expenditures total  $3\frac{3}{4}$  billion dollars of which  $2\frac{1}{4}$  billion is for payroll and  $1\frac{1}{2}$  billion for supplies and equipment. This is an increase in expenditures of  $2\frac{3}{4}$  billion in the last 15 years; locally the combined hospital payroll is  $13\frac{1}{2}$  million dollars annually with supplies and equipment adding 9 million dollars more each year to the spending in this area; 4500 people, 90% of whom are women, are employed in local hospitals.

Harold McDonald, Ph.G. will be in the Pharmacy during the vacation period.

Orvis Harrelson, senior medical student at Washington University in St. Louis, Missouri, is externing at the Hospital for the summer months. Mrs. Harrelson (Beverly Ford) is back at the admitting desk.

Ruth Amann, R.N., has returned to the Surgical Staff after a long vacation spent travelling to Minnesota and California where she joined her husband on his discharge from the Navy.

Recent improvements in the Hospital building include new floors and new paint in rooms 102, 103, and 104, and the installation of cubicles in Pediatrics.

The Freeholders have established an office in Jackson Hall, where Don E. Nemetz, Public Administration Service expert from Chicago, will have his headquarters during the three months that he will be working with his civic group.

Aldyth Iversen and Jurell Powell, recent graduates of the School of Medical Technology, have accepted positions as technicians at Doctors Hospital in Seattle and Good Samaritan Hospital, Puyallup.

## VETERANS ADMINISTRATION

American Lake, Washington

Drs. T. J. Hardgrove, Otto Schaefer and R. E. Marsh are at Ft. Lewis for a two-week Reserve training period with the No. 359th Hospital Unit.

Dr. Leon S. Diamond recently attended the AMA convention in Chicago and is now vacationing in New York.

Samuel Jacobs recently arrived from New York City and will be with us for three months, as part of his training in clinical psychology. He is doing graduate work in psychology at Columbia University.

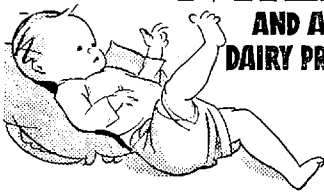
The third annual Veterans Administration Voluntary Service recognition ceremony was recently held at this hospital. Since its inception in 1946, the Voluntary Service Program at American Lake has grown in stature and has made a great contribution in patient care as an integral part of the hospital program.

Thirty-four student nurses enrolled at this hospital for a three month's training period in psychiatric nursing, coming to us from Gonzaga University, Sacred Heart in Spokane, St. Joseph's in

(Continued on Page 15)

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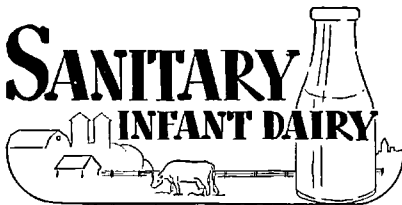


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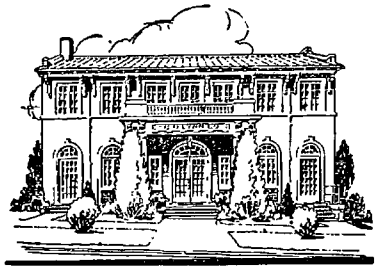


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(Continued from Page 13)

Bellingham, Columbus Hospital, Seattle, University of Washington and St. Joseph's in Tacoma. The group elected Miss Mary Gandini of the Seattle University as President and Phyllis Fischbach of Gonzaga University as Secretary.

Miss Martha Baugh is planning to enroll at the University of Washington this fall and her parents have presented her with a Hillman-Minx.

## PIERCE COUNTY

As July approaches each year, those remaining at Pierce County Hospital experience regret when losing interns and resident doctors with whom they have associated during the past year. Many of those who have been on this year's roster have made plans for future work. Dr. Arthur Wendel, who has been resident physician, is joining Dr. Bruce Stern, one of our interns during 1951. They are establishing a general practice in Port Angeles. Dr. John Gahringer will become a partner with his father Dr. John Gahringer, Sr., in Wenatchee. Dr. Thomas McGranahan will assist Dr. Nash of Cashmere. Dr. Franz Hoskins is to be assistant physician to Dr. Clein of the Clein Children's Clinic for Pediatrics and Allergies in Seattle. Dr. Lloyd Caauwe is leaving to become a First Lieutenant in the Medical corps of the Navy. Dr. Charles Vaught will remain here as resident doctor. Dr. Joseph Pollard is entering an interesting field. He will go to New York from where he will sail as ship's surgeon on one of the Grace Line ships on cruises to the Caribbean and to South American ports. Dr. E. L. Morgan, Dr. Dorothy Munce and Dr. Edward Eylander are still considering a choice of fields. Pierce County Hospital extends best wishes for future success to this group of outstanding young doctors.

Mrs. Bradley, pharmacist for the past four years, has accepted the position of head pharmacist at St. Joseph's hospital. Theodore Taniguchi, who received his training at the University of Washington and his Master's degree from the University of Michigan in 1951 has taken Mrs. Bradley's former position here.

Marmeene Todd of the general office staff has announced her engagement to William R. Nolan. They are planning their marriage for July 24, 1952.

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Mrs. Jean Neissler, Dr. Brady's secretary, became the bride of Howard Leavitt on June 10th. They are planning an extensive honeymoon trip for later in the summer.

The dietary department regrets losing its secretary, Ann Blye, who is moving with her family to California. Ruth Hopkins is now filling the position.

Alice Miller, dining-room supervisor, announced that her son, Ronald, who received his degree in Geology from the College of Puget Sound in June, has been engaged by the government to fill a technical position at Sacramento, California.

From the housekeeping department come the following items of interest: Ann Bradley is vacationing in California, Idaho, and Montana. W. A. Scott has gone to Portland, Oregon, to visit his son and family. Marian Burelli and husband spent their vacations moving into their new home on McKinley Hill. Bea Brown fell at her home and fractured her leg. Newcomers to the department include Clara Nygaard, Burt Christie, Mary Nemitz and Eleanor Bighaus. Ruth Hulo and Kathryn Rogers have left the hospital to become full-time housewives.

Associates at the hospital were saddened by the death of Helen Kelly, valued assistant in the Physical Therapy Department. Mrs. Kelly was admired for her ability and her beautiful character.

Sympathy is extended to Mr. Eugene Schneider, chief laboratory technician, on the death of his mother, Mrs. Gertrude Scheider, in Chicago, Illinois.

Lee Doan has left on an extended motor trip through the eastern and southern states. She will first visit her mother in Detroit, Michigan.

Mrs. Jessie Anderson, Dr. Whitaker's secretary, entertained the other women of the laboratory department at a dinner party at her home on June 20. Those attending were Norma Johnson, Mabel Johnson, Ida Raser, Rhoda Zanow, Gerrie Ackermann, Pauline Chamberlain and Rose Knecht. During the evening the guests were interested in seeing Mrs. Anderson's hand-woven display and learning some of the intricacies of hand-loom at which their hostess spends much of her spare time.

Miss Katherine Mooney, Superintendent of Nurses, has returned from her vacation. She and her mother had a delightful motor trip through Washington and Oregon.

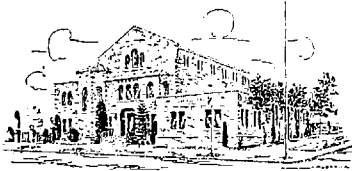
"Governor, you promised me a job."

"But there are no jobs."

"But you said you'd give me one."

"Tell you what I'll do; I'll appoint a commission to investigate why there are no jobs, and you can serve on that."

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## MOST AMERICANS LIVE IN SMALL COMMUNITIES

The United States is generally pictured in terms of its skyscrapers, giant industrial plants, and large crowded cities. Actually, most of the people in our country live in fairly small communities or in rural areas. According to the census of 1950, three-fifths of our population lives in places with fewer than 25,000 inhabitants.

Little more than one-tenth of the people in the United States reside in the five cities of 1,000,000 or over; less than one-quarter live in cities with populations exceeding 250,000. In fact, 25 States do not have any cities as large as 250,000, and of these, 13 have no cities above the 100,000 mark.

There is a rather wide geographic variation in the distribution of population according to size of community. The 1950 Census showed that New York State has the largest proportion of residents in cities of 250,000 or over—60 per cent. At the other end of the scale, North Dakota, Mississippi, and South Carolina show more than 70 per cent in places under 2,500. In general, the South has the largest proportion of people living in small towns and rural areas; the Northeast has the lowest per cent in such places.

The preference of many families for life in small towns and the countryside is also evidenced by the rapid expansion of suburban areas. In the past decade, the communities clustering around the larger cities have experienced the highest rates of growth. Through the development of suburban areas, large number of people are able to enjoy the advantages that small towns offer while they share in the economic life of the near-by cities.

Small communities figured much more prominently in our national life at the turn of the century than they do today. In 1900, virtually three-fourths of the population of the United States lived in places under 25,000. Indeed, well over half of the people lived in rural areas. At that time, 37 States did not have a single city with as many as 250,000 residents. In 1900, there were 11 States which had no cities larger than 25,000.

The total population of the United States has doubled in the past half century, and the number of people living in cities has grown even faster. Nevertheless, by 1950 there were only seven States in which more than half the people lived in cities larger than 25,000; the list includes a contiguous group of northeastern States consisting of Massachusetts, Rhode Island, Connecticut, New York, and New Jersey, as well as Illinois and California. Over the rest of the country, people in relatively small towns and rural areas, notwithstanding the trend toward urbanization, still constitute a clear majority of the population.

—From Metropolitan Life Ins. Co.

Mrs. Teawhiffle: "Did you change the table napkins as I told you?"

New Maid: "Yes'm, I shuffled 'em and dealt 'em out so's no one gets the same one he had at breakfast."

## Army Surgical Consultant Finds Morale Good Among Medical Personnel in Korea

Lt. Col. Kenneth Judy, assistant chief, surgical consultant's division of Army Surgeon General Office, reports on return from 7-week inspection of Korea, Japan and Okinawa that morale among medical personnel is "uniformly good." He found the highest morale at the prisoner of war hospital at Pusan. Commenting on work of the staff at this hospital, Dr. Judy stated:

"We are trying to live up to the Geneva Convention in every way possible, and we are doing it. No one can criticize us from the medical standpoint on the treatment we are offering. Prisoners are getting surgery there that they never heard of before."

Col. Judy has high praise for the work of Mobile Army Surgical Hospital units in Korea where major surgery is performed on battle casualties. He said he found in some cases that the average time between an injury and admission to a hospital was 90 minutes. Because of improved medical techniques and more rapid evacuation, the mortality rate of men receiving medical attention is 2.3 per cent compared with 4.5 per cent in World War II and 8 per cent in World War I, Dr. Judy reported.

Dr. Judy, a reserve officer, in civilian life is staff surgeon at the New Jersey Medical center. He recalled that in World War II the armed forces counted heavily on professors and assistant professors of surgery to staff their facilities. "This time we don't have these men and must train our own," he observed. Dr. Judy then cited the Army's residency training program which he said has developed over 300 certified medical officers.

—Capitol Clinic Vol. 3, No. 14, Apr. 8, '52.

A young man wanted to marry his best girl. He wanted to be frank and tell her a few of the reasons why she might hesitate in marrying him.

He said: "Darling, there are three reasons why you might hesitate to marry me at this time."

"Go on," she said.

He stammered: "In the first place, I have little or no money."

Her instant reply was: "Never mind the other two reasons."

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## WHAT THE PUBLIC DOESN'T LIKE ABOUT DOCTORS

At the recent Secretaries and Editors Conference in Harrisburg, one of the main speakers was Mr. W. A. Richardson, Editor of "Medical Economics." Like the little journal he edits, he was both entertaining and informative, and for his address he talked on the subject of what the public doesn't like about physicians.

Basically, he felt that the public relations campaign being carried on by the AMA and component state and county societies is doing a good job, and the public is both aware of it and in agreement with it. But all the top level policy in the world is no good unless the individual members of the organization practice good public relations in their day to day work.

He found four main complaints that are constantly being made against the individual physician. The first of these is that patients are frequently unable to get a physician when they need one. This applies particularly to house calls and night calls. Granted that many home visits are unnecessary, yet it behooves the individual physician to carefully screen these calls to be sure he doesn't overlook a real emergency. At the county level, an Emergency Call System of some type should be generally adopted. The shining example in the country is that of the Santa Clara County Society in California, which has even taken ads in the newspapers to notify the public that they will take calls anywhere, anytime, without regard to the patient's ability to pay. This is not only good publicity, but it puts a stop to loose talk about physicians refusing calls because of the patients' inability to pay.

The second complaint is that when a patient does get a physician, he doesn't get enough time to get complete satisfaction for his problem. The solution here is squarely up to the physician to take sufficient time. The appearance of being unhurried, the ability to listen well yet not let the patient's story get out of hand, and particularly organizing the office routine so as not to be unnecessarily interrupted by telephone calls, secretary, etc., will solve this situation.

The question arose at this point as to whether there is actually a shortage of physicians. Better transportation methods, antibiotics, better organization of practice, and better trained assistants make the average physician at least one-third more effective than he was even ten years ago, so therefore he theoretically can see one-third more patients. To give the patient sufficient time, the physician must give time to proper practice planning and organization as well as having good intentions.

The public's third complaint is that medical care costs too much. The patient's outburst of rage on receiving an un-itemized bill for fifty or seventy-five dollars for one or two office visits is understandable, since patients are not expected to understand medical procedures. How simple it would be to break the total down to show that it included a chest x-ray, electrocardiogram, basal metabolism, as well as blood count and urinalysis in addition to

the physical examination. This, again, is a matter for the individual physician to adopt.

The fourth and last complaint is that fees are too high. This is probably the most unjustified of the public's complaints, yet it demands an answer, in spite of the fact that the average rise of medical fees has nowhere near matched the rising cost of living. Again, the unscrupulous few who charge all the traffic can bear and a little more besides have blackened the entire profession. At the individual level the problem can be solved by a frank discussion of fees, particularly where a major procedure is involved. At the County Society level, a grievance committee can settle disputes between patient and physician, usually to the satisfaction of both. Most cases appearing before such committees arise through misunderstanding, but if the physician has been exorbitant, he should be dealt with sternly by the Society. There is no point in letting a rotten apple spoil the barrel.

## Perils of War

Two women were recently discussing the possibility of another war.

"If there's another one, they'll be over here bombing before you know it and we'll be blown into maternity."

"You're right," said her friend, "and with the blackouts we'll never know who did it."

—*Lucerne County Medical Society Bulletin.*

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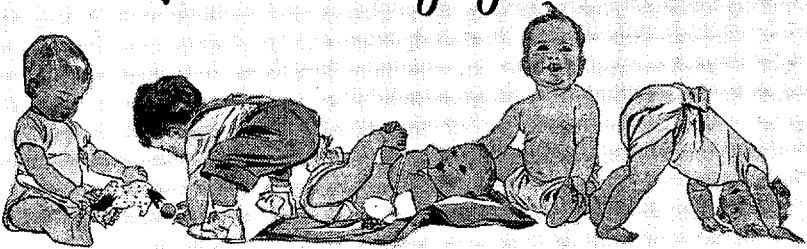
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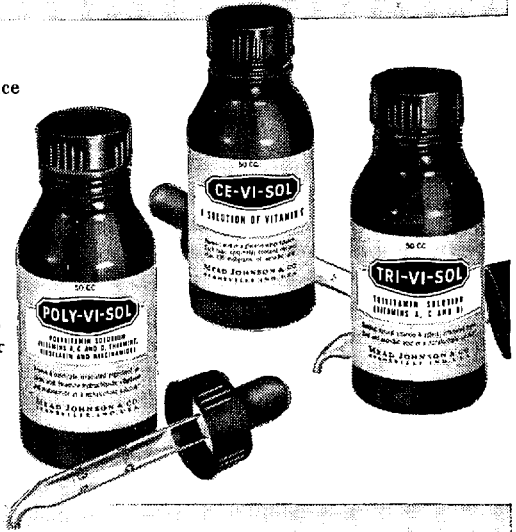
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## EVERY DOCTOR A DOCTOR OF PUBLIC RELATIONS

Excerpt from an address by LARRY REMBER,  
Public Relations Department, American  
Medical Association

When a man achieves the honored title of "Doctor of Medicine," that ought to be enough preparation and enough renown to enable him to carry on successfully in his practice and in his profession. Today's American society, however, demands something more of him. To his M.D. degree he must add another—the degree of "Doctor of Public Relations." Otherwise those in control of our government would treat him worse than if he had no education or training at all. They would chain him to a compulsory medical care system and let the street car conductor and the bus driver and the plumber go scot-free in their bad public relations. That is because laboring people control more votes and can therefore get by ignoring, insulting and displeasing the public. That is the unfair price which we have to pay, because we, like some other whipping boys, are a minority group.

There is another angle, too, why every doctor needs to strive to earn the degree of Doctor of Public Relations. I am convinced in my own mind that the superb "plan of battle" which has been outlined to you by Clem Whitaker and Leone Baxter will defeat successfully the threat of compulsory health legislation being passed by this Congress. But from a long term point of view, this merely holds the enemy at bay. The only way to eliminate him is to *take away his weapons*. What are his weapons?

*His warplanes are the night calls, the emergency calls that are never answered.*

*His tanks are the high fees which are out of line and unjustified and which most people simply cannot afford to pay.*

*His submarines are the rebates which are hidden kickbacks from the sale of glasses, appliances, and drugs, and from referrals.*

*His artillery are the refusals to meet with and to work with lay groups in solving community health problems.*

*His hand grenades are the representatives of newspapers and other media who are brushed off and treated with contempt or anger.*

*His rifles are the lack of personal interest in the*

*patient, the withholding of desired information from the patient.*

*His warships are the failure to tell about the mighty progress and the miracle achievements of voluntary medicine, and its program for ever greater accomplishment.*

*His saboteurs are the doctors who attack the profession publicly, instead of constructively and privately correcting its ills.*

*His mines are those doctors who do not get behind the positive objectives of county society, state association and national organization programs.*

These weapons, as all of you know, will be gradually eliminated from the enemy by the expanding disarmament PR programs of the state medical associations and the American Medical Association. The faster we can step up this process the sooner we will achieve our peace objective.

## HOUSE COMMITTEE BACKS AMA COUNCIL RECOMMENDATION ON NEW COSMETICS

The House Committee Investigating the Use of Chemicals in Foods recommends that a "new cosmetics" clause be added to the Food, Drug and Cosmetics Act. The "new cosmetics" clause would require manufacturers to present evidence of safety and pre-testing to Food and Drug Administration before any new cosmetics could be released to the public. Other recommendations of the Committee: (a) The definition of "cosmetics" in the Food, Drug and Cosmetics Act be changed to include soaps; (b) cosmetics manufacturers be required to label their products the way drugs are now labeled; and (c) coal-tar hair dyes carry the warning that they must be kept out of the eyes or blindness may result.

The newly-elected President of the Tuberculosis Association of Pierce County, is Louis P. Hoyer, Jr., M. D., who succeeds Chris C. Reynolds, M. D. A feature of the annual meeting was the Association's tribute to Miss Stella Kellogg, on the occasion of the twenty-fifth anniversary of her appointment as its Executive Secretary.

—From State Tuberculosis.

## In Foreign Lands

In recent Crucial Elections—  
90% of Belgians—VOTED  
89% of Italians—VOTED  
82% of Englishmen—VOTED  
70% of Japanese—VOTED

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## THE TELEPHONE AND THE DOCTOR—COURTESY TIPS

Not knowing how to use the telephone properly is a lot like having bad breath. Even your best friend won't tell you.

Many people might resent the inference that they don't use their telephone set correctly. But these same people sometimes lost friends and business without understanding that people notice faulty telephone usage and resent it. What you say, how you say it and telephone etiquette are considerations for the doctor and his staff that will help office efficiency and build good will.

Phrases such as "You're welcome," "I'm sorry," and "Thank you very much for calling," plus frequent use of the caller's name indicate friendly personal interest. What you don't say is also frequently important. Be a good listener and avoid interrupting.

How you say it includes a personal inventory of such habits as talking with a cigarette or something else in the mouth, talking too rapidly, talking with your lips too far from the mouthpiece, and shouting into the telephone.

To develop a warm and friendly tone of voice, try to visualize the person to whom you're talking. Avoid showing a desire to have the call over with as quickly as possible.

But to start from the beginning on a check list of telephone habits:

Do you avoid letting the telephone ring . . . and ring . . . and ring before answering?

Do you identify yourself or your office immediately?

Do you have paper and pencil handy to write down telephone numbers and other needed information?

Do you inform the caller of delays when he is holding the line?

Do you make sure the caller is called back if that is your promise to him?

Do you hang up the receiver gently and carefully to be sure that it is "on the hook?"

In business enterprises, delays in completing a call are important enough. But in the medical profession, minutes count. A telephone call to a doctor is many times a matter of life and death. And more often it seems that way to an anxious relative or friend. People in distress and emotionally upset test a physician's office program of good telephone usage. Can you and your staff pass with high honors?

—Summit County Medical Bulletin.

## IT'S A FACT

A bar of iron is worth \$5. When made into horseshoes, this same bar is worth \$10.50. If made into needles, it is worth \$3,285. If turned into balance springs for watches, it becomes worth \$250,000. The same is true of another kind of material—you. Your value is determined by what you make of yourself.

—Anonymous.

## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of May 21, 1952, to June 21, 1952, inclusive:

Chancroid .....	1
Chickenpox .....	46
Diphtheria .....	1
German Measles .....	16
Gonorrhea .....	17
Malaria (non-resident) .....	23
Measles .....	27
Meningitis .....	1
Mumps .....	74
Poliomylitis .....	2
Scarlet Fever .....	2
Syphilis .....	2
Tuberculosis .....	24
Tularemia .....	1
Whooping Cough .....	2

A self styled reformer was watching a trench being dug with modern machine methods. He said to the superintendent:

"This machine has taken jobs from scores of men. Why don't you junk it and put 100 men in that ditch with shovels?"

The superintendent snorted: "Better still, why not put a thousand men in there with teaspoons?"

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## LET'S HAVE A SHOW OF HANDS

A nationally famous surgeon, an outstanding personality in his field, has publicly declared that the general practitioner is incapable of performing any major surgical procedure and should be restrained from indulging in such. Undoubtedly, this unqualified pronouncement will incur the wrath of general men and sympathetic colleagues from Maine to Miami, Cleveland to California. The rancor will be especially acute in the small villages where most of the surgery is being performed by the G.P. and in many of the western states where the surgeons are mostly G.P.'s.

We in Columbus possibly will remain unaffected and impressed. Most of us have long lost the urge to remove even an ingrown toe-nail. Let alone perform an esophago-sigmoidostomy. (Even if we had such a urge we would have to build a private hospital to satisfy it, which would prove expensive at the current cost of building). But how about the principle involved? Do we take up the bloody banner or do we retrench, serene in the comfort that this latest defamation is no skin off our personal schnozzolas?

To some of us non-operating general physicians, this flat-footed statement by Dr. G., the surgeon referred to in our opening sentence, leaves us a bit saddened. Here is a noted surgeon driving an in-

exorable wedge into the substance of our medical fraternity. Here is a stiff breeze to incite the fires of internal discontent. But Dr. G. at least was honest. He did not sugar-coat us with such phrases as "backbone of medicine," "main cog in our American system." Obviously, Dr. G. feels the same way about the general practitioner as Rudyard Kipling felt about the Russians when he remarked, "A Russian is all right until he tries to tuck his shirt-tails in" (and act like an accidental, was the inference).

And so be it with the G.P. As long as he practices his limited field of general medicine he will be allowed to play on the All-American medical team. Dr. G.'s definition of a good general practitioner seems to be a man who does everything—except surgery. Now, if we extend this line of reasoning to the 122 specialties and subspecialties, we come up with 122 different definitions. Under such limitations how many students within the echo of our voice would like to become general practitioners? Let's have a show of hands, please!

—From Columbus Academy of Medicine.

A young lawyer, pleading his first case, had been retained by a farmer to prosecute the railroad company for killing twenty-four hogs. Seeking to impress the jury with the greatness of the loss, he said: "Twenty-four hogs, gentlemen! Twenty-four! Twice the number in the jury box!"

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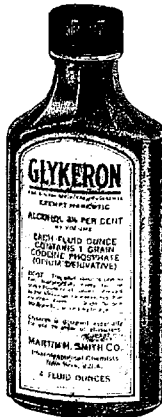
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## HOUSE PASSES H.R. 7800— SOCIAL SECURITY AMENDMENTS

The House of Representatives June 17 by vote 361 to 22 passed H.R. 780 under a special procedure (requiring two-thirds of those present and voting for passage) after certain amendments were made by the Ways and Means Committee. It will be recalled that on a previous attempt (May 16) the bill was defeated when 140 members of a total of 290 present voted against the measure. The amendments which were offered eliminated some provisions, one of which would have required totally and permanently disabled persons to accept rehabilitation under penalty of forfeiture of benefits. Deleted also were provisions which would have: (a) permitted the Administrator to declare forfeited benefits of disabled persons refusing to comply with regulations; (b) directed the Administrator of the Federal Security Agency to prescribe medical examinations to determine disability and designate physicians and institutions, including federal facilities, to make such examinations; and (c) authorized the Administrator to reimburse disabled persons for travel to designated places for medical examination.

The American Medical Association maintained its original position of opposition to Section 3 of the bill, contending that the proposed amendments did not meet its original objections. The elimination of specific grants of authority to the Administrator of the FSA to make regulations does not preclude him from making regulations as he deems necessary. The basic Social Security Act gives the Administrator authority to make any necessary regulations to administer the law.

The American Medical Association will continue its fight in the upper chamber to eliminate the entire section on total and permanent disability. The section on total and permanent disability carries with it, of necessity, medical determinations under the direction and control of the federal government.

Prior to the House vote many members of the House were personally contacted and following is a summary of their reasons for supporting the bill: (1) The amendments met or nearly met the objections of the medical profession; (2) the amendments represent a "compromise" of a controversial matter; (3) correspondence from social security beneficiaries; (4) the political value of an affirmative vote on such a measure in an election year; and (5) too close to adjournment to bring out a substitute bill which would completely eliminate controversial features.

Most members contacted would have preferred that the bill be considered under a procedure permitting amendments to be offered.

"Why do you always look puzzled when I say I'm a self-made man?"

"I just can't decide whether you're bragging or apologizing."

## COMMENTS ON PROFESSIONAL JEALOUSY

The "Correspondence" pages of the March 1 Journal of the AMA include an interesting article, entitled "Professional Jealousy," which was written by three physicians.

In discussing the duty of physicians to take a more active interest in civic affairs so that American medicine can survive as a free and independent profession, the article carried these two salient paragraphs:

"The energies expended by the American Medical Association to stimulate physicians to participate in community affairs may be doomed to at least partial failure unless the profession removes a problem from within its midst. This problem can be vicious and certainly is an unnecessary evil. Gossips speak of it as 'professional jealousy.' All physicians must admit that such an evil sometimes arises.

"These two vilifying words have caused too many physicians to be reticent about participating in public relations programs such as those stressed by the American Medical Association. The fear of unjust and unwarranted criticism has prevented some influential physicians from supporting a program that requires their names in print. Regardless of the worthiness of the project, they fear some will misconstrue it as advertising."

The doctors conclude by asking: "What can the medical profession do to eliminate professional jealousy?"

— *AMA Secretary's Letter.*

"Two ladies met on a train. 'I'm from Boston,' haughtily remarked one. 'There, breeding is everything.'"

"Well, I'm from Texas," the other replied. "We like it there too, but it's not everything."

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## A.M.A. FILES BRIEF

The American Medical Association has taken another step in its long flight to get the Internal Revenue Bureau to permit physicians to deduct expenses incurred in the pursuit of postgraduate study from federal income taxes.

The A.M.A. has been interested in this question for a long time. Thirty years ago the internal revenue commissioner ruled that a doctor's postgraduate expenses were personal in nature and, therefore, not deductible for income tax purposes. On numerous occasions the A.M.A. House of Delegates expressed the viewpoint that this ruling was in error and urged its reversal, but, to date, all efforts have been futile.

Recently, the A.M.A.'s legal department learned that a case was pending before the U. S. Tax Court in Washington involving the right of a lawyer to deduct expenses incurred by him in taking a special course on federal taxes. Since the lawyer's problem and that of the physician are identical, the A.M.A. filed a brief as a "friend of the court."

The A.M.A. set out numerous arguments in support of its stand.

The brief said that "in order to maintain and preserve their professional practice, lawyers, doctors, architects, engineers and accountants necessarily engage in a continuous process of education throughout their professional lives. For professionals cannot adequately serve their clients or patients unless their precious fund of knowledge is always kept fresh and intact. . . . The expenses of maintaining professional competence easily qualify as deductible business outlays. Obviously, the sums paid are directly connected with a trade or business. They are intimately related not only to the various professions, but to the production of income from those professions."

The brief also pointed out the inconsistency in the Internal Revenue Bureau's stand. The bureau allows a physician income tax deductions for subscriptions to medical journals, expenses of attending professional conventions, dues paid to professional societies, and the costs of professional texts and services. Yet it does not allow deductions in connection with other postgraduate study involving attendance at formal courses.

The Tax Court is expected to hand down a decision in the case shortly.

—A.M.A. Secretary's Letter.

## NEW MINISTER?

The doctor was called to look over Grandma, who had been complaining of aches and pains. He gave her a thorough going over.

After he left, Grandma seemed to perk up a bit. "What did you say was the name of that new minister?" she asked, cocking her ear trumpet.

"That wasn't the minister; that was the doctor," her son told her.

"Hmmm, I did think he was a bit familiar for a minister."

## A.M.A. PRESIDENT REPLIES TO TRUMAN ATTACK

NOTE: President Truman, in a speech before the convention of the Veterans Administration Voluntary Service in Washington, attacked the American Medical Association which, he said, "hates the administration worse than it hates the devil." Here is the American Medical Association's reply, issued through its president, Dr. John W. Cline, San Francisco.

CHICAGO—Replying to President Truman's attack last night Dr. John W. Cline, San Francisco, president of the American Medical Association said:

"President Truman reached the right conclusion when he decided not to run again. He would now render the people a distinct service if he stopped trying to push his shoddy socialistic proposals through Congress during the remainder of his unfortunate tenure in the White House. Neither the public nor Congress wants what he has to offer.

"Mr. Truman's latest maneuver, in attempting to establish a foothold for socialized medicine by a trick amendment to the Social Security Act, prepared in secret committee sessions and designed to be steamrollered through Congress before the deception was discovered, was the desperate act of a man who knows his program is in public disfavor.

"The American Medical Association did not oppose the administration bill to increase old age pensions, as that legislation does not properly fall within its province. It only opposed the trick amendment intended to enable the Federal Security Administrator to start taking over control of the sick and injured.

"If Mr. Truman is still determined to seek enactment of his socialized medicine program, he should do it openly and ask a roll call on that issue, rather than attempting to achieve his ends by trickery."

In his speech, the President referred by name to the A.M.A. public relations firm, Whitaker & Baxter, Chicago, which has been directing the doctors' voluntary campaign against compulsory health insurance. In reply, Clem Whitaker and Leone Baxter issued the following statement:

"President Truman's speech sounded like the talk of a patent medicine peddler who has failed to make a sale. If he had spoken well of the A.M.A. or of us, the country would have reason to be suspicious of us. After seven years of the Truman administration, the peoples' health is about all they have left, and it would be a sorry day for America if Mr. Truman got control of that, too."

A farmer brought his wife to the doctor, who examined her and told him she was insane. Said the farmer, "Doctor, I can't see how she could get it, as she has not been off the farm for twenty-seven years."

"My wife dreamed last night she was married to a millionaire."

"You're in luck. That's what my wife thinks in the daytime."

## IF IT'S GOOD FOR THE DOCTOR SHAW CAN SUPPLY IT

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## THINGS TO THINK ABOUT

### A DECADE OF PENICILLIN

It is now approximately ten years since the first of the antibiotics was made available for clinical use in the United States; and the development of this new type of therapy forms one of the most dramatic chapters in the history of public health.

If the mind of man were more imaginatively open to the significance of newly observed phenomena, we might have had this great discovery half a century ago. In 1881 the English physicist John Tyndall clearly described the effects involved. In his early studies of the microbic flora of the atmosphere he noted that when organic infusions were exposed to the air, rapid development of bacteria took place *except* when a growth of mold occurred on the surface. In the latter case he observed, "The mold stifles the Bacteria and clears the liquid all the way between the sediment and the scum." Furthermore, he noted that only those "Bacteria which manufacture a green pigment appear to be uniformly victorious in their fight with the *Penicillium*"—recognition of the failure of the mold to control certain Gram-negative bacteria. No one, however, saw the significance of this observation until Alexander Fleming observed a similar phenomenon in 1929; and it was 1940 before Chain and his associates actually developed penicillin for clinical use.

The first—and one of the most important—of the drugs which will destroy invading germs within the human body was, of course, quinine, introduced in the seventeenth century into Europe from Peru where its effectiveness had been empirically discovered presumably by the aborigines. At the end of the nineteenth century the acceptance of the germ theory of disease and the development of organic chemistry led to an eager search for a "therapy *stilletisus magna*," and in 1907 Ehrlich and his pupils introduced salvarsan. The sulfonamides were developed in 1932; and now the antibiotics have come into their own—with possibilities far greater than those of any of their predecessors.

Penicillin has proved of notable value in combating the bacterial pneumonias and the commonest types of streptococcal infection, so that while we have done little in controlling morbidity from upper respiratory infections, the mortality from pneumonia has decreased to a most encouraging degree. Gonorrhea, too, is now for the first time really susceptible to therapeutic control.

Meanwhile, other antibiotics, such as aureomycin and terramycin have proved effective in disease due to the Gram-negative bacteria which Tyndall had found to be resistant to the influence of *Penicillium*.

Above all, however, the antibiotics have brought about a veritable revolution in the campaign against diseases caused by the treponemas. Salvarsan was reasonably effective, but to prevent relapses long-continued treatment (often extending over a year or more) was necessary for complete

cure. Penicillin has completely changed the picture.

In many areas of the world, the incidence of syphilis is far higher than that ever recorded in Western Europe or in the United States. In the Straits Settlements the rate was reported, in 1937 to be 494 per 10,000, 30 times the rate of England and Wales, 47 times that of Holland, and 75 times that of Sweden. In North China, 10 per cent of persons offering to serve as blood donors were found to be syphilitic. In Northern Rhodesia it has been estimated that 100,000 man-days of labor are lost each year as a result of venereal disease.

In the United States and Western Europe, we think of syphilis as a venereal infection. In many countries, however, infection with the germ of syphilis (*Treponema pallidum*) is widespread among children, transmitted through nonsexual personal contact, eating utensils, and perhaps by insects. This form of the disease is called "bejel" in the Middle East and "njovera" in Rhodesia. In Iraq, a million people are believed to be affected by bejel.

Furthermore, there are two other widespread diseases, disseminated in this same way by nonsexual contact, largely among children, which are caused by species of treponemas distinct from *T. pallidum*. These are "pinta" which is endemic in many parts of Central America (caused by *Treponema carateum*); and "yaws" which is widespread and prevalent in South America, Africa, the Far East, and in the Western Pacific area (caused by *Treponema pertenue*). Guthe and Reynolds believe that the total burden of nonvenereal treponematoses is fully equal to that imposed by venereal syphilis.

Serological studies show the close relationship between diseases caused by all three treponemas; and all three are highly susceptible to treatment with penicillin. This was demonstrated for syphilis by J. F. Mahoney in 1943, by G. M. Findlay for yaws in 1944, and by F. Akrawi for bejel in 1949. The results of mass treatment programs carried out in many countries have been phenomenal. In a demonstration carried out on endemic syphilis in a village in Yugoslavia, every single case of infection was discovered and treated. After a 10 month period not a single new case had occurred. In Haiti, where yaws is widely prevalent among the rural population, from 35,000 to 50,000 persons have been treated monthly in a campaign sponsored by the World Health Organization and the United Nations International Children's Emergency Fund. It has been estimated that by this single program 100,000 incapacitated persons have been returned to work, increasing the national production by five million dollars' worth a year.

Is there a stranger chapter than this in the whole history of scientific progress? Ten years ago, mold was a faintly repulsive fungoid growth which sometimes caused the spoilage of food products. The very word "moldy" implies something "musty, fusty, and stale." Today, the blue mold is recognized as a synthetic chemist of the first order—a friend and benefactor of the human race.

—Editorial - American Journal of  
Public Health, March, 1952.

Pierce County Medical Society  
Medical Arts Building  
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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club

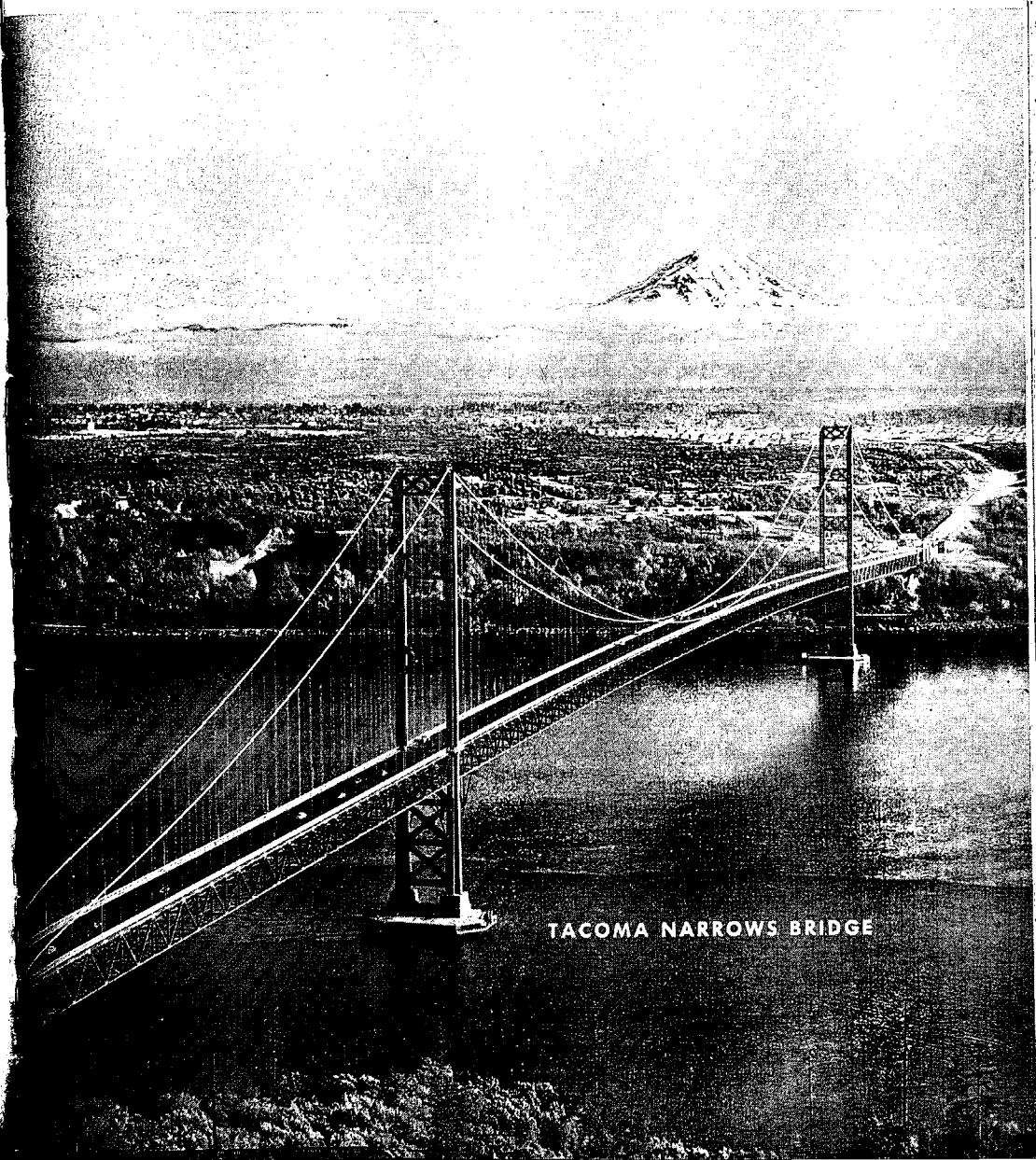


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXII—No. 12

TACOMA, WASH.

AUGUST - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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## MEDICAL LIBRARY

Katherine Miller, Librarian

Hours: 11 to 5, Monday through Friday

Instead of closing the library for a week's vacation we are going to take Fridays off during the month of August. If you can anticipate your needs during the week they will be taken care of, but not on Fridays!

\* \* \*

Thanks for all the kind words regarding our substitute editorial last month. A few doctors viewed it with opprobrium, but when their criticism was constructive it was appreciated. We are fully aware that it did not apply to most of our doctors, but the unthinking can almost irreparably harm the entire profession.

\* \* \*

### New Books in the Library

Textbook of Pediatrics edited by Waldo E. Nelson.  
 Diseases of the Ear, Nose, and Throat by Francis L. Lederer.

Clinical Pediatric Urology by Meredith Campbell.  
 Textbook of Orthopedics by M. Beckett Howorth.

\* \* \*

Next month we will publish the Roster Issue of the Bulletin. We will check your names and addresses carefully before publication, but mistakes may creep in. We will appreciate it if you will help us correct them for the Annual Directory by calling the office.

## Lecture at Veteran's Hospital, American Lake

On Tuesday evening, August 12th, Dr. I. Arthur Mirsky, professor and chairman of the department of clinical science at the University of Pittsburgh Medical School, and associate editor of the American Journal of Clinical Investigation, will give a talk at the American Lake Hospital on "Patients with Diabetes Mellitus." Dr. Mirsky is nationally known for his psychosomatic interests as well as for his research and clinical studies in metabolic diseases. The subject of his talk is timely, and with such an able speaker the discussion should be instructive and interesting. The Lecture will begin at 7:30 p.m. in the Medical Staff Room.

A cordial invitation is extended to all doctors, and all those connected with the medical profession.

## NOTICE

Check back page of Bulletin for calendar of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

The 101st Annual Session of the American Medical Association is now history. To one who has never attended one of these gigantic meetings it is really an "eye-opener." The large Navy Pier was entirely taken over by the Sessions. The twenty-one sections of the Scientific Assembly provided 252 exhibits with miscellaneous and special features bringing the total to 300.

Fracture demonstrations occupied several booths, and at timed intervals various experts applied casts and explained precisely the how and why of their methods. The Illinois Society of Pathologists had a large booth where daily fresh pathology was shown. Life saving demonstrations were carried out in the waters of Lake Michigan, and there was also a booth where artificial respiration was being demonstrated. A large exhibit symposium on Overweight, Nutrition and Health was a very popular corner for getting information.

The Technical Exhibitors showed what is new and useful; there were some 375 exhibits of this type. New developments in practically all fields of medicine were presented: diagnostic aids, medical and surgical instruments, goods books and other products useful in medicine.

The scientific sessions were numerous, and all fields and specialties were present.

In our wanderings about the huge area we were well supplied with smokes and soft drinks to quench our thirst during the hot weather. The Navy Pier, however, offered some cool refreshing air from Lake Michigan.

Our State of Washington was well represented in both attendance and participating members in the Scientific exhibits and papers that were read before the various sections.

In another month we will have our own State Medical Meeting. Mark down the date—September 13-17.

WILLIAM H. GOERING.

## CLINICIANS SAY...

*"Best yet for control of  
hay-fever symptoms."*

A majority of investigating clinicians preferred 'Co-Pyronil' (Pyrrobutamine Compound, Lilly) to any other antihistaminic. This record was achieved during the 1951 season, when ragweed pollen counts soared to their highest point in the antihistamine era. Four outstanding advantages—quicker onset, better control of symptoms, longer-lasting relief, and fewer side-effects—were repeatedly noted. Also, patients liked the convenience of fewer doses—usually only one or two capsules morning and night.

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PULVULES

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**Editorially Speaking . . .**

Some news items make their own editorial comment.

**COMPOSITION OF 1951 LEGISLATURE BY OCCUPATIONS**

	Senate (46)	House (99)
Businessmen .....	10	22
Farmers .....	6	15
Lawyers .....	11	20
Dentists .....	1	..
Finance .....	2	2
Insurance .....	3	6
Newspaper - publisher - printer.....	3	4
Miscellaneous Engineers .....	4	..
Ranchers .....	3	4
Real Estate .....	2	3
Miscellaneous .....	1	7
Educator .....	..	2
Student .....	..	2
Retired .....	..	8
Housewife .....	..	3
Chiropractor .....	..	1

HOMER W. HUMISTON, M.D.

## SOCIAL SECURITY BILL PASSES Disability Section Requires Action Next Year

On Saturday, July 5, Congress enacted H.R. 7800, the social security bill, after Senate-House conferees had written into it a new section on disability which in effect postpones final decision on this controversial question until next year. This section is designed to waive payment of old age and survivors insurance premiums by persons who are totally and permanently disabled. The House bill gave the Federal Security Administrator unusual control over medical examinations for the purpose of determining disability. *American Medical Association had objected to this as an unwarranted grant of power, but had not objected to other parts of the bill.* The Senate bill had no provision at all for waiver of premiums.

Now only the President's expected signature is needed to make law the following compromise, worked out by conferees and approved by both houses:

1. A new disability section, giving states rather than the Federal Security Administrator control over medical examinations for the purpose of determining total and permanent disability. It is understood the procedure would be similar to that now in effect for medical examinations of needy permanently and totally disabled persons who wish to be certified for Public Assistance grants. BUT—
2. The section can't go into effect until Congress again has acted on it. This section (but not others) will terminate on June 30, 1953—one day before the date set for filing of the first claims. This self-contradictory arrangement was worked out to insure that full hearings could be held next year before the disability section could become operative. Chairman George had demanded that his Senate Finance Committee have this opportunity.
3. Other provisions, not subject to termination with the disability section, include monthly increases of \$5 or 12.5%, whichever is the larger, for O.A.S.I. beneficiaries; the right of a retirement age worker to earn \$75 per month without sacrifice of pension (present law is \$50, House asked \$70, Senate \$100); persons temporarily in military service to receive social security credit at the rate of \$160 per month earnings; U. S. payments to states for aid to needy aged, blind and disabled raised \$5 per month, payments for dependent children \$3, but states are not required to pass these payments along; these Public Assistance increases terminate September 30, 1954.

"Papa, I have to bring to the class tomorrow a simple explanation of 'inflation' and also of the Einstein theory of relativity. I wish you would help me."

"All right, son. Suppose we begin with Einstein's theory. That's the easiest."

## WASHINGTON STATE MEDICAL ASSOCIATION SALMON DERBY

Salmon Derby time is just around the corner, and if this year's early run of salmon is any indication of what we can expect in September, we should have more fun than ever before.

We have some wonderful Permanent Trophies this year as well as the large Perpetual Trophies for men and ladies. There will be adequate prizes again this year for all those who catch fish.

The Derby will be held at Ray's Boat House on the morning of September 15, and every effort will be made to take care of everyone who desires to compete. Your reservations must be in early. When your entry blanks are received, please complete them at the earliest possible date.

A banquet will be served in the evening at the Seattle Golf and Country Club, and arrangements are being completed for the awarding of prizes after the dinner.

Cocktails will be served prior to the banquet.

Dr. E. H. Smith and Committee will be on hand to welcome all contestants.

Mark this down on your calendar, and don't forget to return your entrance blanks as soon as possible after you receive them.

## HOW MUCH IS A BILLION DOLLARS?

With one billion dollars, you could practically buy the entire amusement industry. You'd get all the common stock of 21 major companies listed on the New York Stock Exchange—own Columbia, Paramount, Twentieth Century, Republic, Universal, RKO, Warner Brothers and over a dozen more.

Not only that, but after buying Hollywood you'd still have enough money to buy Columbia Broadcasting System, American Broadcasting Company, and Radio Corporation of America—could throw in Admiral, Decca, Emerson, Motorola, Zenith, and Philco besides.

## Karen Rynning

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1. Perloff, W. M.: Am. J. Obst. & Gynec. 58:684, 1949.

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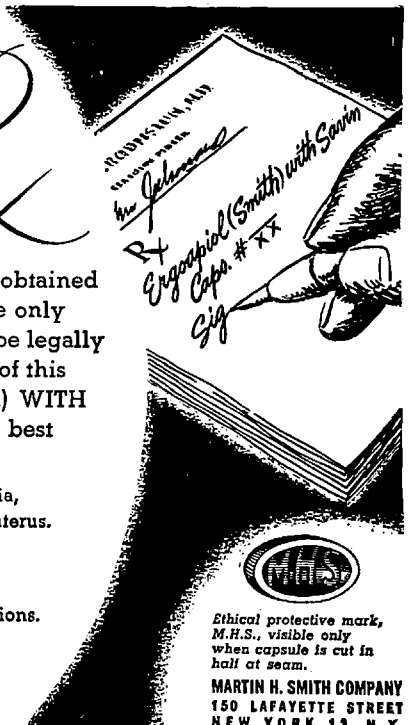
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# WOMAN'S AUXILIARY

*To The Pierce County Medical Society*

## HE TALKS TWO WAYS

Ewing says the public "is becoming more insistent" on National Health Insurance. Federal Security Administrator Oscar Ewing says the public is becoming "more insistent that a form of national health insurance become a reality" and he adds: "My friends, you will get it." His prediction was made in address to the New Jersey State Federation of Labor.

He told the labor convention: "But our work is far from done. The battle for security is only partly won. There are still big gaping holes in the fence we are building to protect your little bit of heaven. One of the biggest holes is the insecurity produced by illness. . . . For the past few years we have been fighting to provide the people of this country with security against the catastrophe of illness. We have been advocating a simple, national health insurance plan, along lines similar to social security."

Then, Mr. Ewing went on to say: "The battle has indeed been acrimonious. . . . The noble profession of medicine was traduced and the reputations of the physician became a dish rag of politics. The honest, decent medical practitioners were compelled under threat of expulsion to contribute \$2 million to a smear campaign. . . . I doubt if the medical autarchy will be able to tax its members anew for another campaign against the health of the people. There is smoldering resentment among the rank and file of the medical profession. The honest, sincere, loveable practitioners do not wish to see their names befouled by the hucksters of Hippocrates. . . ."

IN THE SAME SPEECH the FSA Administrator acknowledged that "this country has made fabulous strides in health," that since 1932 life expectancy has increased 10 years and that "we have virtually conquered the most infectious diseases."

—*Capitol Clinic.*

## NATION HAS 119,645 GOVERNMENTAL UNITS

Here is the structure of Government in the United States, as compiled by the Bureau of the Census—The Federal Government; 48 states; 3,049 counties; 16,677 municipalities; 17,338 townships; 70,452 school districts; and 11,900 special districts. The total number is 119,645 units which is 36,000 fewer than the last count in 1942 due primarily to a drop of over a third in the number of school districts in the nine-year period. Nine states accounted for more than half of the nation's Governmental units. Minnesota had the most with 9,309.

—*From Insurance Economics Surveys.*

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## WASHINGTON STATE MEDICAL ASSOCIATION ANNUAL MEETING

This is to again notify you that the Sixty-third Annual Session of the Washington State Medical Association will be held at the Olympic Hotel, Seattle, Sunday, September, 14th through Wednesday the 17th.

### Board of Trustees Meeting

2:00 p.m., Saturday, September 13

1st Session of the House of Delegates

2:00 p.m., Sunday, September 14

2nd Session of the House of Delegates

2:30 p.m., Wednesday, September 17

Your attention is called to the provisions set forth in Chapter IV, Section 8 of the by-laws, that memorials and resolutions must be submitted to the secretary-treasurer 30 days prior to the meeting of the House of Delegates.

Resolutions and Memorials must be in the Central Office by August 5, 1952.

## SAVINGS INCREASED BY 13 BILLION IN '51

The Securities and Exchange Commission announced today that savings by American last year rose \$13 billion, the greatest amount since 1945. The big increase in bank deposits, insurance, securities, cash holdings and other savings brought the total "liquid" assets of the American public at the end of 1951 to \$340 billion.

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## SEX RATIO IN THE ADULT POPULATION

The ratio of males to females in the adult population in the United States has been decreasing steadily for about four decades. In 1910, there were 1,097 men for every 1,000 women at ages 21 and over. By 1940 the sexes in our country were numerically balanced; a decade later the men were outnumbered, with 966 of them for every 1,000 women.

The decreasing proportion of men in the population is accounted for by a variety of factors. One has been the changing character of our immigration. The relatively high ratio of men to women in 1910 reflected the preponderance of males among the immigrants flocking to our shores around the turn of the century. However, the effect of this influx has been wearing off as the foreign born have been passing from the scene. Moreover, in the past two decades, most of the immigrants have been females, reversing the situation earlier in our history.

Another factor tending to decrease the sex ratio has been the general aging of the population. More boys than girls are born each year, but because of the higher death rate among males their numerical advantage is diminished with each advance in age until women are in the majority past midlife. Consequently, in a population where the proportion of people past middle age is rising, as it is in the United States, there is a definite tendency for the sex ratio to decrease. The ratio of males to females in the adult population in the United States has also been lowered by the war losses and by the stationing of men overseas.

The recent shift in the sex ratio has been nationwide. In the decade 1940-1950, the number of men in relation to women at ages 21 and over decreased in every State but one, namely, Rhode Island. In general, the reduction in the sex ratio has been relatively greatest in the States which had the greatest excess of men. For example, in Nevada the number of men per 1,000 women dropped from 1,377 to 1,171, no less than 15 percent, between 1940 and 1950. In Idaho the corresponding decrease was from 1,172 to 1,086, and in Arizona from 1,114 to 1,021.

It is apparent from these figures that men are still in the majority in some parts of the country. They outnumber women in all of the Western States except Colorado and California, and in some of the Midwestern farming States. The sex ratio is lowest in the eastern part of the country, particularly in the New England and Middle Atlantic States. The Southern States generally have sex ratios only slightly below that for the country as a whole. In the District of Columbia, because of the large clerical force needed by governmental agencies, there were only 855 men for every 1,000 women in 1950, a lower figure than for any State.

The wide geographic differences in the sex ratio have been brought about in large measure by the movement of population within the United States.

In the past, more men than women tended to migrate to such areas as the Mountain States and the Far West, where pioneer conditions existed and the comforts of civilization were few. This movement, in turn, decreased the relative number of men in the East. Internal migration still persists and will continue to influence the sex ratio of the various regions in the future, even though the disparity between the number of men and women migrants has been greatly narrowed. The long-term trend is downward in all parts of the country, and the number of States where men are in the majority is rapidly decreasing.

—From *Metropolitan Life Ins. Co. Statistical Bulletin.*

## TWO ECONOMISTS OPPOSE COMPULSORY HEALTH INSURANCE

During the past 15 years of agitation for compulsory health insurance there have been published in professional journals in the field of the social sciences a number of articles praising compulsory health insurance. Some of these articles strongly condemn the voluntary health insurance system advocated by the American Medical Association and assail the Association for its criticism of compulsory health insurance. Recently, however, there appeared a 24-page article with a different approach in one of the leading journals in the field of economics, the *Quarterly Journal of Economics* (February, 1952), which is published by Harvard University and edited by 15 of this university's professors of economics. The article, "Compulsory Health Insurance: The Economic Issues" is by Rita Ricardo Campbell and W. Glenn Campbell. While it presents the viewpoint of the authors and not necessarily the viewpoint of the editors, the authors conclude: "It is the opinion of the authors that, at least in the near future, compulsory health insurance should not be adopted in the United States. The general level of health, although far from perfect, compares favorably with that of other countries." The authors estimate that not more than 6 million of the 15.5 million families that receive incomes of less than \$2,000 per year (1948) are medically indigent. They also point out that many of the 6 million families would not qualify under compulsory health insurance and could not pay its costs in the form of "earmarked payroll taxes."

Although there are some statements in this article with which physicians generally would disagree, it offers a refreshing viewpoint and can be recommended to the members of the medical profession as an excellent contribution to public information on the question of compulsory health insurance. It revealed without fear of successful contradiction the availability of facts in the health field for economists if they choose to search for and correctly interpret such data.

—Bureau of Medical Economic Research.

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# The Hospitals . . .

## TACOMA GENERAL

While Dr. Frank Rigos is on vacation in Idaho, Dr. John Flynn is on duty in the Radiographic Department.

\* \* \*

We extend congratulations to Dr. and Mrs. L. N. Brigham on the birth of a son, Lawrence Newell, Jr., on July 23. On arrival he weighed 7 pounds and 14 ounces.

\* \* \*

News has been received from Honolulu of the birth of twins, a girl and a boy, to Mr. and Mrs. Early Deane on June 30. Mrs. Deane was Surgical-Clinical Instructor in the School of Nursing at the time she resigned to join her husband in Hawaii.

\* \* \*

One of the many vacationers from the Hospital is Miss Leona Forsberg. In her absence the training and supervision of diabetic patients is being done by Mrs. Edith Westlin.

\* \* \*

Catching a 43-pound salmon climaxed a vacation at Neah Bay for Anna Mae Bod of the Business Office. She had been training for a week by regularly reeling in fish weighing from 20 to 35 pounds.

\* \* \*

Miss E. Margaret Frost of the Faculty of the School of Nursing is confined to First North with a fractured pelvis.

\* \* \*

The Basal Metabolism room is being remodelled to provide office space for the Resident Pathologist, Dr. Venables.

\* \* \*

Dr. Charles Larson has been named President of Footprinters Boysville. Sponsored by law enforcement officers and national in scope, the project offers a new approach to the rehabilitation of pre-delinquent boys. The village will be built just outside the city limits of San Francisco. Summer camp near Fresno, California, is already functioning. Citizens of Boysville will be 6 to 16 years of age, and of every race, color, and creed. They will live here from 6 months to 2 years, during which time they will attend school, enjoy a well-balanced recreational program, and receive extra-curricular training in law enforcement. This instruction is a unique feature of the plan and will be invaluable because it will be given by top men in this field.

## VETERANS ADMINISTRATION

American Lake, Washington

During the latter part of July, Dr. L. S. Diamond is participating as a consultant in a psychiatric vocational rehabilitation workshop at the San Jose State College. This conference is being attended by vocational advisors from the Western states, Alaska and Hawaii.

\* \* \*

Mrs. Olga Trail, psychiatric social worker, re-

ports progress in the new Home Care Program. Under this plan, patients who are no longer in need of hospitalization but who are in need of supervision, are placed on trial visits in homes other than their own. She is finding the community very responsive toward the veteran who is in need of a family that can give him emotional support. Already several patients have been placed and are adjusting well.

\* \* \*

Dr. Leslie Navran has recently been appointed to our psychology staff. He received his Ph.D. at Stanford University and has been on the staff of the San Francisco State Hospital previous to his coming here.

\* \* \*

The extension course in Child Psychology given by the University of Washington has been completed.

\* \* \*

Mrs. Agnes Zeigler who has been a member of the nursing staff at this hospital for the past four years has resigned and is moving to Seattle. Mrs. Thella Alsdorf has joined the nursing staff, coming to us from Montana.

\* \* \*

Mrs. Stasia P. Dunn, who retired from our nursing staff several months ago, is making an extended visit in Europe. She has spent some time with family and friends in Ireland, and from there has traveled south to the Mediterranean—has attended bull fights, visited museums, churches and countless other places of interest.

## PIERCE COUNTY

Mrs. Virginia Brown of Mr. Brubacher's office entertained at a delightful reception at her home in honor of Mr. and Mrs. Howard Leavitt (Jean Neisser, Dr. Brady's secretary). A large number of the hospital personnel attended and presented the new bride with a set of china-ware. The entertainment was planned by Miss Katherine Mooney, Superintendent of Nurses, and Mrs. Gertrude Cupples of the dietary department of the hospital.

\* \* \*

Dr. John Erickson, lately of the Swedish Hospital in Seattle has joined the staff of Pierce County Hospital as a resident physician. Dr. Clarence Bunge, graduate of the University of Washington Medical School and Dr. Scott Ling of Iowa University Medical School are the new interns.

\* \* \*

Mrs. Lois Speggers of the Nursing staff suffered painful knee injuries when she was struck by an automobile last Saturday night. She is recovering satisfactorily at home.

\* \* \*

Miss Lillian Wilson, assistant Superintendent of Nurses, had, as her guests, her sister and brother-

(Continued on Page 15)

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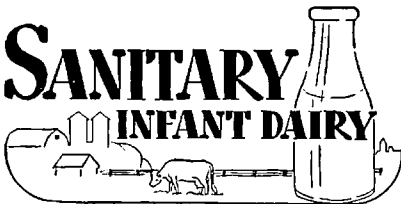


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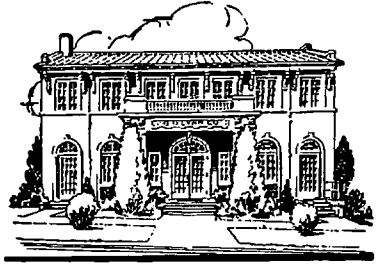


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(Continued from Page 13)

in-law, Mr. and Mrs. W. R. MacDonald of Oakland, California.

\* \* \*

Mrs. Louisa Kersey, Social Service, has returned from a two weeks' vacation in Fresno, California. Enroute, she visited her daughter and family in Beaverton, Oregon.

\* \* \*

Mrs. Jessie Haycock, Social Service, is spending three weeks at her seaside home on Hood Canal.

\* \* \*

Two new secretaries have joined the hospital force. Carol Spearman is now secretary for Mr. Ellison, purchasing agent, and Mrs. Gloria Henn is in the Social Service office.

\* \* \*

Miss Anita Preston, Physiotherapy department, is leaving for a vacation, motoring throughout the state of Washington.

\* \* \*

Miss Norma Johnson, laboratory, has returned from a visit to Coos Bay, Oregon, where she visited college friends.

\* \* \*

Mr. and Mrs. Bert Christie (Alice Cain, Hospital housekeeper) entertained at an open house at their home on Sunday afternoon, July 13. Guests representing each department of the hospital were present and were given an opportunity to congratulate the bride and groom. Many gifts were pre-

sented, among them a beautiful coffee table given by Mrs. Christie's department.

\* \* \*

Dr. John Whitaker and family spent a week vacationing at their summer place on Long Lake near Bremerton. Also enjoying the vacation were Mr. and Mrs. Harry Whitaker, Dr. Whitaker's parents from Rising City, Nebraska.

\* \* \*

Dr. McDeavitt of Emergency has returned from Sutherlin, Oregon, where she visited her brother.

Miss Doris Dykeman, third floor supervisor is wearing a beautiful new diamond ring. She has announced her engagement to Andrew Kollar of Seattle, Washington.

\* \* \*

Associates regret losing Maxine Harkness from the Record Department where she has been a valued employee for the past six years. Maxine is giving up her business interests to devote her entire time to her husband and home.

A Russian wolf-hound came over to this country and met an American dog.

"How are things in Russia?" asked the U. S. pooch.

"Oh, fine, fine," said the Soviet dog. "We have fine dog houses and all the red meat we can eat."

"Then what are you doing over here?"

"Hell," said the Red dog, "a fellow likes to bark once in a while!"

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## BASIC SCIENCE LAW

This being a year preceding a legislative session which will be held next January, certain groups of drugless healers are busy among civic groups, service clubs, Veterans' organizations, lodges, etc., stirring up animosity against doctors of medicine and sponsoring resolutions condemning the so-called attitude of physicians toward chiropractors, with a view of having a back-log of these resolutions supporting a change in the Basic Science Law to permit a separate board to examine chiropractors.

As an example, in Wenatchee recently, the chiropractors sponsored and succeeded without opposition in having passed by the Fraternal Order of Eagles, a resolution favoring the chiropractors and condemning physicians. It is planned to offer this resolution to the State Convention of the Eagles in Wenatchee on June 26-28. Doctor-Eagles should attend and defeat this resolution. It is in direct opposition to the Eagles' Constitution and By-Laws.

This example points out emphatically the necessity of doctors attending meetings of their clubs, service and otherwise, lodges, etc., in order to oppose and beat down insidious attempts by drugless healers to condemn the medical profession, break down the Basic Science Law, thus lowering standards by which other practitioners are licensed, and putting the health of the public in jeopardy.

This year is important! Attend meetings of your Chamber of Commerce, service clubs, lodges, etc.

## ARE WE SUBVERSIVE?

Down in Washington there is said to be cooking a plan to tax people on income which is in a form other than cash; what in the parlance of labor negotiators has come to be known as "fringe" benefits.

Jones gets \$100 a week. So does Smith. But Smith gets free hospitalization, pension protection and other benefits. If Smith works for a railroad he and his family can get a pass to go from here to there. Or he may have the privilege of buying his employer's wares at a discount, as many mercantile employees have. Yet Jones and Smith pay the same income tax. The idea is that Smith and Jones ought to be put on an equal footing.

Well, we wonder. Suppose Smith has hospitalization but stays healthy. Does he still pay a tax on his free hospitalization? Or suppose he has the privilege of traveling free, but prefers to stay at home. Does he then pay a tax on the trip he did not take?

Perhaps Smith would pay only if he were ill or if he did take a trip. Assuming that the man could not afford the cost of a private accountant to keep track of all this; it is easy to believe that the mere task of keeping accounts might drive him to the hospital or induce him to take a trip and get away from it all.

Then by the time that all of Smith's benefits have been added up and given a money value, will the man have enough cash left to pay his income tax? Of course, if he does not and dies from malnutrition, he can have the comfort of knowing

that his family will get his pension benefits.

Or Smith may refuse to starve. He may demand more money from his employer so he can pay his tax and still exist. Then he discovers that the added compensation is subject to a still higher rate of taxation and he has so little left that he needs still more money.

It seems to us there is a perfectly good way out of all this. It is high tax rates which give Smith the advantage over Jones. If tax rates were lower, the taxes on their compensation would not be enough to worry either of them.

Perhaps no one in Washington has thought of that. We hope this newspaper will not be seized for suggesting it. We don't mean to be subversive.

—*Journal of Commerce.*

## A SPECK ON THE "BRAVE NEW WORLD"

The speck is Armstrong County which lies in South Dakota. Fifty-three people live there and they have seven farms.

*It is also the only county left in the entire United States which does not have a federal civilian employee at work within its borders.*

This fact was recently brought to light by the Joint Committee on Reduction of Nonessential Federal Expenditures, Congress of the United States.

Other facts brought to light by the report:

Before Korea there were nearly 2 million federal civilian employees. By the end of September, 1951, new employees still were being added at the rate of more than 1,000 a day. During 1951, it cost the taxpayers \$8,500,000,000.00 in payroll alone to operate this gigantic establishment.

Does this make sense to you? Don't you think, under the circumstances, that we could do with a little less rather than more federal administration at county level?

The folks in Armstrong County seem to have gotten along all right without it . . . while helping to pay for it in counties elsewhere.

—*From Montgomery County Medical News.*

God offers to every mind the choice between truth and repose. Take which you please, you can never have both.

—*Emerson.*

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## A FEW REASONS FOR APPRECIATION THE U.S.A.

"More than three-fourths of the world's population drink unsafe water, dispose of their human wastes recklessly, prepare their milk and food dangerously, and are plagued by insects and rodents" according to Dr. Brock Chisholm, director-general of the World Health Organization who adds the even more startling statement that "one-fifth of all the deaths in the world are due to faulty environment." Coupled with these statements there is another by Dr. H. Van Zile Hyde, "The major health problem of the world today is not death—it is chronic and repeated infections and infestations which convert man from a productive unit of society to a liability of society."

To illustrate some of the public health "facts of life" in sections of the world other than our own, the following items were extracted from various paragraphs found in a recent issue of *Public Health Reports*.

**Mexico:** The Mexican Minister of Hydraulic Resources states, "Water supply and sewerage service in our cities are very important when we consider that 22 per cent of the general mortality is caused by water borne disease, due principally to the use of contaminated water for domestic purposes."

**Brazil, the Amazon region:** "Disease and poverty in this jungle area have been rampant for centuries. Before the program" (of the Institute of American Affairs) "began in 1942, there were, according to some Brazilian estimates, as many as 800,000 cases of malaria a year. Intestinal parasites victimized thousands of people. The death rate was unbelievably high."

**Africa:** "Most of the diseases known to man are found in Africa. Particularly prevalent are malaria, and African sleeping sickness. Smallpox, typhus, epidemic meningitis, yellow fever, hookworm disease, and malnutrition are also widespread. In some of the drier areas of the continent, trachoma, a disease often causing blindness, strikes as many as two out of every three inhabitants. . . . In the interior yaws incapacitates both children and adults."

**Afghanistan, Pakistan, India, Nepal and Ceylon:** "All of these people have one thing in common, untold human suffering from ill-health and under-nourishment."

**Thailand:** "Approximately 50,000 deaths due to malaria—about 20 per cent of the total number of deaths are reported annually."

—From *Westchester Medical Bulletin*.

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## HEALTH INSURANCE PLANK 1952 Democratic Party Platform

We will continue to work for better health for every American, especially our children. We pledge continued and wholehearted support for the campaign that modern medicine is waging against mental illness, cancer, heart disease and other diseases.

**Research:** We favor continued and vigorous support, from private and public sources, of research into the causes, prevention and cure of disease.

**Medical Education:** We advocate federal aid for medical education to help overcome the growing shortages of doctors, nurses, and other trained health personnel.

**Hospital and Health Centers:** We pledge continued support for federal aid to hospital construction. We pledge increased federal aid to promote public health through preventive programs and health services, especially in rural areas.

**Cost of Medical Care:** We also advocate a resolute attack on the heavy financial hazard of serious illness. We recognize that the costs of modern medical care have grown to be prohibitive for many millions of people. We commend President Truman for establishing the non-partisan commission on the health needs of the nation to seek an acceptable solution of this urgent problem.

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August 8th for the primaries.**



## HEALTH PLAN REVEALED BY AFL LEADERS

Plans for establishment of health centers to provide medical care for its 187,000 members was disclosed here this week by the AFL San Francisco Labor Council.

The proposed health centers would be union controlled. They would be under a single administrative control.

Operation of the plan would be financed largely by employer contributions now paid into health and welfare programs under union contracts.

Dr. E. Richard Weinerman outlined the proposed project after a three-month study, said, however, the cost of AFL members probably would range from \$4 a month for the member himself to \$8.50 a month if his family were covered. Participation would be voluntary.

All medical services for the proposed centers would be provided under contract by a certain organization of physicians now engaged in group practice. About 80 per cent of insurable medical needs of a family would be provided. Dr. Weinerman said.

Each center would provide complete home and office care. Patients needing hospitalization would go to a regular hospital. The extent of their pre-paid care there would approximate that now provided under Blue Cross. The proposed health centers would be the first of their kind in California. Similar centers are operated by unions in New York, Philadelphia, and St. Louis. Weinerman said. Formal action of the program was deferred until July 11. Union leaders said, however, they regarded its adoption as certain.

## PHYSICIAN BLOOD BANK POOLS

Several Pierce County physicians have established credits for units of whole blood in the Blood Bank which they use for deserving patients as the opportunity arises. These credits form a "Pool" in the name of the Doctor which is recorded at the Blood Bank and administered for him at his discretion. To maintain a positive balance of credits, the Doctor sends in those he knows can donate blood, either former patients or friends and family of patients, to give their blood for his "Pool." Many people are eager to give their blood if they know it will be used for a charitable cause.

Some physicians, especially those who have occasion to prescribe a lot of blood, find the task of getting replacements quite tiresome and many times without fruit. Keeping a backlog of credits for blood in the Blood Bank has offered a solution for this in the practice of those physicians who have used Blood Bank Pools.

Contact me if you are interested in further details.

—Merrill J. Wicks, M.D., Director.

## GOLF TOURNEY TO BE ON U. S. AMATEUR EVENT COURSE

The Seattle Golf Club course, scene during August of the U. S. Amateur event, will be the locale for the Washington State Medical Golf Association tournament on Monday, September 15, Chairman Dan Houston announced.

The attractive course has been greatly changed and much improved for the Amateur championship and the medics will find a new challenge this year as a result.

Doctor Houston said four-man county teams will qualify in the morning, and in the afternoon compete for the Shaw Trophy, won last year by Snohomish County Medical Society.

All competition in Divisions, Specialties and Maturity events will be on handicap. Players will tee off from 7 a.m. until 3 p.m. Foursomes with starting time for players of like ability from the different counties will be arranged.

Players may register Sunday, September 14 from 6 to 8 p.m., during the No-Host Family Dinner.

Doctor Houston said he would be pleased to have suggestions on how to make this year's a better tournament.

## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of June 21, 1952, to July 20, 1952, inclusive:

Chancroid .....	1
Chickenpox .....	14
Conjunctivitis .....	1
Food Poisoning .....	1
German Measles .....	95
Gonorrhea .....	9
Malaria (non-resident) .....	33
Measles .....	13
Mumps .....	32
Poliomyelitis .....	2
Syphilis .....	2
Tuberculosis .....	14
Whooping Cough .....	1

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## EMPLOYMENT IN OLD AGE

Participation in the labor force of people just past the threshold of old age is much more frequent than is popularly believed, according to unpublished data made available by the Bureau of the Census.

Employment is at a maximum for men between the ages of 25 and 54, when all but about 5 percent of them are working. At the older ages—particularly after 65 years—employment falls off; nevertheless, at ages 65-69 close to 56 percent of all men are still working, and nearly 3 percent are looking for work. Even at 70-74 years almost 40 percent are in some gainful activity. Not until the ages past 75 does the proportion employed drop below 20 percent. In the face of these facts, how do we account for the fairly widespread notion that most men drop out of the labor force at age 65? The figure usually cited in this connection is the proportion employed among men 65 and over as a group, without further distinction as to age. However, this figure, by itself, is misleading since it is weighted downward by the very low proportion employed at ages 75 and over.

The proportion of men employed in old age varies according to occupation. Nonagricultural workers begin to withdraw from the labor market in appreciable numbers not long past age 60, whereas the proportion engaged in agriculture does not lessen until age 75. It is therefore not surprising that farmers and farm managers constitute the largest occupation group among men at ages 65 and over. The self-employed and managers also feature prominently at these ages. Similarly, jobs requiring experience and craftsmanship provide a frequent source of gainful employment for the older worker. On the other hand, older men rapidly drop out of the hazardous occupations and those requiring strenuous physical exertion, but many continue in lighter work on a full-time or part-time basis.

A very large proportion of older women are outside the labor market. Practically 87 percent of the women at ages 65-69 years are neither working nor seeking work. The figure rises to 94 percent at 70-74 years and to more than 97 percent after age 75. Among the women who do spend a large part of their lifetime in gainful employment, withdrawal from the labor market starts earlier than for men. Quite frequently, older women workers are employed on a part-time basis, the income supplementing funds received from Life insurance, pensions, and other sources.

The reasons why older workers leave the labor market are varied: Failing health and physical infirmities; retirement, voluntary or mandatory; and inability to secure suitable employment. Yet, many elders, as already noted, continue to contribute to the Nation's productive power. In the opinion of many investigators, employment opportunities for older workers should be widened so that their skills and experience are not lost to the economy.

—From Statistical Bulletin.

## Deferment Limit of Six Months Recommended for Doctor Draft

National Advisory Committee to Selective Service is recommending that states place a *six-month limit*, subject to extension, on deferments granted physicians and dentists under the *doctor draft*. The Illinois State Advisory Committee had initiated the system in connection with doctors found essential to community practice. In urging other states to adopt the procedure, the National Committee said: "Such men are declared essential for six months with the understanding that the Chamber of Commerce, mayor or whatever organization has supported the essentiality must show evidence in writing at the end of six months as to their efforts to obtain someone to practice in that community; otherwise, deferment will not be renewed. Such evidence would be in running ads in medical journals, contacting placement agencies, etc." At the same time the National Committee ruled that veterinarians under 26 years of age who enter small animal practice, or who replace another veterinarian doing large animal practice so the latter may engage in small animal practice, will not be considered eligible for deferment as engaged in essential work. The Advisory Committees originally were set up under Selective Service, but their recommendations are followed also by the military services in calling up reserves.

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Why did the Negro slave frequently try to escape to the North? He was running from absolute security.

He received all of his meals for himself and his family for nothing. He received free medical care for himself and his family. He paid no rent. He and his family received free clothing. His house was furnished. He didn't have to pay any taxes. He didn't need to have any money. If anything happened to him, his family received the same benefit as when he was alive. Slaves preferred freedom and insecurity to slavery and security.

Our ancestors won a living from the wilderness, but they had freedom and what they earned was their own. They supported themselves, but not their masters. A slave has to support himself and his master.

"The penalty that people pay for not being interested in Politics," according to Plato, "is to be governed by people worse than themselves." Our greatest danger today is not from Russia, but from ourselves, from our growing disregard of principles.

Citizenship is a two way street. It entitles one to privileges and to protection of the Laws of the Country; in return it requires allegiance and active participation in building the economic and political integrity of the Community and Nation.

Our most economic need today is for better men to lift the fallen banners of our integrity and

lead us again toward the light. It is the duty of a loyal citizen to properly use his vote. If we do not use our vote, then we cannot consistently complain about the type of public officials we have in the U. S. There is a committee being formed to make people more conscious of this power of their vote and their slogan is: "Government by Decision, Not Default."

—Bulletin of the Winnebago.

## FISKE FUND PRIZE DISSERTATION

The Trustees of the Caleb Fiske Fund of the Rhode Island Medical Society announce the following subject for the prize dissertation of 1952:

### "The Present Status of Anti-Coagulant Therapy"

For the best dissertation a prize of \$200 is offered. Dissertations must be submitted by December 1, 1952, with a motto thereon, and with it a sealed envelope bearing the same motto inscribed on the outside, with the name and address of the author within. The successful author will also agree to read his paper before the Rhode Island Medical Society at its Annual Meeting on May 7, 1953. Copy must be typewritten, double spaced, and should not exceed 10,000 words. For further information write the Rhode Island Medical Society, 106 Francis Street, Providence 3, R. I.

# GLYKERON

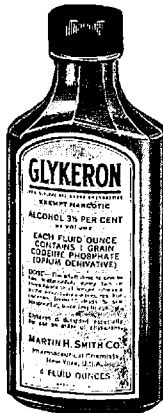
### A Bronchial Sedative

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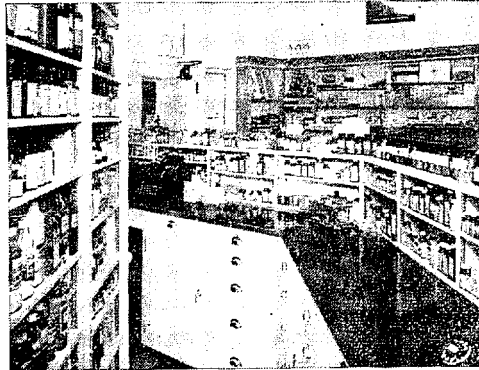
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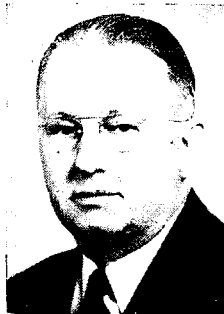
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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

## MOUNTAIN VIEW FUNERAL HOME

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## THE UNDESIRED MIRACLE

By Jeremias Gotthelf  
(1797-1854)

Recently two young doctors appeared in a small city who probably had been unable to obtain a position in a bigger one, and wanted to perform miracles there, because they made it known that they not only could cure almost every disease but also were able to revive the dead. In the beginning people in the small town laughed, but the confidence with which the two strangers talked about their art soon made the people hesitant. When they even declared that they would be ready after the course of three weeks, on such and such date, to recall to life in the cemetery any dead person as might be pointed out to them, and when for greater safety they themselves requested to be watched during these three weeks lest they escape, the small town succumbed to a peculiar excitement.

As the decisive day drew nearer and nearer, belief grew first secretly, then publicly until finally reasonable people could not even dare to express their doubts any more. On the day before the scheduled great miracle in the church yard the two friends received a letter from a very respectable townsman in which it said: "I had a wife who was an angel but she was afflicted with many kinds of ailments and disabilities. My love for her was undescrivable; but just on behalf of this love I'd rather let her enjoy her eternal rest; it would be horrible for her who apparently is so happy now, to be forced to go back to her worn-out earthly shell. I tremble with the thought that it might be just my wife whom you would bring back to life by your experiment on the cemetery. For God's sake, please spare the blessed one from your art and permit me to send you enclosed fifty gold pieces just as if the thing had really happened."

This letter was the first one; a good number of similar contents followed it. One nephew was terribly worried about his uncle from whom he had inherited. He wrote how awful it had been for his dear uncle during life time when somebody woke him up; and what might be his feelings now if somebody would awaken him from the sleep of the dead! He considered it to be his duty to protect him from such violent action; however he was ready to come forward and offer a substantial indemnity instead. Disconsolate widows appeared suddenly with urgent pleas not to do anything against the will of God to which they had begun to accommodate themselves after incredible effort; nothing good could come of it.

But in the greatest fear of all were the two practicing physicians of the town; they ran around like madmen and were afraid that their patients whom they had helped under the ground, might reappear again and talk openly about what they had learned in the world beyond.

The mayor who had not been in office so long and who had many a predecessor under the ground, finally rose to a more general point of view: He considered that under the above circumstances the peace of the city could not be maintained by any

means if the dead make a reappearance. He therefore sent a semi-official letter to the two miracle men in which he asked them not to make any use of their art in this city which had been entrusted to him by divine authority, but to depart at once and leave everything as it was. In turn he offered to pay them a large sum of money from the treasury and to give them a certificate stating that they were really able to resuscitate the dead. The two miracle men answered that, largely as a personal favor to him, they wanted to regard this offer as satisfactory, and having received money and certificate they removed themselves. The saying goes that they took the road to Switzerland.

—From *Winnebago County Med. Soc. Bulletin.*

## CHECK YOUR HOURS

The average employee annually: Works 1944 hours . . . Sleeps 2920 hours . . . Spends 486 hours coming and going to work and workaday lunch . . . Has 3410 hours to do with as he pleases.

The average business man annually: Works 3500 hours . . . Sleeps 2555 hours . . . Spends 768 hours coming and going to work, workday lunch, civic meetings, fund drives, etc. . . . Has 1937 hours left in which he hopes to find someone who'll loan him enough money to pay his eternal taxes.

Thomas Edison said: "I am wondering what would have happened to me if fifty years ago some fluent talker had converted me to the theory of the 8-hour day, and convinced me that it was not fair to my fellow workers to put forth my best efforts in my work. I am glad that the 8-hour day had not been invented when I was a young man. If my life had been made up of 8-hour days I do not believe that I could have accomplished a great deal. This country would not amount to as much as it does if the young men of fifty years ago had been afraid that they might earn more than they were paid."

—*St. Petersburg, Florida, Sunbeam.*

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## "DOCTORS ARE CITIZENS"

These notes are presented at the request of many physicians who wish to participate as responsible citizens in the coming elections in their own localities—but who are concerned at the efforts of medicine's critics to deny them this privilege by designating such acts as "political meddling."

These are simple notes on what a doctor may or may not do, under the law, in connection with Federal elections.

This material was prepared from an interpretation of the Federal laws, by the law firm of Kirkland, Fleming, Green, Martin & Ellis, at the request of the American Medical Association, National Education Campaign Committee.

\* \* \*

### LEGAL ASPECTS OF DOCTORS' POLITICAL ACTIVITIES

1. Legally, it is imperative that doctors who engage in active support of candidates do so as individual citizens—and not under the auspices of their Medical Societies.

2. The American Medical Association cannot legally contribute to or expend funds in support of, or in opposition to, candidates for Federal office.

3. State and County Medical Societies, whether incorporated or not, are subject to the same limitations.

4. The law prohibits a Medical Society from:

- Endorsing a candidate, where it involves expenditure of general corporate funds.
- Contributing funds to any candidate for Federal office.
- Using Medical Society letterheads or facilities to advance work in behalf of a candidate.
- Sponsoring any other form of advertising material for a candidate.

5. Individuals forming political committees must not make use of any official position or office which they may hold or occupy in any organization.

6. These limitations, which appear in the Hatch Act, the Corrupt Practices Act and the New Criminal Code, are sometimes violated by careless citizens.

American doctors must conduct their activities wholly within the law.

#### The Positive Side

1. It is the right and duty of every citizen aggressively to further the candidacy of any qualified candidate for Federal office and actively to oppose the candidacy of any candidate felt to be unqualified.

2. Any group of citizens, whether on a National, State or County level, can as individuals form political action committees for this purpose.

#### Political Action Committees

1. Local political committees, operating within a single State, are not required to file detailed reports of expenditures and contributions.

2. A committee operating in two or more States, or as a branch or subsidiary of any National committee, must so file.

#### What You Can Do As an Individual

1. Contribute personally any sum up to a maxi-

mum of \$5,000.00 to or on behalf of a candidate for Federal office.

2. Solicit and receive contributions for the same purpose, except from those persons who are prohibited from contributing — for example, from persons on relief, or persons holding contracts with the Federal Government.

3. Actively manage political campaigns or participate in them by writing, speaking or otherwise advocating a candidate's election.

#### Some of the Do's and Don'ts

1. Anonymous handbills and pamphlets are both illegal and unethical.

The law requires that the name of any person or political committee sponsoring campaign circulars or posters, and the names of the responsible officers of any such committee, appear on the printed material.

2. No corporation, whether for profit or not, can make any contribution or expenditure of corporate funds for the purchase of newspaper advertising or radio time in connection with any Federal election.

3. Medical Societies not only have a right, but an obligation, to participate in registration drives and "Get Out the Vote" campaigns, where the purpose is to encourage people to exercise their right of franchise, rather than to support any given candidate.

4. A Medical Society can endorse a candidate editorially in the regularly published periodical of the Society, if the cost of publishing the periodical is financed by separate and segregated subscriptions and advertising. Distribution should be confined to subscribers.

5. A Medical Society can write a letter to any member of Congress or any other Federal official, commending him on his stand on a medical issue, or it can publish an Editorial in its Journal or official publication, commending him. But a medical Society cannot endorse his candidacy where it involves expenditure of general corporate funds.

6. What are the practicalities of effective doctor-participation in election campaigns?

It is recognized that every doctor should become a crusading citizen at a time when our whole American way of life is threatened.

How can doctors make their influence felt most effectively?

What can they do that will mean votes at the polls on election day?

- Furnish direction for the profession in your community.
- Register entire family and vote.
- Solicit every doctor in your community to spend his full energy to fight in every possible way the socialization of medicine.

7. From experience in key States, a few doctors can set up a Medical-Dental Committee or a Healing Arts Committee. This type of committee in a Congressional election means action on the basis of good citizenship.

8. The committee, in most circumstances, is organized as a branch of the general campaign

(Continued on Page 31)

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(Continued from Page 29)

committee of the candidate. It takes on the specific job of:

- a. Mobilizing all who are affiliated with health activities.
  - b. Financing its activity through collections from its own group.
9. After the initial organizing committee is established, it normally reaches out for financial support and mass membership through a hard-hitting letter to all members of the profession and allied groups—clearly defining the issue involved and appealing for membership and active participation in the campaign.
10. General meetings are sometimes held to supplement the letter appeal for members.
- Give out specific instructions and assign specific duties to the volunteer workers.
11. Decide on a simple plan of campaign which can be interpreted clearly and put into operation with a minimum expenditure of time and money.
- Send out a return postcard with the first letter. One line says: "Please accept my contribution of \$ enclosed herewith." A second line may read: Please add my name to your committee."
12. Without doubt the most effective single mission doctors can perform in a Congressional campaign, in most districts, is a thoroughgoing letter-writing job, beamed to their patients—*Personal* letters, signed by the doctor on his professional letterhead and mailed in his own envelopes.

13. Every patient on every doctor's list can and should be covered with a minimum expenditure of time on the part of the doctor. This can be done if the work is carefully organized and directed.

It requires competent clerical help in the central office of the committee with volunteers from the Woman's Auxiliary often handling the addressing of envelopes from the doctor's list of patients.

It must be re-emphasized that political action committees of this nature, which lend their support to candidates for Federal office, must be independently organized by individual doctors. They cannot, in any way, be subsidiaries of Medical Societies—and neither, legally, can the A.M.A. National Education Campaign nor Whitaker and Baxter be associated with them in any way.

—Florida Medical Association.

## Fluoride Table Salt

An alternate to the proposal to fluoridate the public water systems has been investigated by Dr. Gunnar Santesson of Sweden who was recently working at the University of California Medical Center. In experimenting with sixteen groups of hamsters Dr. Santesson found that if fluoride was added to the salt in the food of a control group of hamsters there was a smaller incident of caries. More research will be done before the experiment is considered final, but the advantage of using fluoride in this way can be readily understood: the choice can be left to the individual.

## A.M.A. MEETINGS

The attractions of an A.M.A. Convention are of such scope that a report for the Bulletin on the Chicago meeting as suggested by the managing editor could become too involved for sustained interest.

It was a sizable meeting with about 500 fewer registrants than at Atlantic City a year ago, 110 of which came from Washington State and approximately 8 from Pierce County. This number from our state is not too good, nor is it too bad considering travel distance and June temperatures in the Loop.

Quality of the Scientific programs is apparent to all who choose to look over the minutes of the Scientific Sections, J.A.M.A., July 12th issue. Without question the subject presented, and the calibre of discussors qualify the A.M.A. Annual meeting as the big medical show of the year for anyone with either a special or general interest to satisfy.

There has been growing concern within the official A.M.A. family about the size and housing requirements of annual meetings. With this in mind, December Interim sessions were initiated with considerable success some years ago by distributing these sessions geographically for broader local interest. Attendance at Interim meetings is showing a healthy increase, and as a witness to several of them I have noticed that there is growing evidence indicating more popularity among those attending because of less confusion.

Your state officials, delegates and executive staff who attend both annual and Interim sessions, I am convinced, join me in urging more of the medical men from our state to make the effort to attend one of these meetings for it is believed a very large number of members do not recognize their value.

—Ross D. Wright, M.D.

## DON'T BE DERELICT!

The late Justice Oliver Wendell Holmes once said that a man must take part in the action of his times, lest he be judged not to have really lived.

In this critical election year of 1952 we might paraphrase that statement to say that every physician must register and vote, lest he be judged derelict in his duty as a citizen.

The vast majority of physicians are deeply conscious of their responsibilities in the care of the sick and injured. It is imperative now that they become equally conscious of their high duties as American citizens. This year of decision on vital issues requires the fullest possible expression of opinion by the largest possible number of qualified voters. Physicians, as members of an educated, thinking, professional group, must help set an example to bring that about.

So, regardless of your political viewpoint or party affiliation, register and then vote—and urge your family, friends and patients to do likewise. This is a duty which you owe to your profession, to your community and to your country. **Don't be derelict in that duty!**

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club

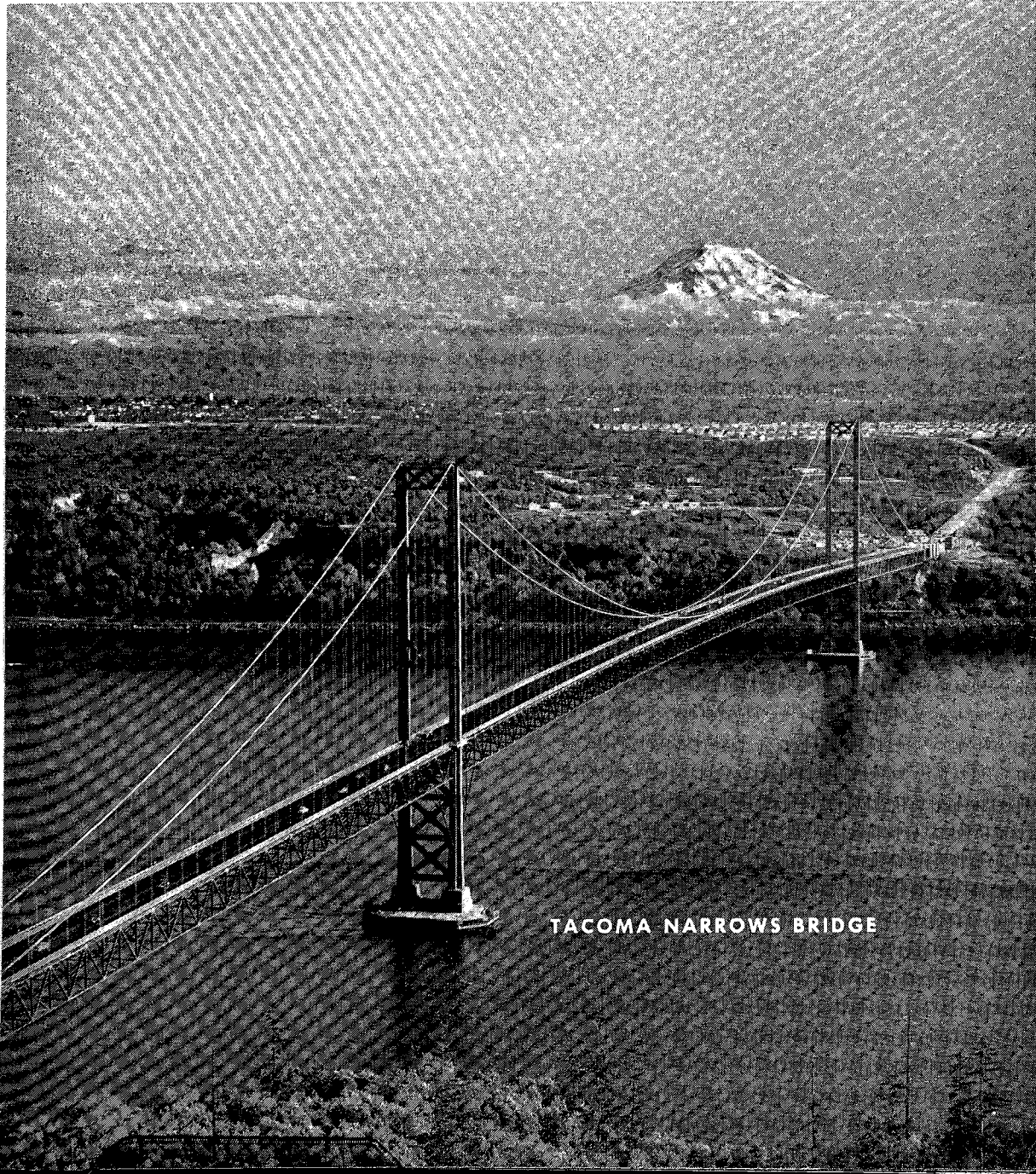


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXIII—No. 1

TACOMA, WASH.

26 1  
SEPTEMBER - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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Managing Editor .....	Katherine Miller
Auxiliary News Editor .....	Mrs. Horace A. Anderson

# Program

September 9, 1952

8:15 p.m.

## Peripheral Vascular Disease

Medical Aspect—

Dr. Fred E. Cleveland, Seattle

Surgical Aspect—

Dr. Henry B. Garrigues, Seattle

## NOTICE

Check back page of Bulletin for calendar of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

A review of "Discontinuance of Medical Groups, 1940-1949" or Bulletin 90, a recent Bulletin published by the Bureau of Medical Economics Research American Medical Association, might be of interest.

In this study the authors attempt to analyze the reasons for the failures and dissolutions of medical groups. This study was made to help those physicians who are contemplating joining groups and reorganizing groups. More important to gather information on group practice—useful in improving the quality and increasing the quantity of medical care to the American public.

What is a group? The definition offered by R. G. Leland, M. D., was used as a yard stick so that some conclusions could be drawn.

1. There must have been at least three physician members.
2. Receipts from the medical practice must have been pooled, in some manner and then redistributed to the members according to some previously arranged plan.
3. "Closed staff" hospitals were not included unless the members of the staff pooled income received for services outside the hospital.
4. Purely "diagnostic groups" which receive only referred cases were excluded.
5. "Industrial" groups which furnish medical services to a single industry, and thus to only a limited group of the general population were omitted.

Out of a careful compilation 441 groups were selected. These were in existence in 1940.

### Conclusions—

1. At the end of 1949, 82 were discontinued during the ten years, 40 of these were entirely dissolved, 27 were still in existence but did not meet the above definition of a group. The remainder were reorganized.
2. The smallest groups 3-4 members had the majority of dissolutions, larger groups apparently were more stable.
3. The principal reasons for the dissolution of the 40 groups were:
  - (a) a member left for the military service,
  - (b) a key man left the group,
  - (c) illness, death or retirement of a member,
  - (d) disagreements among the members,
  - (e) change in the nature of the practice of one of the partners.

Percentage-wise it is almost 20% of group practice that ends in dissolution in a ten year period. Of course this is only on the basis of the accepted definition of a group as defined by the method of Leland. It is worth reading for those in groups or contemplating joining a group.

W. H. GOERING, M. D.

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A new unflavored 'Carbo-Resin,' which can be incorporated in cookies, puddings, fruit juices, and the like, is now available. Printed recipes giving complete directions for preparing a variety of tasty dosage forms in the home can be obtained from the Lilly medical service representative or direct from Indianapolis upon request.

**CAUTION:** Only unflavored 'Carbo-Resin' is suitable for incorporation in recipes.

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## ***Editorially Speaking . . .***

Your Editor has recently been preoccupied with trying to get people to vote for him and in trying to get people to get other people to vote for him in a closely contested election. For that reason there will be no editorial this month.

HOMER W. HUMISTON, M. D.

## MEDICAL SOCIETY ROSTER

It has been the custom in the past for the September issue of the Bulletin to contain the Roster. However, this year, because of difficulties beyond our control, the Roster will not be published until the October issue. In the meantime, if any members have changed their addresses or telephone numbers in the past year it would be greatly appreciated if the office were advised of the fact.

## HEALTH INSURANCE PLANK REPUBLICAN PARTY PLATFORM

"We recognize that the health of our people as well as their proper medical care cannot be maintained if subject to federal bureaucratic dictation. There should be a just division of responsibility between government, the physician, the voluntary hospital, and voluntary health insurance. We are opposed to federal compulsory health insurance with its crushing cost, wasteful inefficiency, bureaucratic dead weight, and debased standards of medical care. We shall support those health activities by government which stimulate the development of adequate hospital services without federal interference in local administration. We favor support of scientific research. We pledge our continuous encouragement of improved methods of assuring health protection."

## Population Peak Out of Sight

The country's population, once thought to be leveling off, may hit 200 million by the year 2000 and no peak is in sight, according to the slide rule experts. A recent study by the research department of the Chamber of Commerce of the United States indicates that the next few years will see big increases in the number of old people and of young people, with a smaller change in the middle age group.

The report notes that the total population doubled in the first half of the 20th century, and that a further increase to about 169 millions is expected by the year 1960, when the next census will be taken. Based on the estimate for 1960, the chamber says: "We can expect an increase of one-third in the age group of 65 years and over."

## Karen Rynning

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## FROM THE BULLETIN 20 YEARS AGO

The Pierce County Medical Society was preparing twenty years ago, to be host to the annual meeting of the Washington State Medical Association. The first day of the meeting was devoted to pleasure as the State Medical Golf Tournament was held at the Country Club. The program for the remainder of the meeting was a departure from the customary in that it was confined to consideration of social and economic conditions as they related to medical practice. A quotation from the Bulletin of 1932 shows the way the wind was blowing even then.

"In their conduct of social relations the people are fast losing their feeling of self-reliance and independence and are asking the schools, various reform societies or the state or national government to take over more and more of those problems which rightly should be solved by the individual himself. The growth of this paternalistic idea of government has resulted in the creation of the numerous boards and bureaus with their expensive surveys, investigations, plans and regulations, all working no doubt with the well-meaning purpose of bettering the condition of humanity. The results however, only too often do not come up to the ardent expectations of their proponents, but always result in increasing the heavy burden of government expense which we all must pay."

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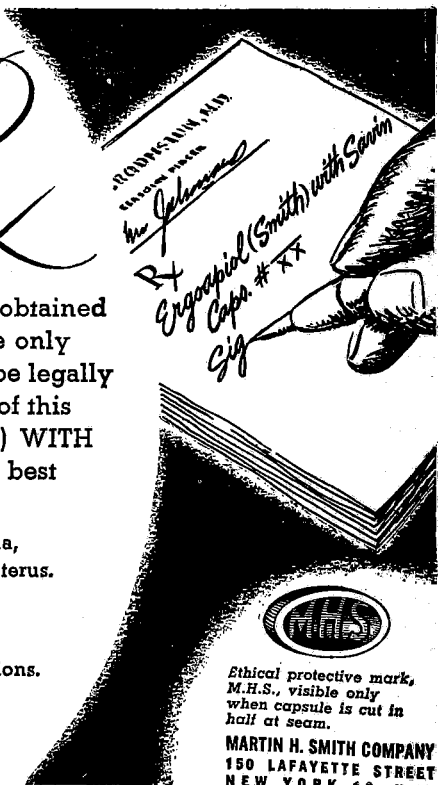
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# WOMAN'S AUXILIARY

## To The Pierce County Medical Society

Although our auxiliary meetings don't start until next month, there are a few things to do and think about during September.

The state medical convention will be held in Seattle at the Olympic Hotel on September 15th and 16th. Delegates to this year's convention will be our new president, Muriel Nelson, Gladys Delaney, Helen Jarvis, Erma Thordarson, Marjorie Nace, and Hilda Lantiere. There will be an interesting program of events including the golf tournament to be held at the Sand Point Golf Course from 8 to 12 on Monday the 15th. The meeting will conclude with the annual banquet and dance Tuesday night at the Olympic Hotel.

So much for the convention data . . . now for another reminder of something very important . . . our yearly dues. Dues, as most of you know are \$5.00 . . . one dollar of which goes to National and one dollar to the State, which only leaves \$3.00 for our treasury. Please mail your dues now to Mrs. Eugene Hanson, 3510 North 33rd. One of our past treasurers tells the story of collecting delinquent dues by the door-to-door method. If this failed to bring results the next stop was the husband's office. Let's hope we won't have to resort to such methods this year. However, last year there were forty members who neglected to pay . . . so get your check in the mail today.

It is nearly election time, and time to be sure you are properly registered. Remember, if you aren't registered, you can't vote.

Anytime you stop by to see Jeanne Schwind you will find her in the midst of Pablum, diapers, and safety pins, clutching to a wriggling bundle called John David who has recently joined the Schwind family as a permanent member. Lucky boy . . . lucky parents.

In case you haven't seen them, Kay and Arnie Herrmann are back. We called Kay the other day to say a "welcome home" and she said "Thanks . . . but we were so afraid everyone would have forgotten us!!!"

If anyone has any news items, funny stories, want ads or what have you, they will be gratefully accepted by the voice at the other end when you dial PR. 6771.

Why not call another member and invite her to go to the next meeting with you? Many of the girls hate to go alone so why not call someone today?

### Advertising Program To Aid National Blood Program in Collections

The unified National Blood Program under direction of the Subcommittee on Blood of Health Resources Advisory Committee (Office of Defense Mobilization) received additional support when ODM announced this week that future public information and advertising programs will emphasize

### OFFICERS FOR 1952-1953

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President Elect .....	Mrs. S. R. Lantiere
First Vice President.....	Mrs. George S. Kittridge
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civilian and civil defense needs for blood as well as military. The Subcommittee on Blood has been working for several months on a unified program whereby Red Cross would act as sole collecting agency, and Defense Department and Federal Civil Defense Administration needs for whole blood and blood plasma would be met on a priority basis.

Meanwhile, the Armed Force Blood Donor Program has, in effect met its 10-month quota set last September of 2,800,000 pints of blood to replenish it plasma supply. 2,900,850 pints were collected for use as whole blood and blood plasma, approximating the original goal. The Armed Forces Blood Donor Program now becomes a part of the National Blood Program.

### STATISTICS ON CONGRESS

During the second session of the 82nd Congress (January 1st through July 7, 1952) the following facts are reported in the Congressional Record:

Senate was in session 651 hours and 24 minutes.

House was in session 457 hours and 34 minutes.

A total of 339 Public Bills were enacted into Law, and a total of 612 Private Bills were enacted into law.

Measures passed numbered 2,332.

Nine Bills were vetoed and one veto was overridden.

There were 20,626 nominations received from the departments of the Post Office, the Services, and for civilian employees. Those confirmed were 20,425.

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## Statement on Health Insurance By U. S. Senator Richard M. Nixon Republican Nominee for Vice President

(Excerpts from address delivered before the seventh annual meeting, Conference of Presidents and Other Officers of State Medical Associations, Atlantic City, June 10, 1951.)

"I would like . . . to express my congratulations to the members of this group, and to the medical profession generally, for the very splendid political action the medical profession took in the last campaign leading up to the November election, and in other previous campaigns. As a result of that action, I think we can safely say that . . . there is no chance whatever at this time for any type of compulsory health insurance program to be enacted . . . On the other hand, I think you must recognize, and that all of us who are interested in this fight must recognize, that those who favor such legislation will continue to work fanatically for their cause, in the hope that somehow, sometime in the future, they will be able to accomplish their purpose."

"I think . . . that a great number of people, probably a majority of the people in the country, are convinced that the compulsory health insurance programs which sound so good in theory have not worked out in action in those nations which have tried them."

"I am convinced that the medical profession has taken a very long step in the right direction with its recently announced program of subsidizing medical schools on a voluntary rather than on a government basis. I would suggest also that additional voluntary action is needed (in dealing with) the problem of encouraging wherever possible voluntary health insurance programs. **It seems to me that the objective toward which we should work in the United States is a system where eventually anybody who wants health insurance can get it—where those who should have health insurance are encouraged to get it—but where no one in the United States is compelled to take out such insurance against his will.** If the profession adopts that objective we will remove by voluntary action the strongest arguments that the proponents of government control of the medical profession have at the present time."

"I believe it is essential that all members of the medical profession recognize that an attempt to socialize any American profession—any American institution—constitutes a threat to all."

"Traditionally, the great accomplishments in this country have not been through government action, but through individual and cooperative action . . . (Our task) is by precept and by example, to prove to the people of the world that a free people, working as individuals, working cooperatively, can solve the problems of our society and can solve them more effectively than can a government."

Dr. T. G. Lathrop, general practitioner, formerly of White Salmon, Washington, where he was in practice for ten years, wishes to locate in Western Washington. He would like a partnership, office space or an association with another doctor. He received his degree of medicine from the University of Wisconsin in 1940, and interned at Swedish Hospital in Seattle. He may be reached at Logan 5646, or call the Society office, Market 2020.

## Statement on Health Insurance By General Dwight D. Eisenhower Republican Nominee for President

At his press conference in Abilene, Kansas, on June 5, 1952, General Eisenhower was asked the question: "Are you for Compulsory Health Insurance?" Here is General Eisenhower's reply:

"I am not going to answer too specifically, because what could be in a bill labeled compulsory health insurance? I am not so certain. But I can tell you this: I am quite certain over the years that I was at Columbia, no one spoke out more than I did against the centralization of power in Washington, against bureaucratic government and submitting our lives toward a control that would lead inevitably to socialism. I do believe that every American has a right to decent medical care."

In discussing Federal aid to medical education, General Eisenhower said that in private universities we must "support medical education by private means, because if we didn't it would be the first step toward the socialization of medicine, and I am against socialization."

## QUANTITY vs. QUALITY

One of the weaknesses of present day thinking is the emphasis placed on quantity as opposed to quality. This mode of thinking pervades government, industry, agriculture, medicine, and our private lives. How can we produce or have more with less effort?

As physicians we proudly boast that, today, man's life span is about 70 years when in 1900 it was 40. I'd like to question the advisability of this manner of thinking. Wouldn't it be better to place the emphasis on the quality of a life rather than on its length?

How have you utilized the years you have had? Have you had fun? Have you enjoyed it? Have you been happy? Have you been sincere and honest with your neighbors and yourself? Have you been kind, thoughtful, and considerate of your fellow men? Have you been gentle, loving, and devoted to your family? Have you just tried to do something good for the world as a whole?

If you can't answer "yes" to these questions, it's pretty futile living even if it lasts a hundred years.

—Columbus Academy of Medicine.

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## VETERANS ADMINISTRATION

American Lake, Washington

Dr. Lester D. Ellerbrook, Associate Professor of Pathology, University of Washington, will speak at this hospital on September 8, 1952, at 8:00 p. m. His subject will be "Common Sources of Error in Clinical Chemical Procedures."

Dr. Keith R. Marcroft recently joined our Dental Staff, coming to us from Salt Lake City, Utah. He is a 1952 graduate of the Washington University, St. Louis, Missouri, and is a member of the American Dental Association.

We now have an affiliation with the St. Mary Hospital School of Nursing, Walla Walla, Washington, and for the first time will be enrolling four students from that hospital for the Fall quarter.

Gwendolyn Bailey and Martha J. Bough will leave the early part of September in order to attend the fall quarter at the University of Washington, working toward their degree.

Miss Lorilla E. Britell recently resigned her position as Instructor of Hospital Aides and Mrs. Verna D. McDougall has been appointed to take her place.

Mrs. Olga Trail, Psychiatric Social Worker, has been attending a seminar in medical social work at the University of California School of Social Service. Representatives from 13 Veterans Administration offices and hospitals in this area are in attendance.

Miss Anne Hearity attended the Occupational Therapy Convention in August, held at Milwaukee, Wisconsin.

Mr. Louis Souza from Springfield College, Massachusetts, with a Masters Degree in Rehabilitation, has recently been added to our staff as a Corrective Therapist.

## Steps to Drunkenness

The British Medical Association has listed the sequence of effects of whiskey on human behavior, according to Informaciones, Madrid, as quoted by North American Newspaper Alliance.

The first glass, it observes, stimulates perceptions and intellectual processes, the second frees one from worries and the third produces a happy excitement.

At the fourth shot one feels an exuberant energy, the fifth dulls perceptions and wit, the sixth and seventh produce "strange sensations," and the eighth, ninth and tenth take the imbiber to the brink of serious consequences.

The twentieth drink of whiskey causes loss of memory and the thirtieth will submerge one into a state of deep stupor. The thirty-first and any further drinks are taken at the risk of a state of coma that may be fatal.

—New York Times.

## Urges Holiday for Hospitals On Election Day

In a recent letter to A.M.A. President Louis H. Bauer, John V. Sullivan, Akron, proposed an idea which merits some serious thought. He suggested that clinics and operating schedules be placed on a holiday status on election day in November.

Dr. Sullivan said that many doctors don't go to the polls because of heavy schedules at the hospital.

"I would like to suggest," he said, "that presidential election day this year be a legal holiday for every hospital in the nation. This would involve suspension of clinics and operating schedules. What more important holiday is there this year?"

## Features of Revised Keogh-Reed Bills

The Keogh-Reed bills, which would establish a voluntary pension plan for the self-employed, including physicians, have been revised considerably, and Frank G. Dickinson informs me that there is a possibility that the new bills (H. R. 8390 and H. R. 8391, introduced on June 27) will be considered if Congress is in session at any time during the remainder of 1952. Otherwise the bills will be re-introduced in the next Congress.

Dr. Dickinson listed these new features of the revised (identical) bills:

(1) A lifetime limit of \$150,000 on the total amount which an eligible taxpayer could exclude from taxable income for the purpose of saving for his old age; (2) eligible taxpayers now over age 55 could exclude more than the limits of \$7,500 or 10 per cent of earned income, whichever is the lesser; (3) only the self-employed and persons not covered by private or public employer-employee pension plans are eligible; (4) the amounts excluded from current taxable income could be invested either in a restricted trust fund or a restricted retirement annuity issued by an insurance company; (5) a carry-over of unused exclusions for a period of not more than five years; (6) no withdrawals until age 65 (changed from age 60) unless totally disabled for more than three months.

Congressmen Keogh and Reed now believe that this bipartisan bill could be passed after January 1, 1953, if enough sustained effort is made by national organizations representing the self-employed.

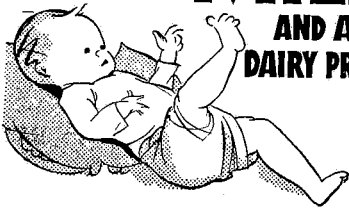
—AMA Secretary's Letter

"Every short story," said the professor in journalism to his class, "should have reference to the Diety, a touch of royalty and some mention of sex."

The next day an earnest student turned in his first short story.

"My God, said the princess, take your hand off my knee!"

—From Potter County Medical Society Bulletin.



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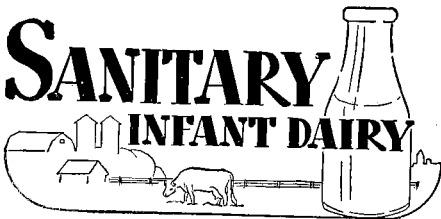


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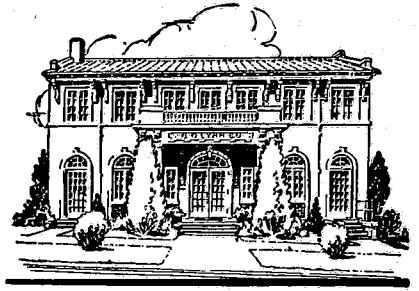


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## Witch-Doctor Medical School Puts Its Hoodo On Voodoo

South African tribal leaders announced plans today to set up a medical school—for witch doctors.

Then the chieftains said, the natives can tell which doctors are witch-doctors and which are “quacks and illiterates.”

The plan has the official approval of the African Dingaka Association. The A.D.A. is the official witch-doctors' professional society.

It hopes, through the new school, to win government recognition of witch-doctors and drive out those unorthodox practitioners who dispense “voodoo.”

The official curriculum for intern or student witch-doctors will include the use of bones in curing ills and pains. They will also be schooled in the proper use of the 150 herbs and roots accepted by the A.D.A.

Attention also will be paid to professional ethics, the witch-doctors association said, and members will be discouraged from dispensing such articles as love potions.

—From *Seattle Post-Intelligencer*  
Monday, August 18, 1952.

Lady (holding a bone for her dog): “Speak, Rover!”

Rover: “What’ll I say?”

## Love Will Find a Way

The only passenger recently given free and unimpeded passage thru the iron curtain is a hippopotamus named Olga, who lives in the zoo in Leipzig, Germany. The Communists who boss East Germany had no male hippo back of the curtain. They thought it would be nice if Olga could contribute a small hippo to the Young Communist League, but that would require the cooperation of some bourgeois male hippo west of the curtain.

The nearest was Knautschke, a resident of non-communist West Berlin's zoo. So the commissars got Olga into a van and have taken her over for a visit in Knautschke's pool. Of course, she's got to come back. If a two ton blessed event should materialize, that would be all to the good.

The Communists are not likely to worry that Olga will become disaffected in her brief sojourn among the unregimented. To a hippopotamus passing her life in a zoo, one set of iron bars is much like another. It's only people who get to brooding over the peace of the communist penitentiary.

—*Chicago Tribune*

THE CONSUMERS PRICE INDEX for April showed the purchasing value of the dollar at 56.1 and market prices up one per cent over March. Consumers were paying \$1.80 in April for the same goods that cost \$1.00 in 1939.

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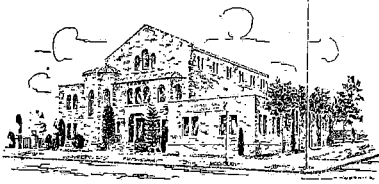
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## "WALK ON OWN FEET" AMA SESSION THEME

The American Medical Association's five-day Chicago Convention drew an official total attendance of 28,122, including 13,162 physicians, as compared with a total registration of 27,034, including 13,653 physicians, at the 1951 Atlantic City meeting.

The Chicago session was big in every sense of the word, and busy, too. Now that it's all over, the convention theme might have been taken from Emerson's "American Scholar": "We will walk on our own feet, we will work with our own hands, we will speak our own minds."

And the doctors, as a group, seemed to do all of these things in nearly every official action. Retiring President John W. Cline, San Francisco, set the pace early Monday morning when he told the House of Delegates:

### No Longer Whipping Boy

"During the last three and a half years, American medicine has changed from an ideal whipping boy for any demagogue who wished to make a rabble-rousing speech into a strong body able to respond with sufficient vigor and effectiveness to make the profession an unwise object to attack."

Dr. Louis H. Bauer, Hempstead, N. Y., in his statesman-like inaugural address, asked one pertinent question: "Some of medicine's critics have said, rather naively, that politics is a dirty hands business, and physicians, who belong to a clean hands profession, should not enter it. How, I ask you, can politics be anything but dirty if those with clean hands stay out?"

### Convention Melange

All of the principal business of the convention was carried in detail in the five issues of the "Daily Bulletin," which was given wide circulation during the session, and the official minutes of the meeting will begin appearing in the AMA Journal of June 28. To review it in my letter would be a duplication.

Nearly 300 physicians took the basic course in electrocardiography, sponsored by the AMA, which was given just prior to the session. . . . Retiring President John W. Cline was the nation's No. 1 air traveler during his year of office, covering more than 130,000 miles and delivering 84 speeches. . . . More than 300 friends attended the luncheon honoring Dr. Joseph S. Lawrence, who will retire September 1 as director of the AMA's Washington office. . . . Affable Helen Hendricks of the journal staff, who has been a member of the AMA family for 29 years, was painfully injured in a taxicab accident while enroute to her job at the exhibits on Navy Pier. . . . Eleven comely, specially-trained girls served as guides to more than 400 physicians and guests who took time off to our the AMA headquarters building during the week of the meeting. . . . Over 200 ABC and Mutual network stations in the United States, Hawaii and Alaska carried the inaugural address of the new president, Dr. Louis H. Bauer.

—George F. Lull, M. D.,  
Secretary, AMA.

## Statement on Health Insurance By Gov. Adlai Stevenson of Illinois Democratic Nominee for President

"I am against the socialization of the practice of medicine as much as I would be against the socialization of my own profession, the law. . . . If the insurance principle could be brought to bear on these catastrophic illnesses, it would largely eliminate the specter of terror from the average home. . . . I am sure that. . . the common objective can be largely realized without the destruction of professional independence.

"Basically, the problem is how to lift people over the costs of major illness. I don't know whether voluntary plans can do the job. I think the new commission on medical needs may well add some light and remove some heat, enabling us to find a satisfactory solution to this perplexing problem".

\* \* \*

In a press conference on July 30, 1952, Governor Stevenson was asked "whether he saw eye to eye with Federal Security Administrator Oscar Ewing" on the issue of Compulsory Health Insurance.

Governor Stevenson's reply to this question was as follows:

"No, on a number of occasions in the past I have indicated that I thought a new approach was necessary. I emphatically believe that we must find some solution to the problem of catastrophic illness and its devastating expense.

"The President's Commission, of which my friend, Dr. Paul V. Magnuson is Chairman, might well come up with some recommendations and suggestions which would be more palatable, and I am hopefully awaiting the result of the deliberations."

There is one characteristic of the American people which is probably a by-product of their need to succeed, namely, a tendency to overdo. If something is considered good, then more would be better—more would be better, and so on until the results are not better but often painful and destructive for the people involved.

—From the *Neuroses of Everyday Living* by  
David C. Wilson, M.D., *Virginia Medical Monthly*.

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## The Seasonal Pattern of Births

During the year, births in our country usually rise and fall in number in a regular seasonal pattern. In general, births are most frequent in August or September and then decrease in succeeding months until they reach a low point in April or May of the following year. The decline during the winter and spring, however, is normally interrupted by a minor peak in February or March, but this is well below the maximum that occurs in the late summer.

In the past decade or so deviations from the usual seasonal pattern of births have not been infrequent, reflecting the impact of World War II on marriage and family life generally.

In 1942 there was an unusually high peak in September and October, the result of conceptions which occurred shortly after the United States entered the war. In 1943 births were highest in January and February rather than in the late summer, as is ordinarily the case. Another wide departure from the general pattern is found in the first postwar year, 1946, when the daily average number of births rose from a low at the beginning of the year to an unusually high peak in November. This was a consequence of the return of servicemen to civilian life immediately after the close of hostilities. The seasonal distribution was still abnormal in 1947, more births being recorded in the first quarter than in the third quarter of the year. But with the return of fairly normal conditions the traditional pattern was reestablished in 1948-1950.

The outbreak of the Korean war in June, 1950 has also had an effect, though a minor one, on the yearly cycle of births. Their number in April and May 1951 was much higher than it would have been ordinarily. These babies were conceived in July and August 1950, shortly after the beginning of hostilities. In the first quarter of 1952 the seasonal variation of births was still abnormal.

Although the high and low points in births occur at about the same times of the year throughout most of the United States, there are wide geographic differences in the extent to which these variations depart from the yearly average. The smallest variations occur in the Middle Atlantic States where, in 1948-1949, the daily average number of births for the high month—September—was only 9 percent above that for the low month—May. In sharp contrast is the situation in the West South Central States. In this region, which comprises Texas, Oklahoma, Louisiana, and Arkansas, the daily average

in September was 44 percent higher than that in May. In general, the differences between high and low are least in the Northeast and the West and greatest in the South. The North Central States generally show moderate variations between the maximum and minimum months.

In the West the seasonal variation in births is somewhat different from that prevailing in other sections of the country. While the high months are still August and September, the low months are January and February, rather than April and May. Furthermore, the difference between the maximum and minimum is relatively small in the Mountain and Pacific States, amounting to only 11 percent in 1948-1949.

—Statistical Bulletin  
Metropolitan Life Ins. Co.

## LETTER TO THE EDITOR

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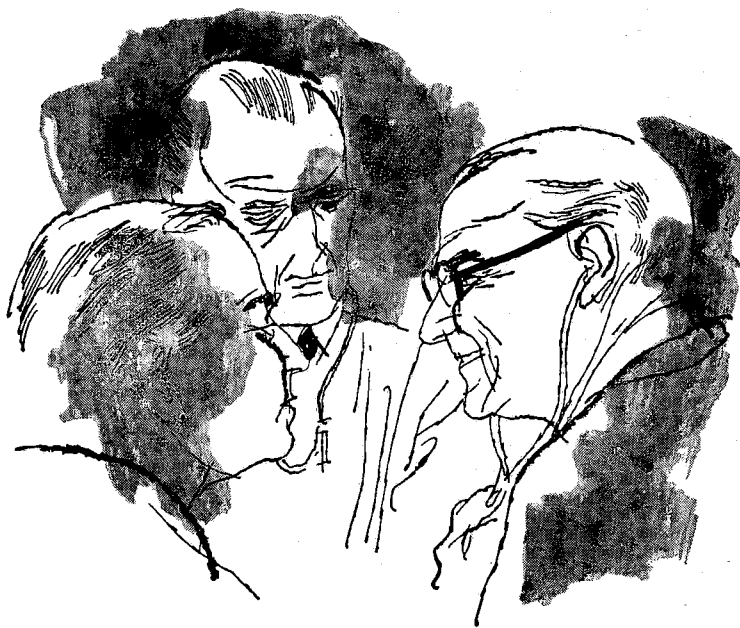
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## MISINTERPRETATION OF "NEEDS" FOR MEDICAL CARE

Comparisons between the practice of law and the practice of medicine can be helpful or misleading. Studies in recent years of the unmet needs for legal and medical services seem to provide some useful comparisons. The term "unmet needs" for legal and medical services has, however, been used in a fashion that implies unmet desires, whims, or mere wants; moreover, for the purposes of medical economics, the term "unmet needs" as used in these studies is quite awkward, because it does not imply that these "needs" are sufficiently acute to induce the individual to seek medical care. The medical economist would prefer the term "demand," because it implies needs or wants coupled with the ability and willingness to actually seek medical attention. If this particular use of the term "unmet needs" is kept in mind, these recent studies to provide some helpful comparisons between the practice of law and the practice of medicine.

In 1948, the American Bar Association, as a part of its Survey of the Legal Profession, published a study by Koos of family needs for legal services. In 1950 Michigan State College published a study by Hoffer and others of the unmet needs for medical services in certain Michigan communities. Koos concluded that the families covered in his survey failed by varying margins to obtain the quantity and quality of legal services that Koos considered reasonably necessary to meet the family needs for legal services. He also gave considerable attention to the reasons for failure of the families to engage the services of lawyers. Hoffer measured the unmet needs for medical services in certain Michigan communities by interviewing persons who described symptoms for which they had neither sought nor received medical attention. Spot checks were made by physicians to determine the reliability of the self-diagnoses as a method of measuring unmet needs. Hoffer, like Koos, was interested in the reasons given during the interview for not seeking and obtaining professional services.

Similar studies of the unmet needs for dental services, for the services of accountants, engineers, and other professional persons are not available, but such studies should make possible similar evaluation of relative unmet needs. Indeed, it would be necessary to have studies of the unmet needs for all important commodities and services before one could appraise the relative standing or rank of unmet needs for any one commodity or service. Until such additional studies are made no frame of reference can be found in which to evaluate the relative importance of unmet needs for medical services. Since persons literally need everything, one cannot say that the unmet needs for a particular service are great, because one does not know "how great is great" until he knows the unmet needs for many important goods and services.

There is widespread failure to realize the necessity for considering unmet needs on a relative rather than an absolute scale. The idea that human wants

or needs are expandable without limit, both as to number and variety, is basic in the study of economics. Moreover, there are unmet needs for every good or service that has a price; these are the so-called economic goods and services. The persons who render these services have livings to earn for themselves and their families. Unlike air, these services command a price. If the price were higher, fewer persons would buy the service, and if the price were lower more persons would buy the service. This notion of unmet needs is, therefore, a fundamental characteristic of a system of free enterprise and free prices. There are unmet needs for very service or commodity that is sold, and the bare statement that there are unmet needs for legal and medical services is an "elucidation of the obvious."

A study, however carefully conducted, that limits itself to the unmet needs for one type of service is likely to be misinterpreted. Conclusions can be reached according to the degree of alarm one wishes to create of the frightful conditions traceable to the unmet needs for the one service under consideration. The whole person in his particular economic and social setting must be considered as the unit rather than each individual service or commodity; for example, if it could be shown that the relative degree of attainment of medical services for the people in a particular state was lower than the relative degree of attainment of legal services, dental services, or other services, one could conclude that medicine is lagging, and that the reasons for the lag should be found. But one need not rely solely on the relative position of the unmet needs for medical care; other sources of information are available, for example, mortality and morbidity rates, which reflect to a considerable extent the prevailing level of medical service.

## Medicine Is Largest User of Isotopes AEC Coordinating Committee Named

Atomic Energy Commission reports over 35,000 shipments of isotopes have been made during past six years, with 13,000 shipments in the medical field. AEC also announces appointment of an Ad Hoc Committee made up of officials of AEC, Food and Drug Administration and National Institutes of Health. It will handle problems arising from increased distribution and use of isotopes that overlap jurisdiction of the three agencies.

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## Total U. S. Physicians at All-Time High

The number of physicians in the continental United States at the end of 1951, stood at an all-time high, 211,680, according to the annual licensure report of the American Medical Association. This represented a net increase of 2,640 doctors in the United States during 1951.

The report, prepared by Dr. Donald G. Anderson, secretary of the AMA Council on Medical Education and Hospitals, and Mrs. Anne Tipner, both of Chicago, was published in the current (May 31) Journal of the American Medical Association.

Official figures indicated that in 1951 there were 6,282 persons who, for the first time, obtained licenses to practice in the United States. The net gain of 2,640 for the year was after an estimate of the number of deaths of physicians based on reports to the AMA.

New York, the report showed, had the greatest number of first-time licentiates, 743; California was second with 256. Next in order were: Illinois, 437; Ohio, 394; and Pennsylvania, 388. Increases in the number of first-time licentiates, as compared with 1950 figures, occurred in 26 states.

A total of 12,008 licenses were issued in the United States and possessions last year by examination or by endorsement of credentials. This total included those who had been licensed previously, but who had moved to another state.

California issued the greatest number of licenses, 1,367. Of these, 844 represented licensures by reciprocity or endorsement of credentials, including 216 to candidates who held certificates of the National Board of Medical Examiners. Illinois provided California with the largest number of doctors under state reciprocal licenses, 95; Minnesota was second with 53. California state board examinations resulted in 523 licenses.

New York issued 1,107 licenses, of which 336 were by examinations and 771 by reciprocity or endorsement. Of the latter, 580 held certificates of the National Board of Medical Examiners. Illinois issued 665 licenses; Ohio, 664; Texas, 632, and Pennsylvania, 549.

The report indicated the high medical training rating of the medical schools of the United States, all 72 of which are now approved by the council. Of 5,018 graduates of existing United States schools who last year took written examinations for licenses, 4,874 (97.1 per cent) passed. The ratio was the same as for 1950.

In comparison, only 842 (67.9 per cent) of the 1,455 graduates of other schools successfully passed state board examinations. In 1950, the successful ratio was 53.9 per cent. The 1951 passing percentages among graduates of other schools were: approved Canadian schools, 88.2; extinct approved schools, 92.8; foreign, 52.1; unapproved schools, 25.8; and schools of osteopathy, 76.7.

Altogether, 6,473 persons took state board examinations; 5,716 (88.3 per cent) received passing grades.

The National Board of Medical Examiners, whose certificate is recognized by all states excepting Florida and Texas, examined 1,738 candidates,

of whom 87.7 per cent passed. The higher passing rate is explained by the fact that in 1951 the board examined no graduates of unapproved medical schools, extinct approved schools or schools of osteopathy; it examined only 12 foreign graduates.

More doctors educated in foreign countries are appearing before state boards for licenses, and, although the percentage of failure is still large, the number of applicants receiving licenses is on the upgrade, according to the report.

To aid examining boards the AMA Council on Medical Education and Hospitals and the executive council of the Association of American Medical Colleges have prepared a list of foreign medical schools, the graduates of which may be considered on the same basis as those of approved medical schools in the United States.

The list, published in the current Journal of the American Medical Association, contains the names of 49 schools in 13 countries. It is being added to from time to time. Twenty-three licensing boards have accepted this list in the consideration of applicants for licensure. Forty-three boards will admit foreign physicians to licensing examination under varying conditions.

### RADIUM SOURCE

Most of the world's supply of radium still comes from the rich uranium ores of the Belgian Congo in Africa.

## ANNOUNCING 24-HOUR PRESCRIPTION SERVICE

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Owner of Parkland Pharmacy

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## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of July 21, 1952 to August 20, 1952, inclusive:

Chickenpox .....	8
Conjunctivitis .....	1
German Measles .....	43
Gonorrhea .....	25
Impetigo .....	1
Malaria (non-resident).....	26
Measles .....	34
Meningitis .....	1
Mumps .....	34
Polio .....	12
Scarlet Fever .....	2
Syphilis .....	2
Tuberculosis .....	6

## U. S. Outdrinks World

People in the United States drink more coffee than all the rest of the world, says the United States Department of Agriculture.

We now are drinking nearly 115 billion cups of coffee a year, an average of more than two cups a day for each person, including children. In forty years, per capita consumption of coffee in the United States has risen from eight pounds in 1910 to fifteen pounds in 1951.

## Statement on Health Insurance By U. S. Senator John J. Sparkman

Democratic Nominee for Vice President

"I am in favor of adequate medical attention for the people of this country. However, I have not favored what is generally known as Socialized Medicine.

"I would be opposed to any plan which I thought would, in effect, socialize medicine, and to any medical program which would destroy the relationship of doctor and patient."

The foregoing statement was made by Senator Sparkman in an interview with Mr. Al Goldsmith, editor of *Washington Insurance Newsletter*, on July 31, 1952.

Washington Insurance Newsletter reported that Senator Sparkman strongly indicated he was opposed to the Truman National Compulsory Health Insurance Program, but declined to take a position on specific bills now before The Congress.

In 1949, when the roll was called in the U. S. Senate on President Truman's Reorganization Plan No. 1, which would have created a Department of Welfare, Senator Sparkman stood with medicine in opposition to this scheme to give Federal Security Administrator Oscar Ewing cabinet status, with increased power over the health and medical affairs of the country.

# GLYKERON

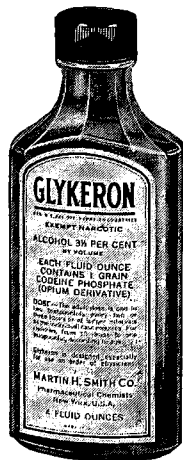
### A Bronchial Sedative

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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.*

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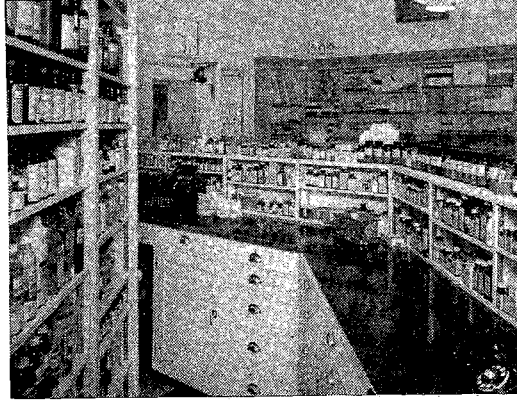
It lessens the hazard of complications by getting rid of germ-laden secretions.

Prescribe it for the symptom of cough. Very palatable.

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

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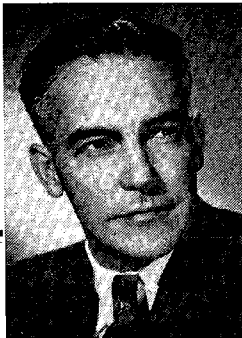


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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

## MOUNTAIN VIEW FUNERAL HOME

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## How You Get Your Money's Worth From AMA Dues

By W. W. Bauer, M.D.

Director, Bureau of Health Education,  
American Medical Association

The Bureau of Medical Economic Research has combated another kind of quackery practiced by the distorters of statistics and the misusers of facts and has, in addition, contributed much constructive statistical research, establishing such new concepts as medical service areas supplanting the old county unit system, and pointing out that medical costs have risen less than general living costs and that medical efficiency is not measured by number of doctors but how much and how well doctors can serve their patients; these are but a few of the contributions of this Bureau. It has also established the growing importance of accidents in mortality and morbidity.

Hidden away in a corner, although a corner of sizeable proportions now, is a little-known department, the Chemical Laboratory, upon which the scientific councils of the Association lean heavily in the evaluation of drugs and foods.

The library of the Association, with its periodical lending and clipping service and the book reviews and abstracts in the JOURNAL, is well known to most physicians. This in itself is a service for which commercial organizations collect far greater fees than the \$25 which the doctor pays per year for the privilege of calling upon the resources provided by the AMA.

Another part of what you get for your \$25 is the Washington Office which has maintained in the capital city a dignified, informative channel of contact with our national legislators which they have appreciated increasingly in the few years this office has existed. Much of the information about pending legislation affecting the public health and the practice of medicine would reach the medical profession too late or not at all if it were not for the Washington Office.

In every war situation the medical profession, despite adverse publicity, has always fulfilled its obligations to the nation. At the present time the Council on Emergency Medical Service is performing a patriotic duty in procurement of medical officers for the armed forces and at the same time maintaining adequate service to the civilian population and protecting the legitimate interests of doctors.

### Public Relations Service

In the field of public relations everyone knows of the determined educational campaign conducted by the Association to ward off the threat of governmental control in medicine. Much less publicized are the public relations values of the continuing services rendered by the Association. Any and all of the activities already enumerated have inevitable repercussions of a favorable nature upon the public attitude toward the medical profession.

Health education is so closely related to public relations that the line of demarcation is often very hazy and only the close cooperation which exists between the Department of Public Relations and

the Bureau of Health Education prevents duplication, over-lapping, and unwholesome competition. The Public Relations Department handles press and magazine relationships. Network and transcribed radio and television have been assigned to the Bureau of Health Education as well as convention coverage in this field for the Annual and Clinical Sessions.

The Public Relations Department sometimes handles radio and television in connection with the meetings held by various bureaus and councils such as the Annual Congress on eMedical Education and Licensure, the Congress on Industrial Health, the meetings of the Rural Health Committee, etc.

The electrically transcribed health programs of the Association have a very definite accessory value in public relations, covering, as they do, 80 per cent of the nation's heavily populated areas with 11,000 annual broadcasts in which 300 to 600 of the country's AM radio stations participate. So also do the occasional documentary network programs. The Question and Answer correspondence with lay readers extends direct personal service to 15,000 inquirers a year.

Committee work and advisory services extended by many departments to governmental agencies, voluntary health agencies, cooperating professional groups, educators, business men's and women's organizations, labor unions, and religious organizations all have a two-fold value: they give needed help which can come only from medical sources, and they make friends for the medical profession in ways difficult to measure, but no less real for all that.

The phase of committee, conference, and workshop service with which I am most familiar is that rendered by the Bureau of Health Education through our medical and educational consultants in school health work. Meeting with national

(Continued on Page 29)

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(Continued from Page 27)

and state level groups of doctors, educators, and public health workers and through national conferences on physicians and schools, these consultants offer a two-way channel of communication between doctors and educators, locating and smoothing points of friction, interpreting professional viewpoints, and cooperatively integrating interprofessional activities.

This work grew out of one of the earliest of the Association's liaison committees, the Joint Committee on Health Problems in Education of the National Association and the American Medical Association. Through these contacts it has been possible for me to serve twice on a year-book commission of the American Association of School Administrators, the first time in 1940-42, to originate the year-book, "Health in Schools," and the second time, this year and last, to revise that same book.

"Health in Schools" is among the most widely distributed and popular publications of the National Education Association. It contains nothing that is not in full accord with accepted medical principles.

Pamphlets such as "Suggested School Health Policies," "Health Appraisal of School Children" and others have been influential in establishing policies and procedures in relation to school health which improved the health of our children without impairing the family doctor relationships which we know to be fundamental to good medical care.

Unique in the publication field is TODAY'S HEALTH, the lay magazine sponsored by the medical profession. It has been copied by closely similar publications in England, Germany and Canada; an Australian edition has been proposed; it is the most widely quoted magazine in the world. It offers a channel for health education and legitimate public relations which is not equaled anywhere because it reaches directly a conservatively estimated two million readers monthly, not counting uncounted and uncountable secondary readers who see it in libraries, in schools, and elsewhere.

This is what you get for your \$25—but wait. I should say, this is what you might get for your \$25 if you only would. How many times have you traveled to Chicago without visiting AMA headquarters in which you have so heavy an investment of interest and of money?

How often have you referred a knotty problem in school health, in medical service, in medical economics or in the numerous scientific fields to the agency established by your representatives and financed by you? Have you supported by word of mouth the radio platter programs placed all over your state by your state medical society?

Do you put TODAY'S HEALTH to work in your office, in schools, libraries and among your friends? On the basis of roughly twenty-five major activities at or closely related to AMA headquarters they cost you each less than one dollar per year for direct services and for indirect benefits which can hardly be measured or evaluated.

If you don't get \$25 worth of your membership check it may be due in part to the fact that you have never fully exercised your membership privileges.

## FILIBUSTER

More than a hundred years ago a bill relating to the Bank of the United States was filibustered for several weeks. This so infuriated Henry Clay that he attempted unsuccessfully to curb the practice. Clay said that nobody could talk seriously about any subject for more than 15 minutes.

Since Clay's time, leather-lunged, iron-legged Senators have paralyzed the legislative process by talking—talking—and talking. These talkfests unlimited often have no relation at all to the subject before the Senate. Once a Senator read Aesop's Fables while he was holding the floor.

There seems to be some question as to who has the long-distance talking record in the Senate. According to the Library of Congress, the late Senator Robert LaFollette, of Wisconsin, held the floor for the longest time—18 hours and 23 minutes. His famous filibuster occurred in 1908 against a currency bill. At 12:40 one afternoon, "Old Bob" LaFollette, a stocky, bushy-haired man in a Prince Albert coat, rose to speak in opposition. Moistening his lips, he opened the Washington telephone directory, and began reading—name after name—number after number. He droned on until 7:03 the next morning, being helped by interruptions for quorum calls, and a drink of milk and eggs.

When we talk about filibusters in recent years, one unusual personality comes to the minds of most of us. He was the master of the filibuster—the late Senator Huey P. Long of Louisiana. In 1935, he held the floor for 15½ hours in a futile effort to block the extension of the old NRA. He gained the dubious distinction of actually speaking continuously for a longer time than any other Senator, before or since. During his all night discourse, the tireless "Kingfish" entertained the Senate with an oration about Frederick the Great, and by reading his favorite recipes for "potlikker," fried oysters, and other southern dishes. He also read the Constitution, the Declaration of Independence, and selected readings from Victor Hugo. The cost of printing in the Congressional Record the things Senator Long said about fried oysters, guinea hens, and other disconnected subjects amounted to well over \$4,000.

—Senator James P. Kem of Missouri  
Congressional Record, Aug. 18, 1952

An icy voice cut into an uninhibited telephone conversation. "Do you know whom you are addressing?"

"No," said the Corporal.

"Well, this is Major Throckmorton."

"Major," said the Corporal, "do you know whom you are addressing?"

"NO," thundered the Major.

"Thank heavens!" said the Corporal, and hung up.

## IF IT'S GOOD FOR THE DOCTOR SHAW CAN SUPPLY IT

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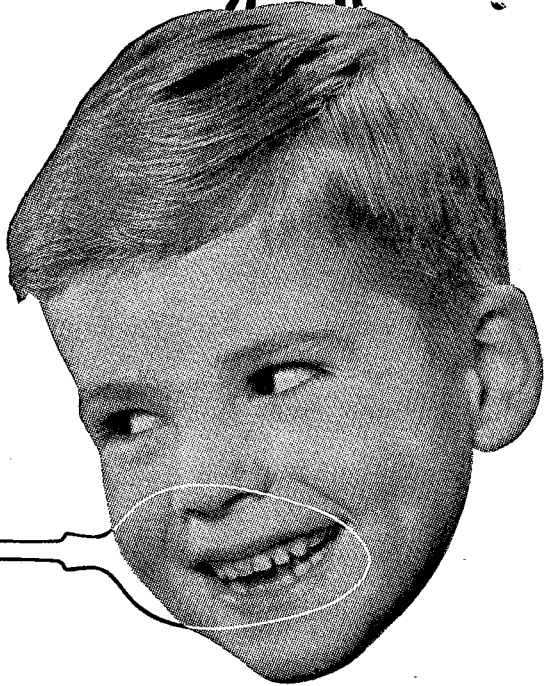
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**EACH TEASPOON SUPPLIES:**

Vitamin A . . . . .	3000 units
Vitamin D . . . . .	1000 units
Thiamine . . . . .	1.0 mg.
Riboflavin . . . . .	1.2 mg.
Niacinamide . . . . .	8.0 mg.
Ascorbic acid . . . . .	50 mg.

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club

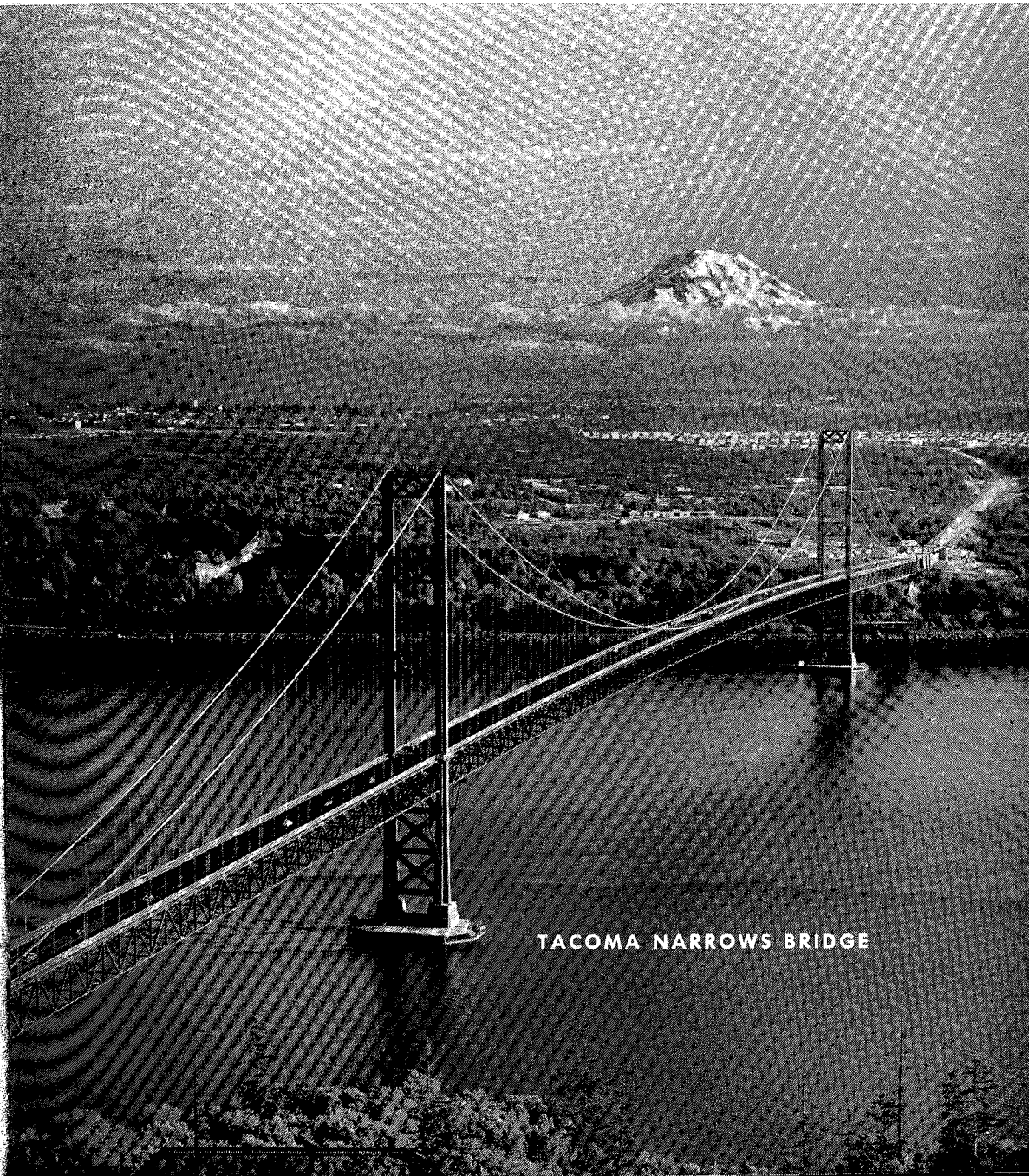


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXIII—No. 2

TACOMA, WASH.

OCTOBER - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

## OFFICERS

President ..... Wm. H. Goering  
 President-Elect ..... Miles Parrott  
 Vice-President ..... Burton A. Brown  
 Secretary-Treasurer ..... Gerald C. Kohl  
 Executive Secretary ..... Katherine Miller

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J. F. Steele	F. J. Schwind
G. C. Kohl	F. H. Rigos
B. A. Brown	G. G. McBride
R. A. Norton	Wm. H. Goering
A. A. Sames	C. Magill
T. H. Duerfeldt	Miles Parrott

## DELEGATES

Homer Humiston	Frank Maddison
William Goering	Chris Reynolds
	Frank Rigos

## ALTERNATE DELEGATES

Robert Florence	Glenn McBride
Herman Judd	Philip Grenley
	Fay Nace

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M. L. Johnson	William Hauser

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Hillis Griffin	Frank Rigos
Albert A. Sames	John Bonica
David T. Hellyer	Glenn McBride
	Thomas Clark

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Jesse Read, Chairman	
W. C. Cameron	

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J. R. Turner, Chairman	
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	Everett P. Nelson

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	Kenneth Sturdevant

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### Industrial Health Insurance

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Douglas Murray	L. F. Sulkosky

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D. S. Staatz, Chairman	
Somers R. Sleep	Alfred Schultz

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Roger S. Dille, Chairman	
Robert S. Lantieri	Robert H. Gibson

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	Philip Kyle

### Diabetes

H. A. Anderson, Chairman	
Frank R. Maddison	Edwin Fairbourn
	James Lambing

### Grievance

J. F. Steele, Chairman	
L. A. Hopkins	H. W. Humiston
F. R. Maddison	E. C. Yoder

### Bulletin Staff

Editor .....	Homer W. Humiston
Managing Editor .....	Katherine Miller
Auxiliary News Editor .....	Mrs. Horace A. Anderson

# Program

## Tuesday, October 14

## 8:15 p.m.

(Please Call Office for Information  
About Program)

## NOTICE

Check back page of Bulletin for calendar  
of special meetings.

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero Marine Photo Service.

# ***The President's Page . . .***

## **SALUTE TO THE LADIES!**

Now that vacation season is ended and activities of our various professional societies are swinging back into conventional pattern it is fitting to extend a formal word of appreciation to the members of our Women's Auxiliary to the Pierce County Medical Society. In a recent letter sent out to members and prospective members of the Auxiliary, the new president, Mrs. Everett Nelson wrote in part:

"We hope to accomplish a great deal this year, and it is my plea as incoming president to urge the full cooperation of all doctor's wives, so we may truly adopt the theme "Working Together for Health." For the benefit of those who are not acquainted with the activities of the Medical Auxiliary I would like to brief our hopes and plans for the ensuing year." The letter then outlined a comprehensive and far reaching list of projects including an active Nurse Recruitment program; a Speaker's Bureau to supply qualified speakers on medical subjects to all local groups who wished to avail themselves of such programs; participation in such local activities as the Heart Association Board, Blood Bank, Civil Defense; a Public Relations committee to plan health meetings open to the public; and a Legislative Committee, one of whose aims will be to see that every Tacoma doctor's wife is registered and goes to the polls to vote in November. All this in addition to regular meetings and programs is designed to give members an opportunity to get better acquainted and to learn how best to carry on their responsibilities in our community.

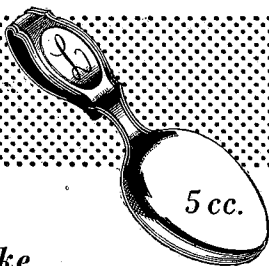
It sounds to us like an ambitious and stimulating program. And so in recognition and appreciation of their plans and efforts, we offer a sincere and admiring "Salute to the Ladies!"

—W. H. GOERING, M. D.

## *Easy-to-Take Antibacterial for Infections in Children*

When hypos frighten and tablets stick in reluctant throats, both child and parent welcome palatable Suspension 'Neopenzine.' In it the three "ideal" sulfonamides are combined with penicillin—G to provide broad-spectrum antibacterial action. The usual twenty-four-hour dose (one teaspoonful four times a day) provides 800,000 units of penicillin—G and 2 Gm. of the "diazine" sulfonamides. If the urinary output is normal, no alkalies are necessary. Prescribe the 60-cc. potency-protector combination package—available at pharmacies everywhere.

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# Neopenzine

(PENICILLIN WITH SULFONAMIDES, LILLY)

(approximately one teaspoonful) contain:

Penicillin—G, Crystalline-  
Potassium (Buffered) . . . . . 200,000 units  
"Diazine" Sulfonamides . . . . . 0.5 Gm.  
(Sulfa: Diazine-Merazine-Methazine,  
of each, 0.167 Gm.)

## ***Editorially Speaking . . .***

Initiative 184 will be on the November 4th ballot and if passed will supplant Initiative 178 now in force. In our excitement and interest in people as candidates, let's not forget that this proposal would raise the cost of the Welfare Program by many tens of millions of dollars in the next biennium

HOMER W. HUMISTON, M. D.

## Clinical Session of A.M.A. to Feature Medical Progress

CHICAGO.—Medical science on the march will be highlighted at the sixth clinical session of the American Medical Association in Denver, December 2-5. Doctors from all over the United States will gather to hear about the newest scientific and medical developments. Subjects of particular interest to the family physician will be stressed.

The recently enlarged Municipal Auditorium will be taken over for the scientific sessions and exhibits and the technical exposition. Color television and medical motion pictures will bring to the doctors the newest surgical techniques and clinical procedures.

The scientific exhibit, to be housed on the lower level of the new building, will cover the range of medical subjects. The technical exposition, to be staged in the main arena, will present the latest developments in medical equipment, drugs and accessories.

More than 200 lectures by the country's leading physicians will present the latest developments in obstetrics, child care, diseases of the chest, heart and blood vessel diseases, neurology, psychiatry and other phases of medicine.

Color television, originating from the Denver General Hospital, will bring the operating room into convention hall for close-up views by hundreds

of doctors. There also will be a demonstration of three-dimensional color motion pictures.

Evening features will include a concert by the Denver Symphony Orchestra on December 2.

## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of August 21, 1952, to Sept. 20, 1952, inclusive:

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Gonorrhoea .....	16
Impetigo .....	1
Measles .....	13
Meningitis .....	1
Mumps .....	8
Poliomyelitis .....	22
Ringworm .....	2
Scarlet Fever .....	2
Syphilis .....	2
Tuberculosis .....	8
Whooping Cough .....	2

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Bride: "Why, dear?"

Groom: "You're too light for such heavy work."

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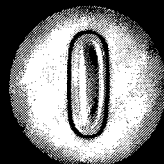
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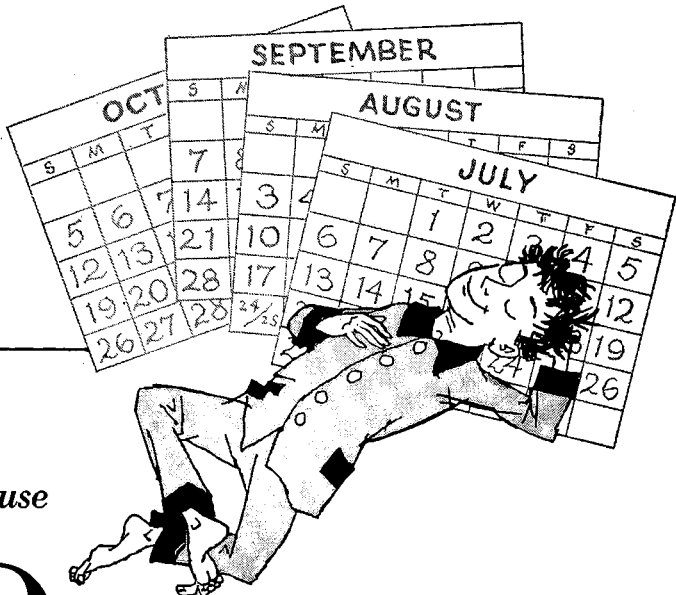
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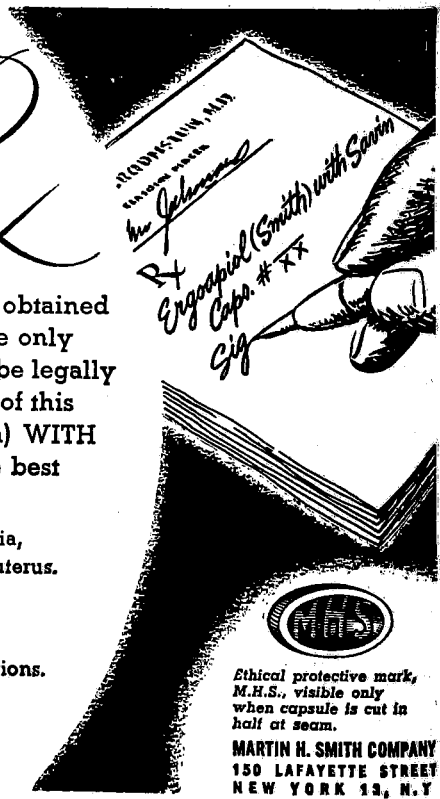
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**GENERAL DOSAGE:** One to two capsules, three to four times daily—as indications warrant.

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# WOMAN'S AUXILIARY

To The Pierce County Medical Society



MRS. EVERETT NELSON

The first meeting of the Women's Auxiliary to the Pierce County Medical Society will be a President's Tea; it will be held at the home of Mrs. Everett Nelson, 2232 West Boulevard, Day Island, at 1:30 p.m. Mrs. Ernest Banfield will be chairman with Mrs. James Vadheim as co-chairman. Assistant hostesses will be Mrs. Robert Brooke, Mrs. Ralph Huff, Mrs. Wilfred Olson, Mrs. Myron Kass, Mrs. Charles Marshall, Mrs. Frank Rigos, Mrs. Govnor Teats, Mrs. David Hellyer, Mrs. Charles McGill, Mrs. Philip Backup and Mrs. Robert Lane. The program will be especially interesting as Mrs. Warren Heaton, Program Chairman, will present Mrs. Chester B. Fisk in "Creative Use of Symbolic Movement." She will be accompanied by Jane Powers.

\* \* \*

Dr. and Mrs. Siegfried Herrmann flew to New York on September 22nd to attend the meeting of the American College of Surgeons. On the return trip a visit is scheduled for Cleveland with daughter Virginia in her new home.

\* \* \*

Dr. and Mrs. Mahlon Hosie have a new address; they are now at home at 4139 Madrona Way.

\* \* \*

Dues are payable in October. Mail your check now to Mrs. Eugene Hanson, 3510 North 33rd.

\* \* \*

**OFFICERS FOR 1952-1953**

- President ..... Mrs. Everett Nelson
- President Elect ..... Mrs. S. R. Lantiere
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- Second Vice President..... Mrs. Robert Gibson
- Recording Secretary..... Mrs. Robert Florence
- Corresponding Secretary..... Mrs. W. Howard Pratt
- Treasurer ..... Mrs. Eugene Hanson

**CHAIRMEN OF COMMITTEES**

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- Membership ..... Mrs. Fay Nace
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- Social ..... Mrs. Thomas A. Smeall
- Program ..... Mrs. Warren A. Heaton
- Telephone ..... Mrs. Mahlon R. Hosie
- Blood Bank ..... Mrs. David Hellyer
- Legislative ..... Mrs. Joseph B. Jarvis
- Today's Health ..... Mrs. Elmer W. Wahlberg
- Public Relations ..... Mrs. George A. Delaney
- National Bulletin ..... Mrs. Robert H. Gibson
- Civil Defense ..... Mrs. Murray L. Johnson

Dr. and Mrs. Leo Scheckner are flying to New York to say Bon Voyage to daughter Myrna, a recent bride, and her husband Boyce Bennett who will sail on the United States October 3rd for a three month's tour of Europe.

\* \* \*

Save your rummage; we hope to have a sale in December.

\* \* \*

Volunteer workers at the Blood Bank in September were Mrs. Hillis Griffin and Mrs. David Hellyer (who served twice), and Mrs. Charles Marshall, Mrs. Somers Sleep and Mrs. Scott Jones.

\* \* \*

Edith Link has joined Dr. Link in the East. Their address is Cedar Knoll, Port Washington, Long Island, New York, in care of Dr. Richard Gubner.

\* \* \*

Mrs. Archibald Howe has just returned from a three months tour of Europe where she visited seven countries. On her arrival in the United States she spent some time with her brother in Wisconsin.

**ANNOUNCEMENT FROM MADIGAN**

Col. Emery E. Alling, Commandant at Madigan Army Hospital has invited all the members of the Pierce County Medical Society to a meeting on October 28th at which Dr. C. Sidney Burwell, Research Professor of Clinical Medicine, Harvard Medical School will speak on "Constructive Pericarditis." The meeting will be held at 3:30 in the Hospital Auditorium.

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## HEALTH DEPARTMENT, TACOMA PUBLIC SCHOOLS

We have had an unusual experience in having to add five new nurses to our staff this year. Resignations due to personal reasons, one sabbatical leave, and one retirement, are the causes. But, we have had the amazingly fortunate experience of being able to fill the vacancies with nurses who have had Public Health training and experience in school work.

The staff now consists of five nurses who have been with this department three to twelve years. They are: Mrs. Helayne Duncan, Miss Wanda Frederick, Mrs. Velma Jackson, Mrs. Katherine Kizer, and Mrs. Ann Wilkins.

The following five nurses who are new on our staff: Mrs. Anola Frederick, Mrs. Ethel Stamatakis, Mrs. Evelyn Grant, Mrs. Erna Southwell, and Mrs. Geraldine Johnson.

The nursing staff carry the burdens of this department. Theirs is not an easy task. They must look after the welfare of 23,316 pupils of various ages and from all kinds of home conditions. Unfavorable home conditions are reflected directly in the child's health and his performance in school. The schools must attempt to supply the needs of children who are neglected at home—often our facilities are inadequate to meet these many needs. We cannot practice medicine in the schools, but the nurses try to find the physical defects and to secure correction by referral to the family physician. When economic conditions prevent such care by the doctor, attempt is made to reach the doctor through relief agencies. Sometimes parents lack the initiative or the desire to secure medical care for their children, which adds to the many frustrations met by the nurse. Many emotional problems are found by the nurse. These the principal may refer to the guidance counselor; but often the limited resources of the schools cannot cure the unfavorable home conditions causing the problem.

Last year we attempted to examine children in the elementary schools, selected by the teacher and the nurse, because of failure in school or behavior troubles, or presumed physical defects. We found many serious problems, but we also found ourselves unable to remedy many grave difficulties.

This year we have organized a *Diagnostic Clinic* in the schools, consisting of the teacher, the nurse, the Director of Health, and also a guidance counselor. The child will be examined in the school, with one or both parents present. This cooperation by the parent is a *must*. Every effort is made to keep the child and parent in a friendly and cooperative state of mind. The hope is that we shall not only find the children who have physical or emotional problems, but that we may find the needed remedies to cure or alleviate unfavorable conditions affecting the child.

The nurses are just now, in addition to many other duties, checking over and transcribing to the health cards, the examination forms which have resulted from the examinations of children by the family physicians during the summer. It is yet too

soon to be able to make a comprehensive report.

We find a disposition among a few parents to feel sorry for themselves that they must spend money on such examinations. This attitude seems to be shared by a few teachers; for instance, one teacher complained to the nurse that of her twenty-five children examined, not one defect was found. At least, she pointed out, she was aware of some grave *emotional* problems that were missed. Various comments can be made regarding these criticisms, but the point in mentioning it here is to remind all of us that doctors need the best *public relations* possible these days, and that every contact with a patient is an important part of these public relations.

It is the earnest desire of this department to work in cooperation with the physicians of Tacoma. May we ask for your cooperation, and also for your comments and suggestions.

—D. M. Dayton, M.D.,  
Director of Health.

### Third Annual Alfred A. Strauss Lecture

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*by*

WARREN H. COLE, M.D.

*Professor of Surgery, Illinois College of Medicine*

Friday Evening, October 24, 1952

8:30 p.m.

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## TACOMA GENERAL

Mr. Russell Hill, Director of the Physical Therapy Department, is very happy to announce that Mr. Carl O. Moe has joined his staff. Mr. Moe is a Registered Physical Therapist, who received his training at the Mayo Clinic, and was for seven years a staff member there.

\* \* \*

Commencement exercises for the Class of 1952 of the School of Nursing were held on September 11, at the First Methodist Church. Mr. Roe Shaub, Vice-President, presented the diplomas to 38 graduating nurses.

\* \* \*

The Fall quarter has opened at the School of Nursing with 44 new students, 49 juniors, and 35 seniors. Doctors who will lecture this quarter are Dr. Leon Thomas on Gynecology, Dr. John Robson on Neurosurgery, and Dr. Kazumi on Tuberculosis.

\* \* \*

Miss Jean Schenk, Instructor and Health Supervisor, has enrolled at the University of Minnesota for courses in Nursing Education.

\* \* \*

The newly-created position of Evening Clinical Instructor is being filled by Mrs. Ethel Flynn. She will be in the Hospital evenings to give supervision and instruction to students from 1 to 9:30.

\* \* \*

Dr. Charles Larson helped with the exhibit in the Pathology section at the Washington State Medical Association Meeting and was caught by the P.-I. cameraman in one of the demonstrations.

\* \* \*

Illness which interrupted her vacation is still keeping Mrs. Clara O'Farrell from her duties as executive housekeeper.

## PIERCE COUNTY

The hospital personnel entertained at a farewell coffee hour in honor of Mr. Eugene Schneider, who for the past three years has been head technician in the Laboratory at Pierce County Hospital. Mr. Schneider was presented with a leather brief case from his associates. Miss Norma Johnson has taken Mr. Schneider's place on the laboratory staff.

\* \* \*

Mr. Takeo K. Shimizu has taken the place of Mr. Ted Taniguchi, who was pharmacist at the hospital, and who is now pharmacist at King County Hospital in Seattle, Washington. Mr. Shimizu has lately arrived from Japan where he was employed in the Civil Service. He is a graduate of the 1949 class of Pharmacy from the University of Washington.

\* \* \*

Miss Mary Mooney, Superintendent of Nurses, is attending the Nursing Administration Conference beginning October 10 at the St. Francis Hotel in San Francisco. Following this, Miss Mooney will

journey to Chicago to spend her vacation among several of her friends there.

\* \* \*

Mary O'Neil, x-ray department, was hostess at her newly built summer home, Mary's Hide-out, on Whitman Lake for the other members of the x-ray department and especially in honor of Private first class, Gordon Krensler, who left shortly after for duty in Germany. A picnic supper was enjoyed.

\* \* \*

Mrs. Williamson, Social Service head, is enjoying an extensive motor trip with friends from Medford, Oregon, Mrs. Lena Ames and daughters. Their travels have taken them to Phoenix, Santa Fe, Albuquerque, the Taos Cliff Dwellers Country and to Bryce Canyon.

\* \* \*

Mr. and Mrs. Herbert Wiggins have left on a motor trip through Oregon.

\* \* \*

Dr. Daniel Hogberg, lately of Spokane, Washington, has joined the resident staff of the hospital.

\* \* \*

Sympathy is extended to Mae Fells, third floor supervisor upon the death of her father, Mr. Myron Miller, and to Lois Eckroth, laundry, upon the death of her father, Mr. Raymond McDonald.

\* \* \*

Mr. Charles Haddon is contemplating a plane trip to Florida for his vacation.

\* \* \*

Miss Doris Dykeman, third floor, and Mr. Andrew Kohler were married on September 6. Mrs. Kohler was honored at a tea by the hospital personnel and presented with gifts of silver and china.

\* \* \*

Friends were pleased to see Mabel Johnson back at the laboratory office. She is recovering rapidly from a recent operation at Doctors' Hospital.

## VETERANS ADMINISTRATION

American Lake, Washington

This hospital was very fortunate in being able to have Dr. William O. Russell address the medical staff on September 19th. Dr. Russell is Chief Pathologist of the University of Texas Medical School and also of the M. D. Anderson Hospital, Houston, which hospital is primarily interested in cancer and has done a great deal of work along research lines. Dr. Russell talked on the subject of modern trends in cancer research and left us with a rather optimistic feeling. Although inroads are being made slowly in the attack on the etiology, therapeutic results have gained significantly by the use of radial surgery and roentgen therapy.

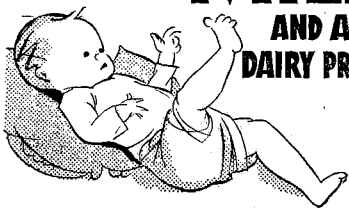
\* \* \*

Our Chief of Professional Services, Dr. R. E. Petrone and Mrs. Petrone are vacationing in Hawaii, accompanied by our Supply Officer, Mr. D. C. McLean and Mrs. McLean.

(Continued on Page 15)

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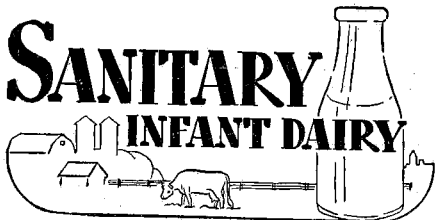


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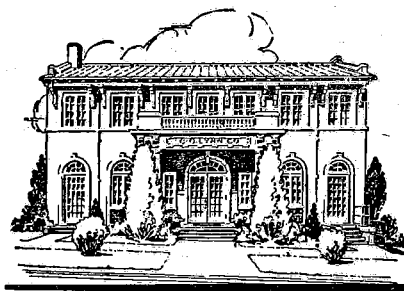


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(Continued from Page 13)

\* \* \*

A panel discussion will be held October 15, at 8:15 p.m. in the hospital auditorium, with the presentation of an actual case study by various members of the hospital treatment team. All interested professional and sub-professional personnel are invited.

\* \* \*

Our Medical Rehabilitation Department put on a beautiful display at the Western Washington Fair, the primary purpose of which was to indicate the interest that the patients take in the various rehabilitation activities and the benefit that they obtain therefrom.

### THE GOOD NEIGHBOR CLUB

In the interest of the less fortunate, the Pierce County Medical Society hopes that the response of the doctors of Pierce County will be 100% in the United Good Neighbor Fund campaign. This Fund makes it possible to contribute to the Red Cross, the Community Chest and its many agencies, the USO-United Defense Fund, and to the drives to fight Heart Disease, Polio and Cancer—all with but one contribution. When the worker for the campaign comes to call on you, let him explain this new type of giving; let him give you a Good Neighbor pin that you can wear with pride knowing that you have done your full share for vital community services.

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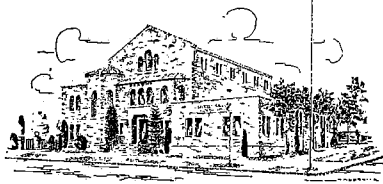
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ADAMS, SAMUEL E. General practice Office, 7120 Sixth Ave.....SK 1238 401 Medical Arts Bldg.....BR 6312 Home, 817 South Meyers.....SK 1492	ANDERSON, EDWARD R. General surgery—Friday afternoon Office, Northern Pacific Hospital.....MA 6116 Home, 619 North G Street.....MA 6613	ANDERSON, HORACE A. Internal medicine—Thursday Office, 1108 Medical Arts Bldg.....MA 2601 Home, 3114 North 33rd.....PR 6771	ANDREWS, HARRY H. General practice—Friday Office, 1003½ Main Street, Sumner.....Sumner 3-4351 Home: 603 Cherry Ave., Sumner.....Sumner 3-4605	ANNETT, LEO General practice—Wednesday and Saturday Office, 5241 So. Warner.....HA 2182 Home, 44 Orchard.....PR 0924	BACKUP, PHILIP H. Anesthesiology Office, Pierce County Hospital.....HA 3321 Home, 708 North K.....BR 7345	BADER, B. A. General practice Office, Western Clinic, Perkins Bldg.....MA 1141 Home, 1017 North 12th.....BR 7995	BANFIELD, ERNEST E. Plastic and Reconst. Surgery—Thursday afternoon Office, 736 Medical Arts Bldg.....FU 2191 Home, 1202 Ventura.....SK 2869	BARBER, THEODORE M. Psychiatry Office, Rainier State School, Box 600.....Buckley 3811	BASKIN, LESTER S. General practice and surgery—Thursday Office, Western Clinic, Perkins Bldg.....MA 1141 Home, 906 North Tacoma Ave.....MA 2333	BENSON, JOSEPH A. Dermatology—Thursday Office, 1007 Medical Arts Bldg.....BR 6771 Home, Lake Killarney.....WA 8625	BETTERIDGE, BRYCE General practice Office, 4002 South M.....HI 5251 Home, 2213 West Grandview.....PR 1350	BLIZARD, ELDON C. Internal medicine—Wednesday afternoon Office, 110 4th NW, Puyallup.....Puyallup 5-6645 Home, 518 4th SW, Puyallup.....Puyallup 5-2283	BOHN, JULIUS C. (Honorary) General practice Office, 2602 North Proctor Street.....PR 5511 Home, 3506 North Union Ave.....PR 5256	BOND, ROBERT G. General practice Office, 1206 South 11th.....MA 3534 Home, 521 North Yakima Ave.....MA 2321	BONDO, PAUL E. General Practice Office, 1027 Medical Arts Bldg.....BR 2161 403 Garfield St., Parkland.....GR 8607 Home, 515 So. 119th.....GR 7149	BONICA, JOHN Anesthesiologist Office, Tacoma General Hospital.....BR 7304 Home, 44 Summit Road.....PR 7164	BRADY, J. MORRISON Medical Director Office, Pierce County Hospital.....HA 3321 Home, Route 6, Box 356, Tacoma.....YU 9853	BROOKE, J. ROBERT General practice—Wednesday and Saturday Office, 1206 South 11th.....MA 4272 Home, 3814 North 12th St.....PR 7216	BROWN, BURTON A. General surgery and diagnosis Office, 843 Medical Arts Bldg.....BR 5281 Home, 3101 North 30th Street.....PR 2621	BROWN, ROBERT W. Office, Western State Hospital.....LA 4411 Fort Steilacoom, Wash.	BROWN, WILLIAM C. Wednesday Office, 10011 Gravelly Lake Drive.....LA 2193 Home, 51 Oak Park Drive SW.....LA 2403	BURROWS, WILLIAM Office, 700 North Meridian, Puyallup.....Puyallup 5-2374 Home, Roseli Road, Puyallup.....Puyallup 5-8281	BUTTORFF, DOUGLAS Office, 1206 South 11th.....BR 0559 Home, 3705 North Washington.....SK 1254	CAMERON, WALTER C. Ophthalmology—Wednesday and Saturday Office, 1103 Medical Arts Bldg.....MA 1262 Home, Route 9, Box 941, Tacoma.....HA 6228	CARLSEN, EDWIN L. (Honorary) General practice—Tuesday and Saturday Office, 5401½ South Tacoma Way.....HA 3331 Home, 5311 South Lawrence.....HA 7330	CHAMBERS, ROBERT M. Office, 3515½ South 54th.....HI 3256 Home, 6044 South Fife.....HA 7568	CLARK, THOMAS H. General practice—Wednesday Office, 927½ Kincaid Ave., Sumner.....Sumner 3-3131 Home, 1422 Academy St., Sumner.....Sumner 3-4515	CLAY, HOMER T. Pediatrics—Saturday afternoon Office, 828 Medical Arts Bldg.....BR 3803 Home, 818 North G St.....BR 4534	CROWE, VERNON E. X-ray and general practice—Saturday Office, 1126 Medical Arts Bldg.....MA 3038 Home, 424 North G.....MA 5521	DAYTON, DARCY M. Office, Central School Bldg.....FU 1461 Home, 4131 Madrona Way.....PR 1678	DELANEY, GEORGE A. General practice—Saturday Office, 1410 Washington Bldg.....BR 1782 Home, 3222 North 19th St.....PR 3668	DENZLER, CHARLES H. General practice—Thursday Office, 927½ Kincaid, Sumner.....Sumner 3-3131 Home, 1309 Park.....Sumner 3-2381	DIETRICH, CARLISLE Dermatology—Tuesday, Friday morning and Saturday afternoon Office, 942 Medical Arts Bldg.....BR 3645 Home, Brookdale.....GR 7532	DILLE, RODGER S. Internal medicine—Wednesday Office, 736 Medical Arts Bldg.....BR 0660 Home, 22 Bradley Road.....PR 3179	DRAKE, B. ELIZABETH Diagnosis and Gynecology Office, 6443 Wildaire Road.....LA 3847 Home, Same.	DRUCKER, GERHART A. General practice—Saturday afternoon Office, 3902 South Yakima Ave.....HI 3064 Home, 523 South 61st St.....HA 2448	DUERFELDT, TRACY H. Internal medicine, allergy—Wednesday and alternate Saturdays Office, 1108 Medical Arts Bldg.....MA 2601 Home, 2905 North 28th.....PR 4224	DRUES, ISADORE A. Eye, ear, nose and throat—Saturday afternoon Office, 1212 Medical Arts Bldg.....BR 7447 Home, 922 North Ainsworth.....MA 6282	DUFFY, JAMES P. Office, 913 Kincaid, Sumner.....Sumner 3-3131 Home, Route 1, Box 49A, Sumner.....Sumner 3-4200	DUTTON, HARRY H. Neuropsychiatry—Saturday Office, Western State Hospital.....LA 4411 Fort Steilacoom, Washington.
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(Continued on Page 19)

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Home, 3722 North Washington.....	PR 1133	Home, 3715 N. 28th Street.....	PR 1191
EHRlich, ALBERT		HEATON, WARREN A.	
General practice—Wednesday		Office, 611 Jones Bldg.....	MA 8471
Office, 1206 South 11th.....	BR 2625	Home, 637 So. Meyers.....	PR 0101
Home, 10624 Brook Lane SW.....	LA 3844	HELLYER, DAVID T.	
EVERT, ROBERT N.		Pediatrics	
Urology		Office, 722 South K.....	BR 4214
Office, 1212 South 11th.....	FU 1131	Home, 7814 John Dower Road.....	LA 7927
1514 Medical Arts Bldg.....	BR 8553	HENNING, FRANK W.	
Home, 440 Buena Vista.....	SK 1259	General practice—Wednesday	
FAIRBOURN, EDWIN J.		Office, Western Clinic, Perkins Bldg.....	MA 1141
Internal medicine—Saturday		Home, 212 Eldorado.....	PR 0011
Office, 1507 Medical Arts Bldg.....	BR 3520	HERRMANN, ARNOLD	
Home, 617 North C.....	MA 8526	Office, 707 Medical Arts Bldg.....	BR 1419
FARGHER, CECIL R.		Home, 4620 North Verde.....	PR 4632
Director of Public Health—Saturday		HERRMANN, SIEGFRIED F.	
Office, 2324 Pacific.....	BR 9341	Surgery—Wednesday and Saturday	
Home, 712 North C.....	MA 2371	Office, 707 Medical Arts Bldg.....	BR 1419
FERGUSON, ROBERT M.		Home, 55 Summit Road.....	PR 4466
Office, 1118 Medical Arts Bldg.....	MA 6424	HILLIS, ALBERT E. (Honorary)	
Home, 608 South 2nd.....	BR 1400	Eye, ear, nose and throat—Wednesday and Saturday	
FLORENCE, ROBERT W.		Office, 1103 Medical Arts Bldg.....	MA 1262
Fractures and Traumatic surgery—Wednesday		Home, 1001 North G.....	BR 8604
Office, 1206 South 11th.....	MA 2516	HOPKINS, LEWIS A.	
Home, 3306 North 22nd.....	PR 9703	General practice—Saturday	
FLYNN, JOHN R.		Office, 1526 Medical Arts Bldg.....	BR 6172
Röntgenology—Wednesday		Home, 3718 North Mason.....	PR 6340
Office, 1514 Medical Arts Bldg.....	MA 1515	HOSIE, MAHLON R.	
1206 South 11th.....	MA 5959	Obstetrics	
Home, 610 North Stadium Way.....	BR 1675	Office, 1012 Medical Arts Bldg.....	BR 2106
GALLOWAY, ZILPHA		Home, 1210 Division.....	MA 2644
Psychiatry and Internal Medicine		HOWE, ARCHIBALD W.	
Office, Western State Hospital.....	LA 4411	Eye, ear, nose and throat—Wednesday, Thursday	
Fort Steilacoom, Wash.		morning and Saturday afternoon	
GEISSLER, GERALD G.		Office, 935 Medical Arts Bldg.....	MA 3640
Eye, ear, nose and throat—Friday afternoon		Home, 2902 North 27th.....	PR 2258
Office, Western Clinic, Perkins Bldg.....	MA 1141	HOYER, LOUIS P., JR.	
Home, 1304 North Yakima Ave.....	BR 2840	General surgery—Thursday afternoon	
GIBSON, ROBERT H.		Office, 407 Medical Arts Bldg.....	BR 9202
General surgery, proctology—Wednesday		Home, 4117 North 19th.....	SK 2186
Office, 1206 South 11th.....	MA 1493	HOYT, WALLACE P.	
Home, 3612 North 25th Street.....	PR 1363	General practice—Thursday afternoon	
GOERING, WILLIAM H.		Office, Puyallup Clinic.....	Puyallup 5-6645
Orthopedic surgery—Thursday		Home, 703 4th SW, Puyallup.....	Puyallup 5-6636
Office, 512 Medical Arts Bldg.....	FU 2523	HUFF, RALPH H.	
Home, 1545 Sunset Drive.....	SK 2205	Internal medicine and Cardiology—Wednesday	
GRAY, CLYDE E.		Office, 1206 South 11th.....	MA 4518
General practice, gynecology and obstetrics—Saturday		Home, 3416 North 30th.....	PR 2460
Office, 1206 South 11th.....	MA 1661	HUMISTON, HOMER W.	
Home, 3619 North 29th Street.....	PR 2446	Urology	
GRENLEY, PHILIP		Office, 1514 Medical Arts Bldg.....	BR 8553
Urology—Thursday and Saturday afternoon		1212 South 11th.....	FU 1131
Office, 1216 Medical Arts Bldg.....	BR 6251	Home, 3411 North 24th.....	PR 4323
Home, 710 North I.....	MA 6621	HUNT, LEO J.	
GRIFFIN, HELLIS F.		General surgery—Thursday	
General practice—Saturday		Office, Puget Sound Bank Bldg.....	MA 8466
Office, 605 South Pine.....	BR 4455	Home, 701 North J.....	MA 7535
Home, 3102 North 13th.....	PR 8343	IRVIN, MICHAEL Z.	
GUILFOIL, ERNA F.		General practice—Wednesday and Saturday afternoon	
Home, Route 2, Box 528, Puyallup.....	Puyallup 5-2090	Office, 11008 Gravelly Lake Drive SW.....	LA 3911
GULLIKSON, JOHN W.		Home, 10909 Meadow Road SW.....	LA 4515
General surgery—Wednesday		JAMES, FRANK H.	
Office, Northern Pacific Hospital.....	MA 6116	County Coroner	
Home, Tacoma Country Club.....	LA 2235	Office, County Court House.....	MA 7121
HANSEN, JOSEPH L.		Home, 2910 Mt. View.....	PR 9222
General practice—Saturday		JARVIS, JOSEPH B.	
Office, 1206 South 11th.....	BR 6500	Radiology	
Home, 3420 South M.....	HA 8160	Office, 110 4th NW, Puyallup.....	Puyallup 5-6645
HANSON, EUGENE W.		Home, 7216 Interlaaken Drive SW.....	LA 8049
General practice—Wednesday		JOHNSON, DAVID H.	
Office, 907 Medical Arts Bldg.....	BR 3772	Obstetrics—Saturday afternoon	
Home, 3510 North 33rd.....	PR 1152	Office, 1012 Medical Arts Bldg.....	BR 2106
HARRINGTON, BERNARD D.		Home, 63 West Road.....	PR 1271
Röntgenology—Wednesday afternoon and		JOHNSON, EDWARD J.	
alternate Saturdays		Office, Tacoma Indian Hospital.....	MA 1106
Office, 1415 Medical Arts Bldg.....	MA 7473	JOHNSON, MURRAY L.	
Home, 2623 North 29th.....	SK 2363	Surgery—Thursday and Saturday morning	
HATHAWAY, STILLMAN J.		Office, 1412 Medical Arts Bldg.....	BR 6862
Office, Western State Hospital.....	LA 4411	Home, 3810 North 35th.....	PR 8515
Fort Steilacoom, Washington		JONES, SCOTT S.	
HAUSER, WILLIAM P.		Obstetrics and gynecology—Saturday afternoon	
Internal medicine and diagnosis		Office, 1212 Medical Arts Bldg.....	BR 3723
Office, 1206 South 11th.....	BR 6311	Home, 4405 North 45th.....	PR 2640
Home, 1207 North K.....	BR 6880	JONEZ, HINTON D.	
HAVLINA, JOHN M.		Medical director M. S. Clinic	
Obstetrics and gynecology—Saturday		Office, St. Joseph's Hospital.....	MA 4101
Office, 1206 South 11th.....	BR 2512	Home, Route 1, Box 519, Spanaway.....	GR 7154
Home, 4017 South 7th.....		JUDD, HERMAN S.	
HAZEN, Bernice		General practice—Wednesday and Saturday afternoon	
Psychiatry		Office, 922 Medical Arts Bldg.....	BR 8439
Office, Western State Hospital.....	LA 4411	Home, 1316 North 10th.....	BR 6127
Fort Steilacoom, Washington			

(Continued on Page 21)



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<b>KALKUS, J. HUGH</b> General practice—Monday Office, Medical & Dental Bldg., Fife.....WA 6451 Home, Buenna.....YU 9720	<b>McPHAIL, ROSS E.</b> Diseases of the chest—Wednesday and Saturday afternoon Office, 1317 Medical Arts Bldg.....MA 0717 Home, Route 4, Box 899.....GR 3153
<b>KASS, MYRON</b> Neurology and Psychiatry Office, 807 Medical Arts Bldg.....BR 6126 Home, 4112 North 36th.....SK 2311	<b>MacRAE, RAYMOND D.</b> Roentgenology Office, 1517 Medical Arts Bldg.....MA 1515 1206 South 11th.....MA 5959 Home, 324 North E.....BR 2394
<b>KEMP, CHARLES E.</b> Pediatrics—Thursday and Saturday afternoon Office, 722 South K.....BR 4214 Home, 3812 North 39th.....PR 7337	<b>MADDISON, FRANK R.</b> Internal Medicine and Cardiology—Thursday P.M. and Saturday Office, 1135 Medical Arts Bldg.....MA 2348 Home, 4151 Madrona Way.....PR 7689
<b>KITTREDGE, GEORGE S.</b> Pediatrics—Monday Office, 10011 Gravelly Lake Drive SW.....LA 2193 Home, 8317 95th SW.....LA 9302	<b>MAGNUSSEN, NORMAN E.</b> General Practice—Wednesday P.M. and Saturday Office, 1403 Medical Arts Bldg.....MA 6092 Home, 7535 Hegra Road.....SK 3200
<b>KOHL, GERALD C.</b> Obstetrics, gynecology and surgery—Thursday Office, 1516 Washington Bldg.....BR 4251 Home, 602 North Tacoma Ave.....BR 1041	<b>MAIER, HASKEL L.</b> Eye, Ear, Nose and Throat—Wed. and Sat. P.M. Office, 936 Medical Arts Bldg.....MA 2331 4002 South M.....HI 5251 Home, 2707 Henry Road.....BR 5216
<b>KOHLER, HUGH F.</b> Office, 5427 Pacific.....HI 1775 Home, 3320 South Thompson.....HA 6811	<b>MARSHALL, CHARLES E.</b> Thursday and Saturday P.M. Office, 1212 South 11th.....MA 8266 Home, 12819 Avenue DuBois.....LA 9062
<b>KUNZ, GEORGE</b> General practice—Thursday and Saturday Office, 1209 South 12th.....BR 4747 Home, 21 Orchard Road.....PR 1351	<b>MATTSON, JAMES M.</b> Internal Medicine—Wednesday Office, 1206 South 11th.....BR 8203 Home, 1410 Division.....BR 7492
<b>KYLE, PHILIP C.</b> Obstetrics—Thursday and Saturday Office, 1427 Medical Arts Bldg.....MA 1561 Home, 701 North Yakima Ave.....BR 2009	<b>MATTSON, WILLIAM W.</b> General Diagnosis and Surgery Office, 736 Medical Arts Bldg.....BR 3708 Home, 4602 North Water.....PR 1877
<b>LAMBING, JAMES D.</b> General practice—Thursday Office, Gig Harbor.....Gig Harbor 2660 Home, Gig Harbor.....Gig Harbor 2670	<b>MAY, CHARLES W.</b> General Practice—Thursday Office, Northern Pacific Hospital.....MA 6116 Home, 2324 East 72nd.....HI 7788
<b>LANE, ROBERT R.</b> Internal medicine Office, Medical Arts Bldg.....FU 2222 Home, 8807 North Thorne Lane SW.....LA 7026	<b>MEIER, HERBERT H.</b> Obstetrics and Gynecology Office, Western Clinic, Perkins Bldg.....MA 1141 Home, 7 Barlow Road S.W.....LA 7554
<b>LANTIERE, S. ROBERT</b> General practice—Wednesday Office, 1203 Medical Arts Bldg.....MA 3070 Home, 3724 North 33rd.....PR 1346	<b>MONAGHAN, RAYMOND W.</b> General Practice and Surgery Office, 1500 Washington Bldg.....BR 3335 Home, 3935 North Mason.....PR 4394
<b>LARKIN, HUGH A.</b> General practice—Thursday Office, 1616 Washington Bldg.....BR 1064 Home, 705 North 5th.....MA 7406	<b>MOOSEY, GEORGE A.</b> Surgery and Urology—Wednesday Office, Western Clinic, Perkins Bldg.....MA 1141 Home, 1418 North 10th.....BR 2863
<b>LARSON, CHARLES P.</b> Pathology Office, Tacoma General Hospital.....MA 1181 Home, 3219 North 32nd.....SK 2279	<b>MUIR, EDWIN C.</b> Internal Medicine—Thursday P.M. Office, 1307 Medical Arts Bldg.....BR 1386 Home, 7314 North St. S.W.....LA 3576
<b>LASBY, JOSEPH O.</b> General practice—Wednesday Office, 633 Provident Bldg.....MA 6463 Home, 916 North Tacoma Ave.....MA 4788	<b>MURPHY, ROBERT C., JR.</b> Psychiatrist and Director Child Guidance Center Office, 2324 Pacific.....BR 9341 Home, 3709 North Washington.....PR 8612
<b>LEE, JACK W.</b> Office, Western Clinic, Perkins Bldg.....MA 1141 Home, 1502 North 10th.....BR 8126	<b>MURPHY, THOMAS B.</b> Surgery—Wednesday and Saturday Office, 1118 Medical Arts Bldg.....BR 4440 Home, 803 Stadium Way.....BR 3033
<b>LESLIE, ARTHUR C.</b> General practice—Thursday Office, 3805 South Yakima Ave.....HA 1279 Home, 864 South 37th.....HA 8864	<b>MURRAY, DOUGLAS H.</b> Orthopedic Surgery Office, 1206 South 11th.....MA 2421 Home, 3431 South 272nd, Kent.....Kent 9141-11
<b>LIGHT, SAMUEL E.</b> Dermatology and Syphilology—Saturday Office, 1212 So. 11th.....BR 1661 Home, 11150 Gravelly Lake Drive.....LA 8833	<b>NACE, FAY MORRIS</b> Obstetrics and Gynecology—Wednesday and Saturday Office, 1312 Medical Arts Bldg.....MA 1277 Home, 1228 Fernside Drive.....PR 0133
<b>LUDWIG, WILLIAM H.</b> Eye, ear, nose and throat—Thursday and Saturday afternoon Office, 714 Medical Arts Bldg.....BR 1700 Home, 902 South Jackson.....PR 6369	<b>NELSON, EVERETT P.</b> Pediatrics—Saturday Office, 722 South K.....BR 4214 Home, 2232 West Boulevard.....SK 2408
<b>LUNDVICK, CYRIL</b> Eye, ear, nose and throat—Wednesday and Saturday afternoon Office, 815 Medical Arts Bldg.....BR 3343 Home, Gig Harbor.....Gig Harbor 10X8	<b>NEVITT, DONALD M.</b> General Practice Office, Eatonville.....Eatonville 112 Home, Eatonville.....Eatonville 114
<b>McBRIDE, GLENN G.</b> General practice—Wednesday and Saturday afternoon Office, 807 Medical Arts Bldg.....BR 5385 Home, 952 Fairview Drive.....PR 7564	<b>NIETHAMMER, WOODARD A.</b> Surgery and Gynecology—Thursday Office, 1035 Medical Arts Bldg.....BR 2108 Home, 3403 North 21st.....PR 1787
<b>McCABE, EDWARD F.</b> General practice—Thursday Office, 700 North Meridian, Puyallup.....Puyallup 5-2374 Home, Sturgis Road.....Puyallup 5-8176	<b>NORTON, RODERICK A.</b> Pediatrics—Wednesday and Saturday P.M. Office, 427 Medical Arts Bldg.....BR 0354 Home, 4216 North Mason.....PR 8531
<b>McCOLL, CHARLES R.</b> Pathologic Anatomy and Clinical Pathology Office, St. Joseph's Hospital.....MA 4101 Home, 1906 South 41st.....HA 5413	
<b>McCOY, CHARLES C.</b> Saturday Office, Western Clinic, Perkins Bldg.....MA 1141 Home, Town House.....BR 9480	

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General Practice and Obstetrics—Wed. and Saturday		Radiology—Thursday and Saturday	
Office, 729 Medical Arts Bldg.....	MA 7342	Office, 1415 Medical Arts Bldg.....	MA 7473
Home, 3411 North 29th.....	PR 9712	Home, 640 Vista Drive.....	PR 3133
<b>OLSON, WILFRED R.</b>		<b>SANDERSON, STEVEN S.</b>	
Office, Northern Pacific Hospital.....		Radiology (Diagnosis and treatment)	
Home, 406 North 6th.....	MA 6116	Office, 522 Medical Arts Bldg.....	
	BR 0154	Home, 624 North D.....	
<b>OOTKIN, BERNARD N.</b>		MA 1555	
General Practice—Thursday		<b>SCHAEFFER, RALPH C. (Honorary)</b>	
Office, Lakewood Center.....	LA 9292	Surgery—Wednesday and Saturday	
Home, 9148 Edgewater Drive S.W.....	LA 7061	Office, 1135 Medical Arts Bldg.....	
		Home, Tacoma Country Club.....	
<b>PAINÉ, FREDERIC O.</b>		LA 8812	
General Practice		<b>SCHECKNER, LEO</b>	
Office, 4002 South M.....	HI 5251	Anesthesiology—Saturday	
Home, 5315 South Lawrence.....	HA 4331	Office, 5241 South Warner.....	
		Home, 1318 Division.....	
<b>PARROTT, MILES</b>		MA 2616	
General Practice—Wednesday and Saturday P.M.		<b>SCHEYER, CARL</b>	
Office, 1207 Medical Arts Bldg.....	BR 5822	General Practice—Saturday	
Home, 10109 South Park.....	GR 8541	Office, Karshner Bldg., Puyallup.....	
		Home, 511 15th Ave. S.E., Puyallup.....	
<b>PASCOE, CHARLES S.</b>		Puyallup 5-5300	
Urology—Wednesday and Saturday		Puyallup 5-2305	
Office, 1515 Washington Bldg.....	MA 3823	<b>SCHULTZ, ALFRED L.</b>	
Home, 11415 Gravelly Lake Drive.....	LA 9365	Obstetrics and Gynecology—Wed. and Sat. P.M.	
		Office, 1226 Medical Arts Bldg.....	
<b>PETERSON, DONALD I.</b>		Home, 2701 North Junett.....	
General Practice—Tuesday P.M. and Saturday		PR 1576	
Office, Buckley.....	Buckley 3281	<b>SCHWIND, FREDERICK J.</b>	
Home, Buckley.....	Buckley 4793	General Practice—Wednesday	
<b>PETERSON, WENDELL G.</b>		Office, 1212 South 11th.....	
Orthopedic Surgery—Thursday and Saturday		Home, 1510 North Proctor.....	
Office, 1422 Medical Arts Bldg.....	MA 8882	PR 8681	
Home, 624 North Yakima.....	BR 8273	<b>SCHWIND, JUSTIN V.</b>	
		General Practice—Thursday	
<b>PLUM, FRANK A.</b>		Office, 1212 South 11th.....	
Eye, Ear, Nose and Throat, Neurosurgery—		Home, 2520 North Monroe.....	
Thursday and Saturday		PR 4560	
Office, Western Clinic, Perkins Bldg.....	MA 1141	<b>SEVER, BUEL L.</b>	
Home, 4524 North Verde.....	PR 7401	Office, 340 Berkeley Ave.....	
		Tillicum.....	
<b>PRATT, W. HOWARD</b>		Home, 401 Harvard.....	
Anesthesiology		SHANKLIN, JAMES G.	
Office and Home, 1224 North Tacoma.....	BR 5893	Neurology and Psychiatry	
<b>QUEVILL, CHRISTEN R.</b>		Office, 722 South K.....	
Diagnosis and Internal Medicine—Saturday		Home, 3209 North 29th.....	
Office, 1325 Medical Arts Bldg.....	MA 5233	PR 7632	
Home, 2224 North Tacoma.....	MA 3348	<b>SHEPPARD, JOHN A.</b>	
<b>RACE, GEORGE A.</b>		Pathology	
Tuesday		Office, Western State Hospital.....	
Office, 108 North Bridge St., Orting.....	Orting 5610	Home, 812 North State St.....	
Home, 524 Kansas Ave., Orting.....	Orting 1621	MA 5674	
<b>RADEMAKER, William</b>		<b>SHOVLAIN, F. E.</b>	
General Practice—Thursday		Superintendent	
Office, 1206 South 11th.....	MA 8176	Office, Western State Hospital.....	
Home, 718 North Adams.....	PR 3155	Home, Western State Hospital.....	
<b>READ, JESS W.</b>		LA 4411	
General Surgery—Wednesday and Saturday		<b>SKINNER, LAWRENCE E.</b>	
Office, 1125 Rust Bldg.....	MA 1505	General Practice—Thursday	
Home, 800 North C.....	BR 3400	Office, 10011 Gravelly Lake Drive S.W.....	
<b>READ, WILMOT (honorary)</b>		Home, 10224 Green Lane S.W.....	
Wednesday and Saturday		LA 3981	
Office, 1125 Rust Bldg.....	MA 1505	<b>SLEEP, SOMER R.</b>	
Home, 816 South L.....	MA 8563	General Practice—Wednesday	
<b>REYNOLDS, CHRIS C.</b>		Office, 701 Medical Arts Bldg.....	
General Practice—Wednesday and Saturday P.M.		Home, 2210 North Tacoma.....	
Office, 922 Medical Arts Bldg.....	BR 8439	MA 1509	
Home, 3723 North 34th.....	PR 8434	<b>SMEALL, JOSEPH S.</b>	
<b>RICH, RICHARD I.</b>		General Practice and Surgery—Friday	
General Practice—Tuesday		Office, 1206 South 11th.....	
Office, 10011 Gravelly Lake Drive.....	LA 2193	Home, 1402 South Pine.....	
Home, 6627 Hilltop Lane S.W.....	LA 8706	MA 3446	
<b>RIGOS, FRANK J.</b>		<b>SMEALL, THOMAS A.</b>	
Radiology—Wednesday and Saturday		General Practice—Friday	
Office, 1514 Medical Arts Bldg.....	MA 1515	Office, 1206 South 11th.....	
Home, 2501 North Union.....	PR 8205	Home, 3206 North 29th.....	
<b>RITCHIE, CYRIL B.</b>		PR 7569	
General Practice, Allergy and Surgery—Wed. & Sat.		<b>SMITH, HELEN PRICE</b>	
Office, 1525 Medical Arts Bldg.....	BR 1193	Tuberculosis	
Home, Route 7, Box 598-X.....	GR 7724	Office, Mountain View Sanitarium.....	
<b>ROBERTSON, J. BENJAMIN (Honorary)</b>		Home, Route 7, Box 232.....	
General Practice		GR 5744	
Office, Banker's Trust Bldg.....	BR 2713	<b>SMITH, HOLLIS R.</b>	
Home, 301 North J.....	MA 6481	Tuberculosis—Saturday	
<b>ROBSON, JOHN T.</b>		Office, Mountain View Sanitarium.....	
Neurology and Neurosurgery—Thursday and Saturday		Home, Route 7, Box 232.....	
Office, 1318 Medical Arts Bldg.....	BR 8121	GR 5744	
Home, 424 North C.....	BR 9206	<b>SMITH, PAUL B.</b>	
<b>ROSENBLADT, LOUIS M.</b>		Eye, Ear, Nose and Throat—Saturday	
General Practice		Office, 927 Medical Arts Bldg.....	
Office, 1027 Medical Arts Bldg.....	BR 2161	Home, 403 North 10th.....	
Home, 5 Rosemont Way.....	PR 6231	BR 1463	
<b>ROSENBLADT, WILLIAM J.</b>		<b>SMITH, WARREN F.</b>	
General Practice—Saturday		Surgery—Wednesday and Saturday	
Office, 1027 Medical Arts Bldg.....	BR 2161	Office, 1412 Medical Arts Bldg.....	
Home, 3 Rosemont Way.....	PR 1156	Home, 2402 North Madison.....	
<b>RUNNING, DARRELL H.</b>		SK 2432	
General Practice and Obstetrics—Wednesday		<b>STAATZ, DUMONT</b>	
Office, 5401½ South Tacoma Way.....	HA 3331	Orthopedic Surgery—Wednesday	
Home, Steilacoom.....	LA 3092	Office, 512 Medical Arts Bldg.....	
		Home, Brown's Point.....	
		YU 9366	
		<b>STAATZ, KARL S.</b>	
		General Surgery—Wednesday and Saturday	
		Office, 818 Medical Arts Bldg.....	
		Home, 3408 North 29th.....	
		PR 1550	
		<b>STEELE, JOHN F.</b>	
		Diseases of Heart and Lungs—Wed. and Sat.	
		Office, 1218 Medical Arts Bldg.....	
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 Office, 110 4th Ave. N.W., Puyallup.....Puyallup 5-6645  
 Home, 130 5th Ave. N.W., Puyallup.....Puyallup 5-5116

**SULKOSKY, LEO F.**  
 General Practice—Wednesday  
 Office, Karshner Bldg., Puyallup.....Puyallup 5-5300  
 Home, 1403 5th S.E., Puyallup.....Puyallup 5-8264

**TEATS, GOVNON**  
 General Practice—Wednesday  
 Office, North 26th and Washington.....PR 3586  
 Home, 3514 North Washington .....PR 1121

**THOMAS, LEON B.**  
 Obstetrics and Gynecology—Thursday  
 Office, 1206 South 11th .....BR 7575  
 Home, 8908 DeKoven Drive S.W.....LA 9493

**THOMAS, MAX S.**  
 Internal Medicine  
 Office, 1206 South 11th .....BR 7573  
 Home, 6357 School St. S.W.....LA 7345

**THORDARSON, S. STEFAN**  
 Eye, ear, nose and throat—Thursday and Saturday  
 Office, 1041 Medical Arts Bldg.....MA 5847  
 Home, 3802 No. 36th St.....PR 5371

**TODD, WILLIAM H.**  
 Neurology and Psychiatry—Saturday P.M.  
 Office, 722 South K .....BR 4464  
 Home, 2907 North 26th .....PR 4892

**TRIMBLE, CHARLES G.**  
 General Practice and Obstetrics—  
 Thursday and Saturday P.M.  
 Office, 735 Medical Arts Bldg.....MA 6878  
 Home, 620 South Union .....PR 8184

**TURNER, JOSEPH R., JR.**  
 Internal Medicine—Wednesday and Saturday P.M.  
 Office, 435 Medical Arts Bldg.....BR 3523  
 Home, 12310 Interlaaken Drive S.W.....LA 2811

**VADHEIM, JAMES L.**  
 General Surgery—Wednesday and Saturday  
 Office, 707 Medical Arts Bldg.....BR 2796  
 Home, 1908 North Puget Sound .....PR 1195

**VIMONT, RICHARD T.**  
 Pathology  
 Office, St. Joseph's Hospital .....MA 4101  
 Home, 1912 South J .....MA 4101, Ext. 54

**WAHLBERG, ELMER W.**  
 Internal Medicine—Tuesday  
 Office, Western Clinic, Perkins Bldg.....MA 1141  
 Home, 3401 North 27th .....PR 5740

**WALKER, MURRAY K.**  
 Office, 1206 South 11th .....MA 8176  
 Home, 3713 North Ferdinand .....PR 5113

**WARD, JAMES F.**  
 Eye—Thursday  
 Office, 503 Medical Arts Bldg.....BR 2666  
 Home, 622 North 4th .....BR 2688

**WEST, THOMAS R.**  
 Office, Western Clinic, Perkins Bldg.....MA 1141  
 Home, 1017 North 10th .....MA 3521

**WHITAKER, JOHN L.**  
 Pathology—Saturday  
 Office, Pierce County Hospital.....HA 3321  
 Home, 3825 South Tacoma .....HI 3092

**WICKS, MERRILL J.**  
 Pathology  
 Office, Tacoma General Hospital.....MA 1181  
 Home, 2724 North 26th .....PR 4337

**WILLARD, DON G.**  
 General Surgery—Wednesday and Saturday  
 Office, 1525 Medical Arts Bldg.....BR 1193  
 Home, 722 North C .....MA 0630

**WILLIAMS, FRANK L.**  
 Surgery—Wednesday  
 Office, 903 Medical Arts Bldg.....MA 2661  
 Home, 502 North I .....MA 6886

**WISEMAN, CLAUDE E.**  
 Surgery—Thursday and Saturday P.M.  
 Office, 1307 Medical Arts Bldg.....MA 7842  
 Home, 2118 North Warner .....PR 2390

**WRIGHT, ROSS D.**  
 Proctology and Surgery—Wednesday and Saturday P.M.  
 Office, 1016 Medical Arts Bldg.....MA 2252  
 Home, 3108 North 31st .....PR 4503

**YODER, EDWIN C.**  
 Surgery—Wednesday  
 Office, Western Clinic, Perkins Bldg.....MA 1141  
 Home, 11915 Clover Creek Drive .....LA 7710

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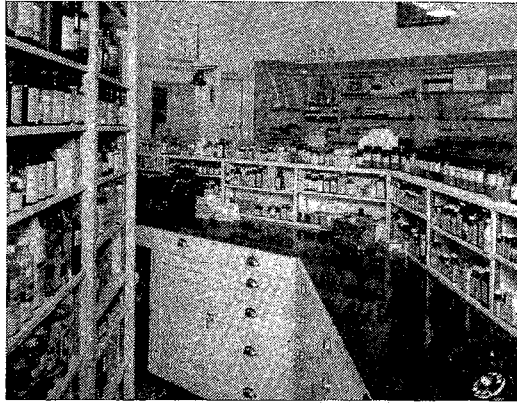
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 Veteran's Hospital, American Lake

"I once tried to enroll in Vassar—but I flunked my physical."—Arthur Godfrey.

—From the Medical Way.

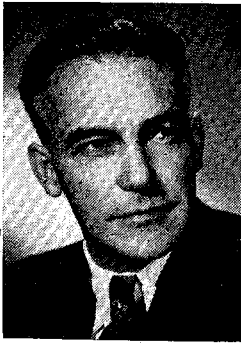


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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

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## Internal Revenue Rules Physicians May Deduct Payments for Professional Assistance

U. S. Bureau of Internal Revenue has ruled that physicians may deduct from their taxable income the payments they make for "professional assistance" in conducting their practice. Such deductions may be made, the Bureau states in its Bulletin of September 1, 1952, as an ordinary and necessary expense of carrying on a trade or business. The Bureau did not define "professional assistance."

On the question of payments made by a physician, on a split fee basis, to another physician who refers patients to him, the Bureau states that such payments as deductible business expenses must be determined "in the light of all the circumstances in each case." It adds:

"However, as a general rule, such payments are deductible for Federal income tax purposes provided they are normal, usual, and customary in the profession and in the community; are appropriate and helpful in obtaining business; and do not frustrate sharply defined national or state policies evidenced by a governmental declaration proscribing particular types of conduct."

A Bureau spokesman explained that the decision sets forth the pattern the Bureau is to follow in the future when ruling on such cases. The ruling cited the U. S. Supreme Court decision in the

Thomas B. Lilly case which permitted tax deductions of rebates paid by an optical company to physicians prescribing eyeglasses sold by the firm. The Bureau Bulletin (No. 18) is available at Government Printing Office, Washington 25, D.C., at 15 cents a copy.

"Well, the honeymoon is over," said the recently married young man.

"How come?" asked his friend.

"My wife has stopped helping me do the dishes," he replied disgustedly.

## Karen Rynning

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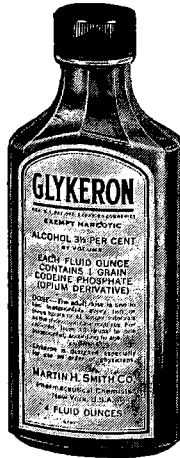
## A Bronchial Sedative

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. R. 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

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## WITH OUR DOCTORS

Dr. John Bonica read a paper at the meeting of the Northwest Society of Anesthesiologists held on the 30th and 31st of August in Tacoma. He also spoke on Cardiac Arrest at the Washington State Medical Association in Seattle, and at the Michigan State Medical Association meeting held on the 24th and 25th of September he read a paper on the Management of Pain in Cancer.

\* \* \*

Dr. Dale Doherty from Everett, Washington, is now associated with Dr. Light in their new offices 1212 South 11th.

\* \* \*

Dr. John Havlina arrived in Graz, Austria on the 11th of September where he will spend a year in Postgraduate study. He is accompanied by his son and youngest daughter.

## Fourth Annual Symposium On "Hypertension and "The Arrhythmias"

The Fourth Annual Symposium of the Washington Heart Association in cooperation with Washington State Department of Health on "Hypertension" and "The Arrhythmias" will be held on November 7th and 8th, 1952, at the University of Washington Medical School Auditorium.

Once again the Washington State Heart Association and the Washington State Department of Health cooperate to bring to the physicians of Washington State some of the latest developments in the field of circulatory diseases.

In our last symposium, on Surgical Treatment of Mitral Stenosis, the best speakers available were secured. We have again secured four outstanding authorities, three on Peripheral-Vascular disease: Doctor Robert W. Wilkins of Boston, Doctor Stanley E. Bradley of New York and Doctor Eugene B. Ferris of Cincinnati; and one on the Arrhythmias, Doctor Myron Prinzmetal of Los Angeles.

In addition to their scheduled papers, the speakers will conduct panel sessions and discuss questions from the audience.

Details of the program will be forthcoming. There will be no registration fee. We hope you will be able to attend.

Again, may we remind you to save these dates—Friday and Saturday, November 7th and 8th, just preceding the U. of W.-California football game.

Wanted . . . a few more copies of the August issue of Northwest Medicine. We exchange these with other medical libraries and we are short on this issue.

\* \* \*

Dr. Ootkin announces that there is office space for two doctors at Lakewood Center, 6323 Motor Avenue. LA. 9292.

Opera is—when a man gets stabbed in the back he doesn't bleed, he sings.

## "In Eyes of American Physicians Initials 'ILO' Spell Danger!"

International Labor Organization Is An Affiliated  
Agency of the United Nations

Socialism By Treaty Now Seen As Possible As  
Result of Our International Actions

By George F. Lull, M.D.  
Secretary of the AMA

In the eyes of American physicians today, the three initials "ILO" spell danger!

They stand for an international body which eventually may change the whole concept of medical practice throughout the world.

ILO means International Labor Organization, an affiliated agency of the United Nations. It comprises some 60-odd active member-governments. Its policy-making body is the International Labor Conference, which meets annually, usually in Geneva where the staff maintains permanent headquarters.

The last ILO conference was held in June and since then more and more evidence is accumulating that the drive for socialized medicine has shifted from the domestic scene to the international scene.

The ILO is one of the oldest and most important of the maze of international organizations functioning today, and the American Medical Association has been watching its work for years. It now is felt that the time has come to acquaint American physicians with the facts and let them know that, while the issue of socialized medicine is quiescent so far as the public and Congress are concerned, there is danger of having it walk through a back door under the guise of an international treaty.

### Socialized Medicine

Ratification of the ILO's newest Convention (Treaty) on Minimum Standards of Social Security by a two-thirds vote by only the Senate would establish "socialized medicine" irrespective of the wishes of the majority of the members of Congress and the public to the contrary. The medical care section of the convention stipulates in part that a country ratifying must provide a system of compulsory health insurance. Lacking this, it has two alternatives: 1. Private, voluntary health insurance administered by public authorities under established regulation, or 2. Private, voluntary health insurance administered by insurance companies under government supervision.

The AMA Journal lately has published considerable material on the ILO and its health objectives, and more articles are scheduled to appear in the very near future. This is "must" reading for every physician.

For back reading, physicians are invited to turn to the Organization Section of the Journal, May 31, 1952; to the excellent statement of AMA President Louis H. Bauer on page 869 of the June 28 issue of the Journal; to Capitol Clinic, Vol. 3, No. 26, July 1, 1952, and to the Washington News Section of the Journal, July 12, 1952.

### International Approach

Here is part of another editorial "Socialized Medicine — the ILO Way" — which appeared in the Journal, August 23:

Although the battle against the proponents of political medicine has been won, at least temporarily, in our state legislatures and in the Congress, we are in danger of losing the war through an international approach.

The same forces which unsuccessfully attempted to socialize the medical profession through legislation are finding it much easier to work through the United Nations and the International Labor Organization. In our enthusiasm to espouse such principles as "fundamental human rights," "social progress," and "international peace and security," we have aided and abetted the activities of these forces. Through the wholesale approval of treaties, conventions, and executive agreements, our international representatives have placed not only American medicine, but our national sovereignty and our Constitution in jeopardy.

Socialism by treaty is now a greater threat than socialism by domestic legislation, principally because the possibility of political and economic regimentation from an external source is not widely recognized. The public is unaware of the dangers inherent in the treaty-making power, because during the first 150 years of our Republic, treaties concerned only the relationship between the United States and other sovereign states. Their attempted use to define the relationship between American citizens and their own government is a recent development—a development, however, which can result in the subtle realization of the socialist's dream of cradle-to-the-grave security.

### Vigorous Action Needed

A new covenant, entitled "Minimum Standards of Social Security," approved by the International Labor Organization in Geneva in June, 1952, envisions government benefits in nine fields of social security—medical care, sickness benefits, unemployment benefits, old age pensions, employment injury benefits, family allowances, maternity benefits, invalidity benefits, and survivors' benefits. While the medical benefits in the covenant are carefully distributed through the document, considered together they constitute "socialized medicine."

It is time, therefore, that as a nation, and as a profession, we stop and analyze the results and potentials of our international actions. It is the duty of every physician to acquaint himself with the history, the purpose, and the plans of the United Nations, and the International Labor Organization.

In addition, the American Medical Association and its component societies must wage the same vigorous campaign against socialism by treaty that it is now conducting against socialism made-in-America.

When the motorist, who had crashed into a telephone pole and brought down the wires, recovered consciousness, his hands were clutching the wires.

"Thank Heaven," he exclaimed fervently, "it's a harp."

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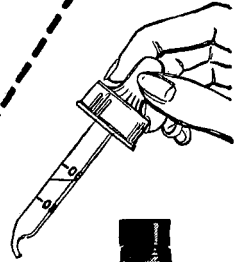
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## **MONTHLY MEETINGS**

### **STAFF OF TACOMA GENERAL**

First Tuesday of each month (Second Tuesday in January)

### **STAFF OF ST. JOSEPH'S**

Third Monday of each month—at 6:15 p.m.

### **TACOMA ACADEMY OF MEDICINE**

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### **SURGICAL SOCIETY**

Third Tuesday of each month—6:30 p.m. at Tacoma Club

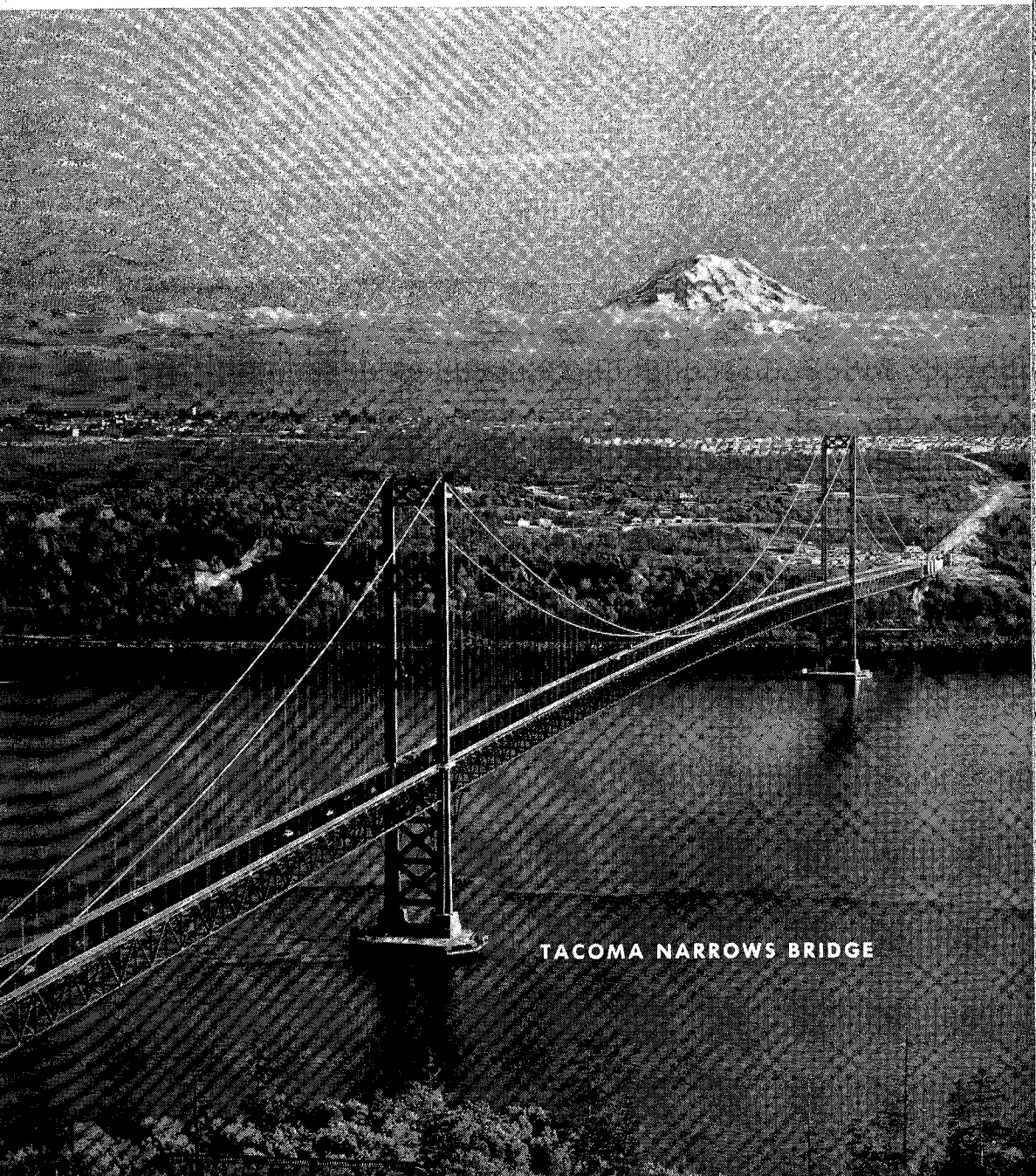


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXIII—No. 3

TACOMA, WASH.

NOVEMBER - 1952



TACOMA NARROWS BRIDGE

# Pierce County Medical Society

1952

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(Admiral, U. S. Navy, retired)	

### Bulletin Staff

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Managing Editor	Katherine Miller
Auxiliary News Editor	Mrs. Horace A. Anderson

# Program

Tuesday, November 11, 1952

8:15 p.m.

George Boldt will speak on  
 Medico-legal Problems of  
 Malpractice

## NOTICE

Check back page of Bulletin for calendar  
 of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero-Marine Photo Service.

## ***The President's Page . . .***

On my desk is a small black plastic tablet with gold lettering. It is placed so that it may be read by the person sitting across from me, and there have been many comments from patients and visitors on the philosophy contained in its text. It was written by a Chicago Rotarian and is entitled "The Four-Way Test." It consists simply of four questions which can be applied in our daily lives, in all types of business, industrial and professional, as groups and as individuals:

1. Is it the truth?
2. Is it fair to all concerned?
3. Will it build goodwill and better friendships?
4. Will it be beneficial to all concerned?

"If each of us were to follow this text," says Past President Mitchell of Rotary International, "then we would begin to make progress in the realization of the goal set forth in this ancient Chinese proverb:

If there be righteousness in the heart  
there will be beauty in the character.  
If there be beauty in the character,  
there will be harmony in the home.  
If there be harmony in the home,  
there will be order in the nation.  
If there be order in the nation,  
there will be peace in the world."

We have found the Four-Way Test stimulating and helpful, and believe it offers highly effective set of standards. We pass it on to you for your consideration and guidance.

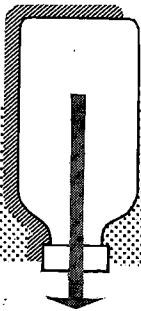
W. H. GOERING, M. D.

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## ***Our Candidates . . .***

Below is the list of candidates chosen by the two nominating committees: Dr. Hopkins, chairman, Dr. Read and Dr. Florence; Dr. Norton, Chairman, Dr. Reynolds and Dr. Humiston.

President	Dr. Jess Read	Dr. Paul Smith
Vice President	Dr. Charles Larson	Dr. Robert Gibson
Secretary-Treasurer	Dr. Gerald Kohl	Dr. Gerald Kohl
Trustees	Dr. Douglas Buttorff	Dr. Charles Denzler
	Dr. Arnold Herrmann	Dr. Robert Lantiere
	Dr. Warren Smith	Dr. John Flynn
Delegates	Dr. B. D. Harrington	Dr. Gerald Kohl
	Dr. Frank Maddison	Dr. William Goering
	Dr. Gerald Kohl	Dr. William Rosenblatt
	Dr. William Goering	Dr. B. D. Harrington
	Dr. Frank Rigos	Dr. Chris Reynolds
Alternate Delegates	Dr. Arnold Herrmann	Dr. John Gullikson
	Dr. George Kittredge	Dr. Murray Johnson
	Dr. Wendell Peterson	Dr. Glenn McBride
	Dr. Louis Hoyer	Dr. George Moosey
	Dr. Murray Johnson	Dr. Richard Rich

The election will be held at the November 11th meeting of the Pierce County Medical Society.

## Work Underway on Special Studies

The AMA Council on Medical Service has employed two medical students from Northwestern—Eugene Dye of Madison, Wis., and William Dear-dorff, Danville, Ill.—to assist in several studies which the council has undertaken.

One study deals with the development of criteria for evaluating a community's need for a physician or additional physicians and for evaluating the characteristics of a community which tend to attract physicians. While the Physicians' Placement Service has been working on this problem for some time, the council felt the need for field work to verify and bring together the information available.

Another study concerns union health plans that have been growing for the past few years. A data file has been compiled on each of these plans, but further verification and appraisal are needed. This will involve personal visits to a specified number of these plans in order to obtain more information than is available in the present published literature. Particular attention will be given to the objectives, scope, facilities, and personnel involved in such plans, together with the arrangements that have been made between the plan and the medical profession.

The third study, involving a number of indigent medical care plans, especially in the midwest, is a continuation of the work done last summer by a Yale University medical student.

## THIS IS THE YEAR

A warning which seems to merit thoughtful consideration by all Americans in this year of political decision was sounded recently in Youngstown, Ohio, by Dr. Ernest E. Irons, a Past President of the American Medical Association.

Dr. Irons, who has been an active leader in the doctor's campaign against socialized medicine, declared that "we are still open to a flank attack through economic and business areas which have not developed an offense against continuing socialistic trends."

"The average citizen," Dr. Irons said, "can easily tell white from black in normal questions. But he shares the inability of most of us to distinguish the many shades of socialistic grey until the moral and economic issues of superficially attractive but dangerous proposals are laid bare."

This is the year for all of us to try to distinguish the basic moral and economic issues involved in all proposals affecting the future of America.

This is the time for uncovering the socialistic hooks hidden behind a wide variety of sugar-coated baits and lures which will be proposed in the election-nearing month ahead. This is the year for us all to discern the difference between "security" and "socialism."

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1. Perloff, W. M.: Am. J. Obst. & Gynec. 58:684, 1949.

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When prescribing Ergoapiol (Smith) with Savin for your gynecologic patients, you have the assurance that it can be obtained only on a written prescription, since this is the only manner in which this ethical preparation can be legally dispensed by the pharmacist. The dispensing of this **uterine tonic**, time-tested ERGOAPIOL (Smith) WITH SAVIN—only on your prescription—serves the best interests of physician and patient.

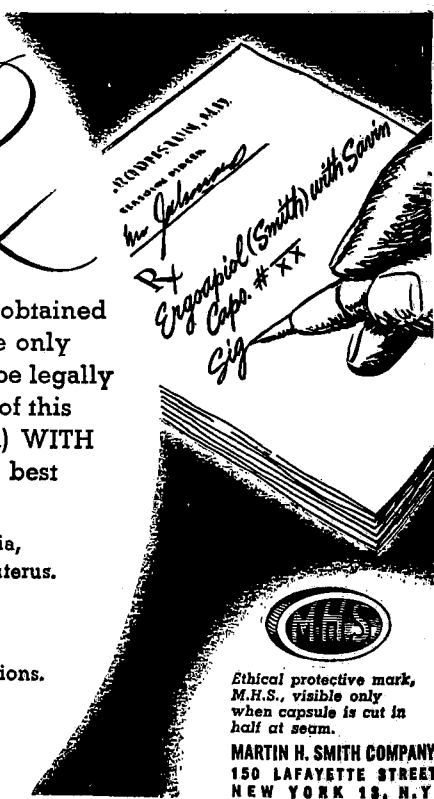
**INDICATIONS:** Amenorrhea, Dysmenorrhea, Menorrhagia, Metrorrhagia, and to aid involution of the postpartum uterus.

**GENERAL DOSAGE:** One to two capsules, three to four times daily—as indications warrant.

In ethical packages of 20 capsules each, bearing no directions.

*Literature Available to Physicians Only.*

**ERGOAPIOL** (SMITH) WITH **SAVIN**



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

**MARTIN H. SMITH COMPANY**  
150 LAFAYETTE STREET  
NEW YORK 18, N.Y.



# WOMAN'S AUXILIARY

To The Pierce County Medical Society



—Photo by Bert Perler

HOSTESS FOR NOVEMBER MEETING  
MRS. HASKELL MAIER

We were happy to welcome so many new members at our President's Tea, and we surely hope they will continue to attend our monthly meetings. Mrs. Chester B. Fisk presented a delightfully entertaining program of interpretive and symbolic dancing. The emphasis was on relaxing our nervous tensions and practicing better posture—two things which most all of us slip up on now and then.

\* \* \*

The November meeting will be a luncheon at the home of Mrs. Haskell Maier, 2707 Henry Road, on Friday, November 14th at 12:30 p.m. Mrs. W. P. Hauser and Mrs. Douglas Buttorff are co-chairman. Our program will be an interesting talk by Mrs. Ray Thompson whose husband was with NATO in Europe. She will give "An Impression of Europe Today."

\* \* \*

Remember to save all rummage for our Rummage sale that will be held December 4, 5 and 6 at 1516 Jefferson. Cecilia Ootkin is in charge and is assisted by Grace Hauser. *Anything* is acceptable as rummage and arrangements will be made to pick it up if you will call Cecilia at LA. 7061, or Grace Hauser at BR. 6880.

\* \* \*

### OFFICERS FOR 1952-1953

- President .....Mrs. Everett Nelson  
 President Elect .....Mrs. S. R. Lantiere  
 First Vice President.....Mrs. George S. Kittridge  
 Second Vice President.....Mrs. Robert Gibson  
 Recording Secretary.....Mrs. Robert Florence  
 Corresponding Secretary.....Mrs. W. Howard Pratt  
 Treasurer .....Mrs. Eugene Hanson

### CHAIRMEN OF COMMITTEES

- Year Book .....Mrs. Bernard A. Ootkin  
 Membership .....Mrs. Fay Nace  
 Publicity .....Mrs. Horace A. Anderson  
 Social .....Mrs. Thomas A. Smeall  
 Program .....Mrs. Warren A. Heaton  
 Telephone .....Mrs. Mahlon R. Hosie  
 Blood Bank .....Mrs. David Hellyer  
 Legislative .....Mrs. Joseph B. Jarvis  
 Today's Health .....Mrs. Elmer W. Wahlberg  
 Public Relations .....Mrs. George A. Delaney  
 National Bulletin .....Mrs. Robert H. Gibson  
 Civil Defense .....Mrs. Murray L. Johnson

Mrs. Eugene Hanson reports that dues have been coming in pretty well, but there are still many unpaid. If you wish to mail them in, her address is 3510 North 33rd.

\* \* \*

Donna Ferguson has been appointed from our organization for the 45th Annual Xmas Seal sale for the TB Association of Pierce County. She would like to have volunteers to work in booths at various Post Offices during the sale. The booth at the Main Post Office will be open from December 6th to 20th; at South Tacoma, north 26th and Proctor, Sixth Avenue, and 3805 South G from December 6th to 12th, inclusively. For further information, please call Mrs. Ferguson at BR. 1400.

\* \* \*

Blood Bank volunteers this month were Mrs. T. J. Hargrove, Mrs. Miles Parrott, Mrs. Everett Nelson, Mrs. Scott Jones, Mrs. Herman Judd and Mrs. David Hellyer.

\* \* \*

On the sick list this month were Leila Robson, Kay Wright and Emma Bonica's eldest daughter, Angela. We are happy to report that all are on the mend.

\* \* \*

Many of our members are moving, or are about to move soon, to new homes. The Hosies, Judds, and Huffs will have new addresses soon, and the Parrotts, Magnussens and Pratts are in the process of building.

\* \* \*

Congratulations to Hugh and Mary Jo Kohler

(Continued on Page 11)

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PROPERTY MANAGERS****747-49 St. Helens Ave. Broadway 3255****ASK FOR W. O. JEFFERY****OFFICERS****H. F. SYFORD, President****J. D. POWELL, Vice President**  
(In Charge of Fire Insurance)**DONALD M. MOORE, Vice President**  
(In Charge of Casualty Insurance and Bonds)**E. J. POLE, Secretary**  
(In charge of Marine Insurance)

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Service to the Medical Profession and  
their patients for 44 years.

We dispense only the finest of  
Pharmaceuticals.

(Continued from Page 9)

who have a new daughter whom they named Colleen Mary. She was born October first. Fred and Nancy Paine gave the same birthday to their daughter Nancy, and the Robert Florences welcomed Jane about the end of September.

\* \* \*

Remember, if you know any news we would love to hear it. Please call PR. 6771.

## SOFT BREAD NOT NECESSARILY FRESH

CHICAGO.—Use of chemical bread softeners makes it possible to fool the average consumer because softness and freshness are closely related in the minds of most people, according to Dr. James R. Wilson, secretary of the Council on Foods and Nutrition of the American Medical Association.

When buying a loaf of bread, the average consumer prefers one that is soft, Dr. Wilson wrote in the current *Today's Health*, published by the A.M.A. Few persons ever heard of chemical bread softeners, which have not been proved unquestionably safe, he added.

The council views the use of the chemical bread softeners with considerable apprehension, Dr. Wilson stated, adding:

"Available knowledge of the possible toxicity of these substances is fragmentary; particularly is evidence lacking as to chronic toxicity. The employment of these agents in the processing of such basic foods as bread and bakery goods, as well as other foods, such as ice cream, candy and peanut butter, could lead to the ingestion of considerable quantities of these materials of uncertain toxicologic action.

"Unless the complete harmlessness of these agents can be demonstrated beyond reasonable doubt, they should not, in the council's opinion, be employed in basic foods."

A report in the *Federal Register*, an official United States publication, stated that "there was evidence tending to show that some of the polyoxyethylene monostearate (the bread softening compound) prepared for food use contained small amounts of poisonous glycols," Dr. Wilson pointed out.

The American Bakers Association and the American Institute of Baking recently have adopted a statement of principles about the use of such chemicals in bakery products, Dr. Wilson said. Their statement demands that such ingredients be proved completely safe before use.

In addition, the Food and Drug Administration of the federal government recently formulated new federal standards for five different kinds of commonly used breads, and banned the use of certain chemical bread softeners. The rulings have been held in abeyance pending an appeal to the U. S. Court of Appeals by one of the manufacturers of such compounds, according to Dr. Wilson.

Dr. Wilson quoted the *Register* as stating bread softeners were extensively used by bakers shortly after World War II to make their bread appear

fresh and to cut down costs of production, as the chemical compound affectively substituted for the eggs and fats previously used to give softness to bread.

Furthermore, Dr. Wilson added, the chemicals which keep bread appearing fresh make possible the practice of "bread rolling" by unscrupulous route salesmen. "Bread rolling" consists of picking up old bread at one store and delivering it as fresh bread to another, a practice condemned by all reputable route men and employers.

## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of September 21, 1952, to October 20, 1952, inclusive:

Chickenpox .....	15
German Measles .....	51
Gonorrhea .....	13
Measles .....	13
Mumps .....	6
Poliomyelitis .....	12
Ringworm .....	1
Syphilis .....	5
Tuberculosis .....	15
Whooping Cough .....	1

Mrs. Andrews was sitting in the breakfast nook shelling peas when she heard a knock at the back door.

Thinking it was her young son, she called "Here I am, darling."

There was a moment of silence, and then a deep voice boomed, "This is not the regular iceman, ma'am."

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his Patient*

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# The Hospitals . . .

## PIERCE COUNTY

Hospital associates regret that Dr. Charles Waught will be leaving his position as Resident Surgeon at Pierce County Hospital to enter private practice in Puyallup, Washington, on November 1. The surgery department entertained at a coffee hour in honor of Dr. Vaught on October 20. He was presented with a desk set and showered with well wishes for a successful future.

\* \* \*

Miss Norma Johnson, head technician of the laboratory is wearing a beautiful new diamond engagement ring. The lucky man is Clarence Warren Kinsman, Jr., of Tacoma. No definite plans for the wedding have as yet been made.

\* \* \*

Mrs. Ida Sustad of the business office has received word that her daughter, Captain Jeanette Sustad of the United States Marines has arrived at her new station in Frankfurt, Germany. Many of the hospital personnel were privileged to meet Captain Sustad when she visited her mother in Tacoma last June.

\* \* \*

Miss Rose Knecht and Miss Gerrie Ackermann of the laboratory staff attended the Washington State Medical Technologist Seminar at Yakima on October 4.

\* \* \*

Word has been received from Dr. Joseph Pollard, one of last year's interns at Pierce County Hospital, that he is now making his second voyage to South America. Dr. Pollard is Ship Surgeon on the Grace Liner that travels into the interesting southern ports.

\* \* \*

Mr. and Mrs. Wm. R. Nolan (Marmeen Todd) have recently moved into their attractive new home on Day Island.

\* \* \*

Mrs. Florence Rokahr, head of the record department, is attending the convention of the American Medical Record Librarians, which is being held at Wenatchee.

\* \* \*

Miss Betty Goetchius has joined the Surgical staff.

Mr. S. M. Wilson of Billings, Montana, has spent the last month visiting his daughter, Mary Wilson, of the x-ray department.

\* \* \*

Miss Irma Lockhart, laboratory, has returned from a delightful vacation trip to British Columbia.

\* \* \*

Word has been received by Mrs. Leyto, dietitian, that Katherine Miller, now Mrs. John Dimio, of Bellingham and formerly an employee in the dietary department is the mother of a baby girl, born in October.

## TACOMA GENERAL

Mr. William J. Dobyns has been appointed Assistant Director of the Hospital. Announcement was made on October 15, by Mr. Alex Babbit, President of the Hospital.

\* \* \*

Dr. Charles P. Larson has been honored by election to the nine-man Board of Governors of the College of American Pathologists.

\* \* \*

Dr. Charles P. Larson and Dr. M. J. Wicks recently attended the Convention of the College of American Pathologists in Chicago and the Convention of the American Society of Clinical Pathologists in the same city. Dr. Wicks was also present at a meeting of the American Association of Blood Banks which was held in Milwaukee.

\* \* \*

Mrs. Opal Darling, Nurse Anesthetist, has resigned from Tacoma General Hospital to become Director of Memorial Hospital in Sedro Woolley.

\* \* \*

Mrs. Helen Myers, Medical Records Librarian, attended the annual meeting of the Washington State Association of Medical Records Librarians in Wenatchee, on October 22 and 23. Mrs. Myers has been president of the Association for the past year.

\* \* \*

Walter Heath, Mrs. Nina Mae Garner, and John Dobyns were also in Wenatchee on October 22 and 23, attending the annual meeting of the Washington State Hospital Association. Mr. Heath was chairman of a forum on Hospital Affairs, Trends, and Problems.

\* \* \*

Mrs. Eudora Fulkerson, Chief Dietitian, is attending the Convention of the American Dietetic Association in Minneapolis, after which she will enjoy a vacation in California.

\* \* \*

Mrs. Jo Hurd has joined the Dietary Staff as Assistant Administrative Dietitian. She comes from Washington State College, where she held an administrative position.

\* \* \*

Mrs. Lucille McDonald, Surgery Supervisor, is recuperating at home from a recent illness, which will probably keep her away from her duties for another month.

\* \* \*

Student Nurses are busy making preparations for their annual carnival, November 14-15. "Jackson Street Blues" is the theme this year.

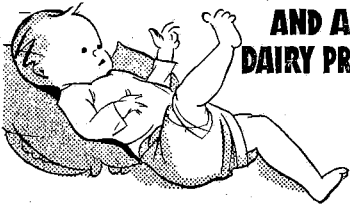
\* \* \*

Captain Mitchell of the S. S. "Myrtlebank" gave a talk in Jackson Hall on Mohammedanism to interested students and Faculty. Officers of the ship are English but the entire crew is either Mohammedan or Hindu, natives of India. One of

(Continued on Page 15)

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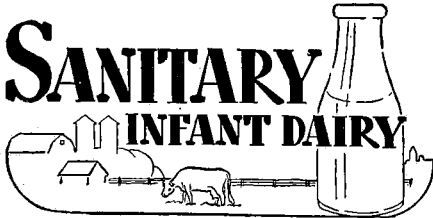


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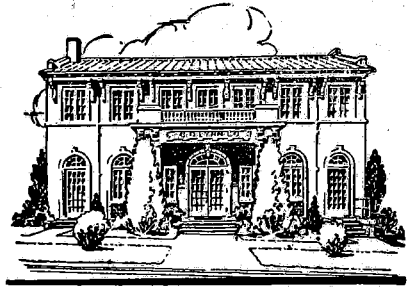


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### Mortuary



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(Continued from Page 13)

the crew members was hospitalized and interest in his religion was aroused because of the laws he had to obey particularly in regard to food. Many of the students visited the ship.

\* \* \*

On November 1, Mrs. Nina Mae Garner leaves Tacoma General Hospital to assume administrative duties with the Shipman Surgical Company in Seattle. For twelve years Mrs. Garner has served as Secretary to the Director, and for the past four years she has been Purchasing Agent as well. For several years during this time she was also Executive Secretary of the Washington State Hospital Association. Mrs. Garner's competence, courtesy, and vivacity will be greatly missed.

### GOOD NEIGHBOR FUND DRIVE

It is reported that the doctors who have contributed to the Good Neighbor Drive have given generously, but there are too many doctors who have not given at all. This is just a reminder that it is not too late to do your part in participating in the ONE drive for the year for the benefit of charitable organizations.

Voter: "Why, I wouldn't vote for you if you were St. Peter himself."

Candidate: "If I were St. Peter, you couldn't vote for me—you wouldn't be in my district."

## ANNOUNCING 24-HOUR PRESCRIPTION SERVICE

### Park-n-Shop Drugs

Dear Doctor: Our new drug store, with complete prescription service, is now open. Four registered pharmacists are on duty at all hours, day or night. Delivery service by taxi is available. Located in the Park-n-Shop Super Market at 98th and Pacific.

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Owner of Parkland Pharmacy

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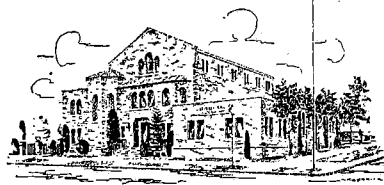
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# TACOMA-PIERCE COUNTY CIVIL DEFENSE

## MEDICAL AND HEALTH SERVICES

### General Instructions and Assignments

*Procedure in Case of Major Disaster In  
Puget Sound Area:*

1. All physicians report to their assigned station without further notice. In case of warning of impending attack, go to nearest designated shelter, unless directly contacted to do otherwise.
2. If the assigned hospital or casualty station is not able to function, each doctor will report to the designated *alternate medical center* without further notification.

### Alternate Medical Center

Tacoma General Hospital.....C.P.S. Field House  
 Doctor's Hospital.....C.P.S. Field House  
 Washington Minor Hospital.....C.P.S. Field House  
 St. Joseph's Hospital.....Bellarmine High School  
 Northern Pacific Hospital.....Bellarmine High School  
 Pierce County Hospital.....Stewart Intermed'te School  
 Indian Hospital.....Stewart Intermediate School

3. If the assigned casualty station is not able to function, the personnel assigned there will report to the hospitals.

All North Stations.....Tacoma General Hospital  
 All South Stations.....St. Joseph's Hospital  
 All East Stations.....Pierce County Hospital

4. For closed hospital staffs, all full-time physicians will immediately report to their respective hospitals following any major casualty.

The Medical Superintendent is in direct charge in each case:

Northern Pacific Hospital  
 Indian Hospital  
 Western State Hospital  
 U. S. Veteran's Hospital, American Lake  
 Mt. View Sanatorium (Tuberculosis)  
 Rainier State School, Buckley

5. Additional staff for closed-staff hospitals:

Northern Pacific Hospital.....X-Ray—Al Sames  
 Indian Hospital.....X-Ray—C. C. McCoy

\* \* \*

## TACOMA GENERAL

Civil Defense Chairman.....Jess Read  
 Assistant Chairmen.....C. Larson, F. Maddison  
 Pathology.....C. Larson, B. Terry  
 X-Ray.....F. Rigos  
 Psychiatry.....M. Kass  
 Urology.....Robert Evert, W. Rosenblatt,  
 Burt Brown

### General Assignments

J. Bohn	G. G. R. Kunz, Sr.
W. Cameron	James Mattson
H. Clay	T. Murphy
D. Dayton	Wm. C. Paul
T. Duerfeldt	C. Quevli
A. Hillis	Wilmot Read
L. Hopkins	Benj. Robertson
D. Johnson	G. M. Whitacre
H. Kahler	F. Williams

### General Surgical Teams

J. Read	W. Niethammer
A. Schultz	G. Kohl
H. Griffin	W. Brown

J. Vadheim  
 R. Lantiere  
 E. Fairbourn

### Burn Teams

E. Banfield	L. Rosenblatt
R. Norton	L. Brigham

### Orthopedic Surgery

W. Goering	W. W. Mattson	W. Peterson
------------	---------------	-------------

### Thoracic Surgery

L. Hoyer	H. Judd	L. Annest
----------	---------	-----------

### Neurosurgery

J. Robson	Miss Virginia Wood
-----------	--------------------

### Anaesthesia

John Bonica	Phil Backup
-------------	-------------

### Residents

### Nurses

Mrs. Lou Hoyer	Mrs. T. Murphy
----------------	----------------

\* \* \*

## PIERCE COUNTY

Civil Defense Chairman.....Scott Jones  
 Assistant Chairmen.....Hollis Smith, John L. Whitaker  
 Pathology.....J. Whitaker  
 X-Ray.....V. E. Crowe  
 Psychiatry.....Wm. Todd  
 Urology.....Clyde Magill, Chas. Pascoe

### General Assignments

H. A. Anderson	W. Hauser
A. Buis	Robert Lane
E. L. Carlsen	A. C. Leslie
C. Dietrich	S. Light
Rodger Dille	Geo. Nace
Elizabeth Drake	D. H. Running
Gerald Geissler	Ralph Schaeffer
Erna Guilfoil	

### General Surgical Teams

S. Herrman	C. Ritchie
W. A. Heaton	Joe Hanson
Dave Hellyer	E. Skinner

R. Gibson

Fay Nace

Leon Thomas

### Burn Team

R. Bond	G. Kittredge
---------	--------------

(Continued on Page 19)

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(Continued from Page 17)

**Orthopedic Surgery**

Dumont Staatz

**Thoracic Team**

W. F. Smith Resident

**Anaesthesia**

Carlos Mena

**Nurses**

**Internes**

The new Mountain View Sanatorium is included as a unit with the Pierce Co. Hospital Civil Defense Plan:

Hollis Smith Helen Smith John Unis

\* \* \*

**ST. JOSEPH'S**

Civil Defense Chairman ..... L. Baskin  
 Assistant Chairmen..... Robert Florence, C. Kemp  
 Pathology ..... C. McColl, R. Vimont  
 X-Ray ..... R. MacRae, J. Flynn  
 Psychiatry ..... R. C. Murphy  
 Urology ..... P. Grenley, G. Moosey

**General Assignment**

G. Delaney	R. Monaghan
J. Egan	E. C. Muir
C. Gray	A. O'Leary
Joseph B. Harris	J. V. Schwind
J. Havlina	Jos. S. Smeall
A. Heaton	Thomas A. Smeall
A. Howe	J. Turner
R. Huff	E. Wahlberg
H. Jonez	J. Ward
P. Kyle	T. R. West

**General Surgical Teams**

L. Hunt	E. Yoder
F. Schwind	G. Moosey
G. Teats	J. Lee

G. Wiseman

A. Larkin

J. Lasby

**Burn Teams**

L. Baskin	W. Rademaker
E. Nelson	C. Kemp

**Orthopedic Surgery**

R. Florence	D. Murray
-------------	-----------

**Thoracic Surgery**

M. L. Johnson	Interne
---------------	---------

**Neurosurgery**

F. Plum

**Anaesthesia**

Howard Pratt	D. Hartsuck
--------------	-------------

**Nurses**

\* \* \*

**DOCTORS AND WASHINGTON MINOR**

Civil Defense Chairmen..... H. Humiston (Urology)  
 Max Thomas, Stevens Sanderson  
 X-Ray ..... B. Harrington  
 Psychiatry ..... J. Shanklin

**Doctors Hospital**

N. E. Magnussen	J. Steele
P. Smith	C. G. Trimble
Miss Mary McDonough (Anaesthesia)	

**General Surgical Team**

G. McBride	G. Willard
L. Scheckner	Mrs. Betty Peerboom

(Anaesthesia)

**Washington Minor Hospital**

K. Staatz	S. Thordarson
W. Ludwig	R. Wright
R. McPhail	Mrs. Louise Anderson
	(Anaesthesia)

\* \* \*

**PUYALLUP GENERAL**

Civil Defense Chairman..... Wm. Burrows  
 Assistant Chairmen..... C. H. Aylen, K. Sturdevant  
 X-Ray ..... J. Jarvis

**General Assignment**

H. Andrews	Tom Clark
E. Blizard	C. Denzler

**General Surgical Team**

K. Sturdevant	W. Hoyt	E. McCabe
<b>General Surgical Team and Orthopedic Team</b>		
C. Schayer	L. Sulkosky	W. Burrows

**Anaesthesia**

(Check with hospital)

**CASUALTY STATIONS**

Buildings	Address	Physicians
Lister Elementary School,	250 Longview—	
	Frederic O. Paine, Bryce Betteridge	
Northern Pacific Beneficial Assn.,	801 E. Wright—	
	Staffed	
Park Avenue Elem. School,	6701 So. Park Ave.—	
	Chas. E. Marshall, Hugh F. Kohler	
Jenny Reed School, So. 37th and Ash—		
	Gerhart A. Drucker, Herbert H. Meier	
Gray Junior High School, 3109 So. 60th—		R. Rich
Stanley Elem. School, 1712 So. 17th—		B. A. Bader
		N. R. Hosie
Jason Lee Jr. High School, 602 No. Sprague—		
	George Kunz, W. R. Govan	
Franklin School, 3202 So. 12th—		F. W. Hennings
		Robert Brooke
Jefferson Elementary, 4302 No. 13th—		
	Govnor Teats, C. Reynolds	
Lowell Elem. School, No. 13th and I—		
	I. A. Druess, S. Sleep	
Central School, 601 So. 8th—		Tom Smeall
		Robert Ferguson
Geiger School, 621 So. Jackson—		Samuel Adams
		C. Lundvick
Tacoma Smelter, Ruston—		Chas. McGill
		E. Hanson
Wainwright Elem. School, Fircrest—		
	Buel L. Sever, Robert Chambers	
Pacific Lutheran College, Parkland—		
	Paul E. Bondo, Miles Parrott	
Fife High School, Fife—		Hugh J. Kalkus
		James Patrick Duffy
Clover Park	Michael Irvin, Wm. Brown	
Dupont	Bernard Ootkin	
Orting	George A. Race	
Eatonville	Donald H. Nevitt	
Gig Harbor	W. W. Bacon, James D. Lambing	



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**SQUIBB**

# AIMS AND ACCOMPLISHMENTS of the WORLD MEDICAL ASSOCIATION

(Excerpt)

Louis H. Bauer, M.D., F.A.C.P.  
Secretary-General

In the minds of many of my colleagues an understandable confusion exists between the World Medical Association (WMA) and the World Health Organization (WHO). To explain the difference very briefly, WHO is an official branch of the United Nations, representing the governments of the world in the field of medicine, whereas WMA represents the practicing physicians and national medical associations of the world. It is a non-governmental organization and its funds are received from membership dues and voluntary contributions.

To clarify further just what the World Medical Association is and does, a little historical background is needed. During World War II, doctors from all over the world frequented the Headquarters of the British Medical Association in London. They formed friendships and discovered that they had common problems. Ways and means were discussed of perpetuating these relationships. Several conferences were held and representatives of national medical associations formed an Organizing Committee. This Committee drafted a Constitution and By-Laws which were submitted to the First General Assembly at Paris. Official organization was affected in that city on September 18, 1947.

## Objectives

The objectives of the Association as outlined in the Constitution are:

1. To promote closer ties among the national medical organizations and among the doctors of the world by personal contact and all other means available.
2. To maintain the honor and protect the interests of the medical profession.
3. To study and report on the professional problems which confront the medical profession in the different countries.
4. To organize an exchange of information on matters of interest to the medical profession.
5. To establish relations with, and to present the views of the medical profession to The World Health Organization, UNESCO and other appropriate bodies.
7. To promote world peace.

The first meeting was devoted to matters of organization: election of officers, and outlining a specific program for the ensuing year.

The Association's unit of membership is the national medical association, which is most representative of the medical profession in the country. Each association is entitled to two delegates, two alternate delegates and as many observers as it desires. These delegates form a General Assembly which meets once a year. So far as possible, the General Assembly meets in a different country each year. The General Assembly determines all policies.

The affairs of the Association are carried on by a Council which is elected by the General Assembly.

The Council consists of the President, President-Elect and Treasurer of the Association and ten members each elected for a term of three years. The Council meets twice a year.

Five General Assemblies have been held, in Paris, Geneva, London, New York and Stockholm. The mid-year meetings of the Council have been held in New York, Madrid and Copenhagen and Geneva. The next General Assembly will be in Athens, October 12-16, 1952.

There are now forty-three nations represented in The World Medical Association.

## Activities

The activities of the Association to date have included the following:

1. A study of medical man power. This study shows the number of doctors in the various countries in relation to the population, and the number of general practitioners and specialists. There is a summary of the organization and functions of the national medical associations, and a discussion of the status of the medical profession. This study is constantly being revised and brought up to date.
2. A survey of medical education in some 26 countries. This compares the standards in effect in these countries. A study of this sort has never been made before. A second survey is now under way and will give the facts about individual medical schools, much along the lines of the report of the Council on Medical Education and Hospitals of the American Medical Association for schools in the United States and Canada.
3. A survey has been made of Postgraduate Medical Education in 28 countries. This includes not only specialist training but graduate training of general practitioner.
4. There has also been a study of Cult Practice in the various countries which covers the rules and regulations governing unauthorized medical practice, the number of cultists and cultist schools.
5. A preliminary study has been made of medical advertising. This and the preceding study are being followed up to make them more complete.
6. A very full survey has been completed in Social Security as it affects Medical Practice. This study will have annual supplements, as it is a rapidly changing field.
7. There are now under way studies on the number and distribution of hospitals and the availability of certain pharmaceuticals and biologicals. These will shortly be ready for publication.
8. A quarterly Bulletin is published in three languages. This Bulletin gives the proceedings of the Association, summaries of its studies and news from all parts of the world.

We have called on all countries to protect freedom in medical research. We have condemned euthanasia.

In 1948 the Association adopted a modification of the Hippocratic Oath, known as the Declaration

(Continued on Page 23)

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(Continued from Page 21)

of Geneva. This was the result of a study of German War Crimes. As will be seen the Declaration, while simpler than the Hippocratic Oath, covers points not mentioned in the latter. The Declaration follows:

#### Declaration of Geneva

*Adopted by the General Assembly of The  
World Medical Association in Geneva,  
September 1948*

At the time of being admitted a Member of the Medical Profession

I solemnly pledge myself to consecrate my life to the service of humanity.

I will give to my teachers the respect and gratitude which is their due;

I will practice my profession with conscience and dignity;

The health of my patient will be my first consideration;

I will respect the secrets which are confided in me;

I will maintain by all means in my power, the honor and the noble traditions of the medical profession;

My colleagues will be my brothers;

I will not permit considerations of religion, nationality, race, party politics or social standing to intervene between my duty and my patient;

I will maintain the utmost respect for human life, from the time of conception; even under threat, I will not use my medical knowledge contrary to the laws of humanity.

I make these promises solemnly, freely and upon my honor.

It is hoped that this will be required by medical schools and licensing bodies as a prerequisite to graduation or license.

A natural sequence to the Declaration was the adoption of an International Code of Medical Ethics, something which heretofore never existed. The Code is brief and is as follows:

#### International Code of Medical Ethics

*Adopted by the Third General Assembly of The  
World Medical Association at London,  
England, October, 1949*

#### Duties of Doctors in General

A doctor must always maintain the highest standards of professional conduct.

A doctor must not allow himself to be influenced merely by motives of urofit.

The following practices are deemed unethical:

- a) Any self advertisement except such as is expressly authorized by the national code of medical ethics.
- b) Taking part in any plan of medical care in which the doctor does not have professional independence.
- c) To receive any money in connection with services rendered to a patient other than the acceptance of a proper professional fee, or to pay any money in the same circumstances without the knowledge of the patient.

Under no circumstances is a doctor permitted to do anything that would weaken the physical or

mental resistance of a human being, except from strictly therapeutic or prophylactic indications imposed in the interest of the patient.

A doctor is advised to use great caution in publishing discoveries. The same applies to methods of treatments whose value is not recognized by the profession.

When a doctor is called upon to give evidence or a certificate he should only state that which he can verify.

#### Duties of Doctors to the Sick.

A doctor must always bear in mind the importance of preserving human life from the time of conception until death.

A doctor owes to his patient complete loyalty and all the resources of his science. Whenever an examination or treatment is beyond his capacity he should summon another doctor who has the necessary ability.

A doctor owes to his patient absolute secrecy on all which has been confided to him or which he knows because of the confidence entrusted to him.

A doctor must give the necessary treatment in emergency, unless he is assured that it can and will be given by others.

#### Duties of Doctors to Each Other

A doctor ought to behave to his colleagues as he would have them behave to him.

A doctor must not entice patients from his colleagues.

A doctor must observe the principles of "The Declaration of Geneva" approved by the World Medical Association.

The Declaration is appended at the end of the Code.

#### United States Committee

When The World Medical Association was first organized it was apparent that it could never be a real functioning organization without sufficient funds. Consequently, we organized a United States Committee which has been incorporated in New York as a non-profit organization. This Committee is underwriting the expenses of maintaining the Secretariat, certain expenses of the Council and the publication of the Bulletin. Membership in this Committee entitles the member to receive all the publications of the Association, including the bulletin. Arrangements are made for members traveling in foreign countries to facilitate their visiting medical schools and hospitals.

#### Members Invited

All interested physicians are invited to identify themselves with world health through the World Medical Association by joining its United States Committee, Inc. Membership brings with it the following:

1. *Certificate of Membership*, an introduction card to 500,000 doctors of 43 nations joined in a world-wide movement for the highest possible level of health.
2. *The World Medical Association Bulletin*, issued quarterly, and all published studies, with data nowhere else available on scientific, economic, educational, and social world trends.

(Continued on Page 25)

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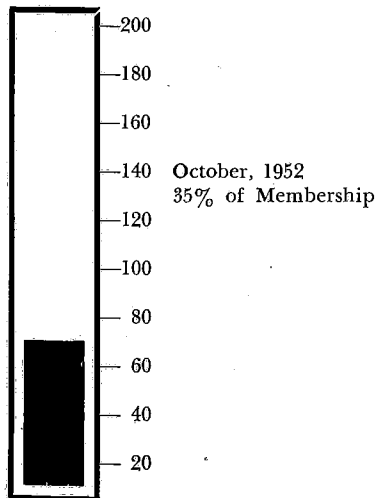
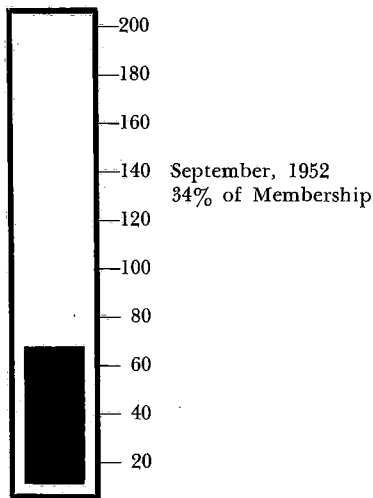
(Continued from Page 23)

3. *Letters of Introduction* to foreign medical associations and their members, facilitating professional contacts when doctors travel abroad.
4. *A share* in defending the interests of practicing physicians before international groups, such as UNESCO and WHO.
5. *The satisfaction* of sharing the advantages of our medical progress with other lands, thus repaying a debt for the inspiration we have drawn from many countries through the generations.

The Secretariat of the Association is located in the Academy of Medicine Building, 2 East 103rd Street, New York 29, N. Y. Dues for individual membership are \$10.00 annually. Information and application blanks are obtainable upon request. *Help bring new hope for the health of humanity!*

## ATTENDANCE THERMOMETERS!

(Active Membership)



## Medical and Health Budget of Federal Security Agency

Congress has appropriated approximately \$1,700,000,000 for all functions of the Federal Security Agency for the fiscal year ending June 30, 1953. The following amounts are now available for important *medical* functions of the Agency:

Office of Vocational Rehabilitation.....	\$ 22,250,000
Food and Drug Administration .....	5,600,000
Children's Bureau .....	28,600,000
Bureau of Public Assistance .....	1,000,000,000

(The following medical programs operate under the Public Health Service):

Tuberculosis Control .....	\$ 8,240,000
Venereal Disease Control .....	9,850,000
Assistance to States—General .....	5,919,750
Engineering, Sanitation and Industrial Hygiene .....	3,700,000
Alaska—Disease and Sanitation .....	
Investigations and Control .....	1,107,500
Building and Facilities, Cincinnati, Ohio .....	300,000
Hospital Construction Grants—	
Obligational Cash .....	75,000,000
Grants for Hospital Construction—	
Obligational Cash .....	59,700,000
Hospital Const. Administrative Expenses .....	1,200,000
Hospitals and Medical Care .....	33,688,000
Foreign Quarantine Service .....	3,065,000
Office of Surgeon General .....	3,170,250
National Institutes of Health .....	59,030,750

(This appropriation for the Institutes will be apportioned as follows):

National Cancer Institute .....	\$17,887,000
Mental Health Institute .....	10,895,000
National Heart Institute .....	12,000,000
Dental Health Institute .....	1,650,000
National Institutes of Health—	
General Funds .....	16,598,750

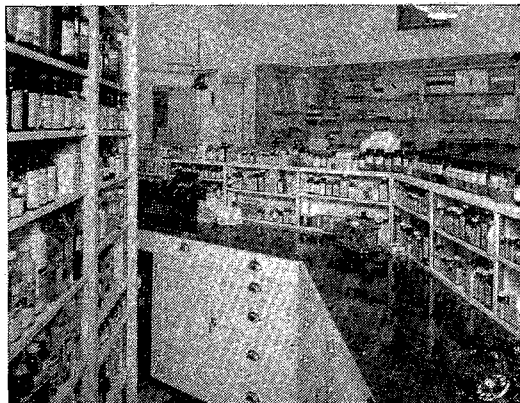
—Special Bulletin  
American Medical Association

## A TIMELY OBJECTIVE

We have no way of knowing exactly how many physicians in the Nation went to the polls in the last Presidential election, but we have heard that doctors in the past have not distinguished themselves in the matter of registration and voting.

Since 1948 the members of the medical profession have shown marked improvement in their voting performance and their interest in public affairs. However, we still have a long way to go. The objective in 1952—a critical year of decision if there ever was one—should be nothing less than a 100 per cent registration and voting record by physicians.

Only about half of the eligible voters in this country exercise their privilege of voting in National elections. It is up to physicians to set an example and lead the way in the effort to improve that record. The more people who use that privilege, the longer it will last. Do your part: first, **Register**; then, **Vote**. And of equal importance, see that your family does the same.



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Under the leadership of these men the "Everything in one place" idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected**.

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## SELECTIVE SERVICE CALLS FOR 371 PHYSICIANS

The Department of Defense has placed an official call on Selective Service to deliver 371 physicians and 200 dentists during October. The Army is to receive 196 physicians and 110 dentists, the remainder going to the Air Force. Navy continues to rely on its still ample, though dwindling, pool of Reserves. October requisition is in addition, of course, to previously announced September call for 355 physicians and 90 dentists.

This latest request by the Pentagon brings to totals of 1,893 and 850, respectively, the numbers of physicians and dentists which Selective Service has been directed to supply since July, 1951, under provisions of doctor-draft act.

Selective Service is taking two steps to ascertain identities of doctors who have neglected to become special registrants as required by Public Law 779: Requesting state advisory groups to check boards of medical and dental examiners on newly issued licenses; sending questionnaires to hospitals which are asked to supply, among other data, information as to whether interns, residents and fellows are special registrants and whether they are members of Reserve.

**Childish Game**—One at which your wife beats you.  
—Dallas Medical Journal.

The young wife had just given birth to her first baby, and the doctor went out to give the anxious husband the good news.

"What did you want," asked the doctor, "a boy or a girl?"

"A boy," answered the young father.

The doctor looked disappointed. "I'm very sorry," he said, "but it's a girl this time."

"Well, I'm not too disappointed," said the new parent. "A girl was my second choice."

## Karen Rynning

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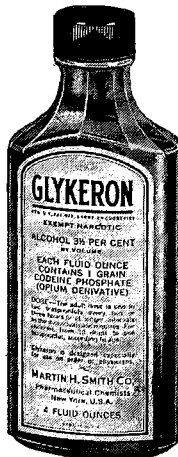
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## PERMANENT 'RUSK COMMITTEE' PROPOSED

The Health Resources Advisory Committee (Rusk Committee) has recommended that it (or a similar group,) be continued on a permanent basis. Its summary report says: "It has become increasingly apparent . . . that some mechanism similar to the Committee should be continued not only during this period of mobilization but as a permanent statute of the federal government. The Committee believes it is vital that . . . at a sufficiently high organizational level to make its work effective there must be a coordinating body in the health fields if full utilization for both civilian and military needs is to be made of the health potentials of our nation."

The Committee, organized in 1950, now has three roles, (a) advising Office of Defense Mobilization on all health matters, (b) functioning as the National Advisory Committee to Selective Service, and (c) advising Defense Department on call up of medical reserves by balancing civilian against military needs for physicians and other personnel in the health fields.

The Committee commended the Armed Services for providing the best military medical care in history, while at the same time reducing the physician ratio from the World War II peak of six per 1,000 troops to the current 3.7. This means, the Committee explains, that 5,000 physicians who might be in military service have remained in civilian practice. The Defense Department saving resulting from the lower ratio was estimated at 40-50 million dollars.

## MORE RADIOLOGISTS THAN EVER BEFORE

There are more radiologists in practice at the present time than ever before—one to every 42,000 persons as compared with one to every 122,000 persons 20 years ago—according to a recent report from the American College of Radiology.

The report, based on results of a survey of radiological services made by the Professional Bureau of the organization, reveals also that in every section of the country chest studies account for about one-third of all x-ray examinations.

—From Bulletin National

—From Bulletin Nat'l. Tuberculosis Assn.

A young businessman who was a deacon in his local church, was in New York on business. He was to purchase a new sign to be hung in front of the church. Before he left home, he copied the motto and the dimensions. When he arrived in New York, he discovered that he had left the paper at home.

He wired his wife: "Send motto and dimensions." An hour later the reply came in, and when the girl, who had just come on duty, read the telegram she fainted.

The message read: "Unto Us a Child Is Born 6 feet long and 2 feet wide."

## Whirlwind Drive for Education Foundation

L. D. McGuire is an Omaha physician who does things in whirlwind fashion. Ever since he was appointed chairman of the American Medical Education Foundation's fund-raising committee for the Nebraska State Medical Association, things have been happening with lightning rapidity.

First, Dr. McGuire systematically organized working groups to cover the entire state.

Then, after contributing \$1,000 personally to the foundation, which was set up to help the hard-pressed medical schools throughout the country, he decided to call on his working committees and make personal calls on physicians throughout the state, enlisting their financial help in the annual drive for the foundation.

Dr. McGuire, a graduate of Creighton University in Omaha, personally contacted all of the Creighton men.

Then he took what is most easily termed a month's "vacation" from his office, rented an airplane at his own expense and contacted doctors and the working groups in his state. The result: ninety-four contributions, totaling \$17,775, or an average donation of \$157 in one month's time. That is the amount which Dr. McGuire himself raised. His biggest check was for \$1,600; his smallest for \$10. One doctor he contacted pledged \$25 a month for the next three years.

Certainly a job well done!

—*AMA Secretary's Letter.*

## TEST CONTACT LENSES

The Army Medical Research Laboratory at Fort Knox, Ky., is conducting tests to determine whether contact lenses will enable riflemen, tank drivers, gunners and other fighting soldiers to lay aside hazardous, old-style spectacles while in combat. Experience during World War II and in Korea has shown that glasses are easily broken or lost under field conditions. Reflection sometimes makes the wearer an attractive target for small arms fire.

Gunners, who need close contact with their gun-sights to fire accurately, have complained that glasses are a handicap. Tankers have reported that their glasses were shaken off and smashed during rough going.

As a result, Maj. James L. McGraw and a picked team of Army medical scientists and soldiers are intensifying their tests of four principal types of contact lenses which may replace ordinary spectacles.

—*Army-Navy-Air Force Journal, Mar. 22, 1952.*

The Pi Phi greeted her boy friend with, "Notice anything different about me?"

"New dress?"

"No."

"New shoes?"

"No. Something else."

"I give up."

"I'm wearing a gas mask."

## RECENT COURT RULINGS

By Joseph C. Stacey

If you put a nickel into a slot machine and fail to get any money back, you have not gambled.

—*Justice G. P. Reddell, Texas City, Texas.*

\* \* \*

When a man, with a pretty wife, refuses to hold her on his lap, that's ground for divorce.

—*Superior Judge Frank G. Swain, Chicago.*

\* \* \*

A married woman is not responsible for a misdemeanor while acting on the command of her husband.—*Appellate Court of Los Angeles.*

\* \* \*

A person cannot be legally arrested for "drunken driving" if and when that driving is done on private property.—*Traffic Judge George Murphy, Detroit.*

\* \* \*

It is definitely illegal, constituting a "breach of orderly language," to belittle a woman's housekeeping.—*Judge Lyman K. Clark, Ayers, Massachusetts.*

\* \* \*

There is no law to compel prompt service, or any service at all, for that matter, in a restaurant, cafe, or a lunchroom.—*Georgia State Court of Appeals.*

\* \* \*

It is perfectly legal for a woman to search her husband's pockets.

—*New Mexico State Court of Appeals.*

\* \* \*

An engagement ring becomes a woman's property only after marriage. Before marriage, it is a symbol of truth—and if the truth is broken, the ring must be returned to the donor.—*Superior Judge Leo Freund, Los Angeles.*

—*From Summit County Medical Society Bulletin.*

## DAR Opposes Hospitalization For the Aged, Scores Socialized Medicine

The National Society, Daughters of the American Revolution, holding its annual convention in Washington, went on record against free hospitalization of the aged. Bills to carry out the program, originally proposed by FSA Administrator Oscar Ewing, have been introduced in the Senate and House. The DAR also reaffirmed its "staunch opposition" to national compulsory health insurance, "by whatever name." The resolution noted the U. S. has the highest standards of health, medical care and scientific medical facilities of any country.

—*From Dauphin Medical Academician.*

Awful predicament.—A man got off a train one day, green in the face. A friend who met him asked what was wrong. "Train sickness," said the traveler. "I'm always deathly sick when I ride backwards on a train."

"Why didn't you ask the man sitting opposite you to change with you?" asked the friend.

"I thought of that," said the traveler, "but there wasn't anybody there."

## IF IT'S GOOD FOR THE DOCTOR SHAW CAN SUPPLY IT

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club

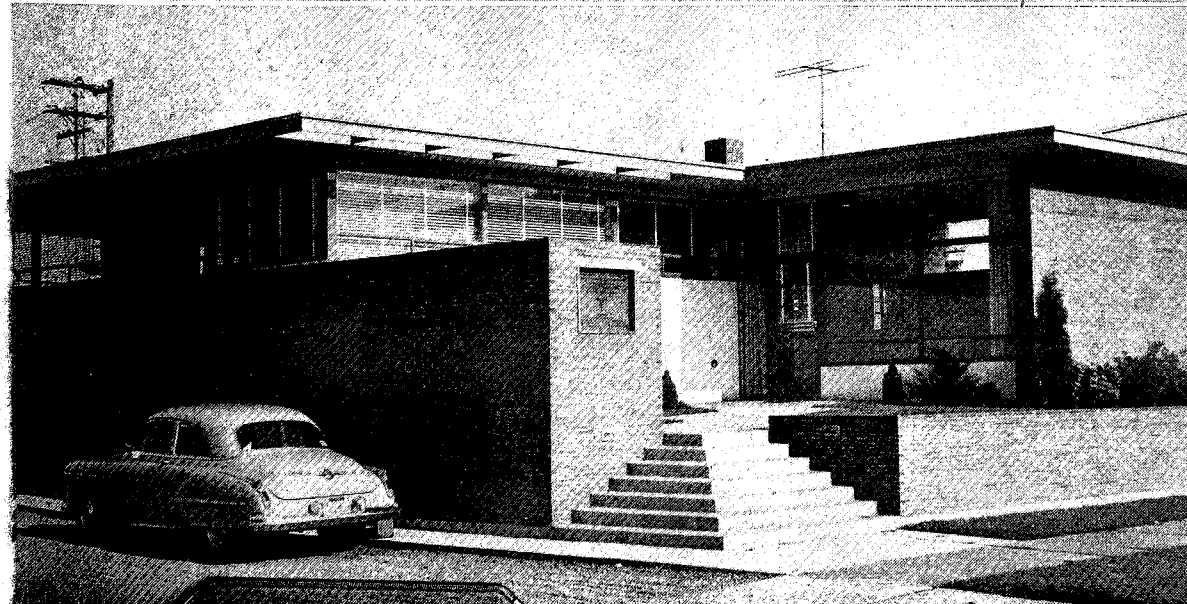
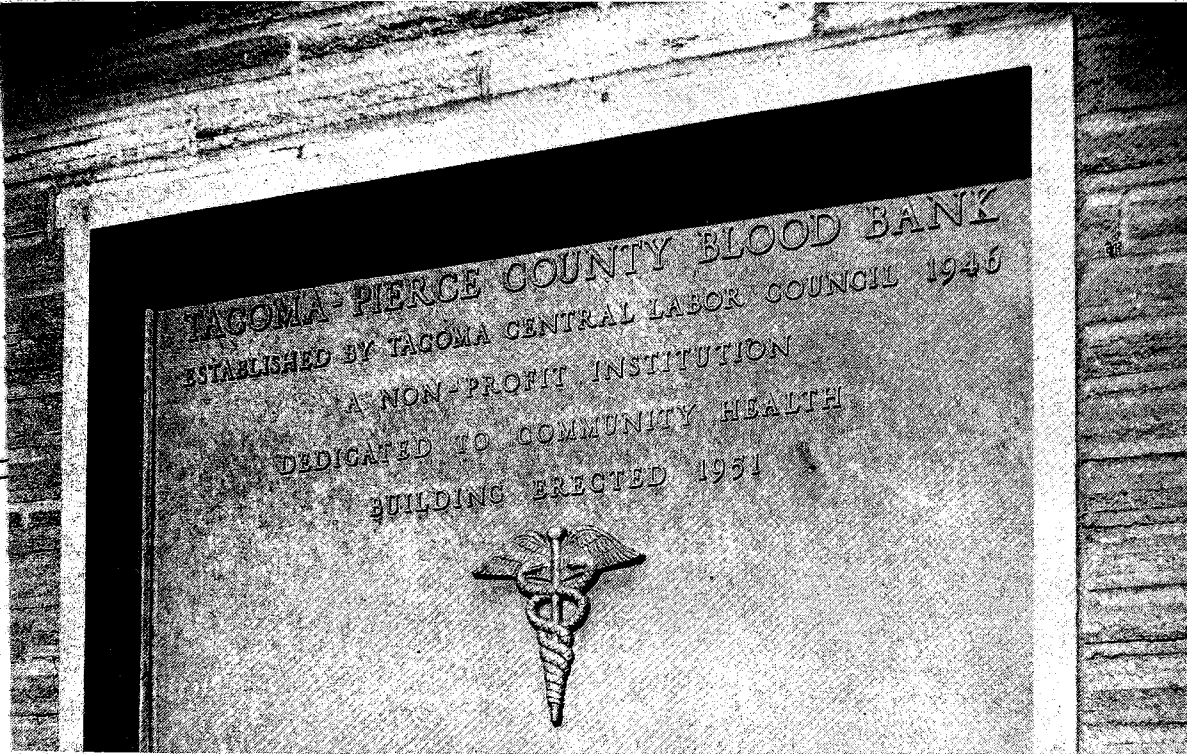


*The* **BULLETIN** *of the*  
**PIERCE COUNTY MEDICAL SOCIETY**

VOL. XXIII—No. 4

TACOMA, WASH.

DECEMBER - 1952



# Pierce County Medical Society

1952

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 President-Elect ..... Miles Parrott  
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 Executive Secretary ..... Katherine Miller

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(Admiral, U. S. Navy, retired)	

### Bulletin Staff

Editor	Homer W. Humiston
Managing Editor	Katherine Miller
Auxiliary News Editor	Mrs. Horace A. Anderson

# Program

Tuesday, December 9, 1952

8:15 p. m.

DR. JAMES W. KIRKWOOD,

Olympia, Washington

Chief, Section of Field Services

"Are You a Problem Parent?"

"Do You Have a Problem Child?"

(Please see note on Page 6  
for further details)

## NOTICE

Check back page of Bulletin for calendar  
of special meetings

\*Cover photograph of the Tacoma Narrows Bridge of 1950 through the courtesy of Harry Boersig—Aero Marine Photo Service.



### A KINDLY BREEZE

*The story tells, an angel came  
And brought to Mary meek and mild,  
The Promise of a blessed fame,  
To bear for all a Heavenly Child.  
From that fair day a breeze stayed near,  
And give the wondering Mary cheer.*


*Out from the land of Gallilee,  
Not knowing what there might betide,  
But answering the King's decree,  
She rode with Joseph at her side.  
A breeze that would not lag nor stray,  
Kept close to Mary all the way.*

*The winding, stony road was long,  
An open sun beat down on them;  
Until at dusk they joined a throng  
Within the gates of Bethlehem.  
A breeze caressed her tired face,  
And lingered near her resting place.*

*That night on a manger bed of hay,  
The Christ was born and Mary smiled;  
The pain would pass but joy would stay,  
This Babe, her Son, the Promised Child.  
The breeze brought her a chorus then,  
Of "Peace on Earth, good will to men."*

*Now travelers from Judea land,  
This Christmas story often bring,  
And tell, that you may understand,  
Why Mothers hear the angels sing.  
That self same breeze brings carols gay,  
When babes are born on Christmas Day.*

—Lewis Hopkins, M.D.



*Prejudice-Free Study Points the Way  
to Greater Comfort  
for the Menopausal Patient*

Three groups of investigators were supplied with preparations labeled only by number. Although identical in appearance, the tablets had the following compositions:

AE-1—Diethylstilbestrol, 0.25 mg.

AE-2—Diethylstilbestrol, 0.25 mg., plus  
methyltestosterone, 5 mg.

AE-3—Methyltestosterone, 5 mg.

AE-4—Placebo

Investigators were told which was the placebo, but identities of the first three were not disclosed until the studies and reports had been completed. Thus, there could be no possible bias on the part of either physician or patient.

Clinicians found that the addition of androgen to estrogen (1) often affords an increased feeling of well-being, (2) tends to avert mild but unpleasant side-effects such as breast turgidity and pelvic congestion, and (3) usually prevents the complication of uterine bleeding. *Preference for AE-2 ('Tylosterone') was expressed by two-thirds of the patients.*

Full details of these studies are available. May we send you literature or samples?

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*Helps avert side-effects of  
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TABLETS

**Tylosterone**

(DIETHYLSTILBESTROL AND METHYLTESTOSTERONE, LILLY)

## ***Editorially Speaking . . .***

The following news article was found in "THE SPOKESMAN-REVIEW" of Saturday, November 22, 1952. It might be mentioned that this venerable Spokane newspaper was describing the proceedings of a meeting in what we often refer to as "the Land of the Free:"

### **ODD BASIN LAND LAWS EXPLAINED**

"Peculiarities of the law which regulates uses of land in the area irrigated in the Columbia river basin were explained yesterday by Paul LaMarge, Spokane attorney.

"LaMarge addressed the Spokane Bar Association at the Desert hotel. He explained how units of land in the irrigated areas are allotted in accordance with the type of soil. The units are plotted to support the average family with the smallest having the most fertile soil and the largest containing low fertility grazing land.

"The land in the irrigated areas may not be sold for five years after the irrigation water is turned on and the buyer must agree to the terms set down by the reclamation bureau. LaMarge said nonconformity with the agreements can result in nondelivery of water to a farm.

"Under terms of the reclamation agreement, the land must be sold for a price not higher than an appraisal set by the reclamation bureau. If an owner does not agree with the appraisal figure or if he has added value to the land in the form of improvements, he may request a reappraisal by the bureau.

"LaMarge said the law is the only one of its kind in the United States."

How would you like to have some bureaucrat shut your water off?

HOMER W. HUMISTON, M. D.

## DR. JAMES W. KIRKWOOD

We love Dr. James Kirkwood. Not because he is one of the most scintillating speakers in the Pacific Northwest (names are on file in the office of doctors who have heard him speak and who are most enthusiastic about him), but because on his arrival here last spring from Los Angeles, where he has spent most of his life, he threw us into a loop by saying that he loved the Puget Sound Country; he loved the weather, he loved the scenery and the people, and he was very happy to be located in this wonderful country.

Rank heresay coming from a resident of Los Angeles, but we loved him for it and we are also happy that he is here.

## CHICAGO MEETING

March 3rd, 1953, will mark the opening day of the 9th annual Clinical Conference of the Chicago Medical Society. This Conference is designed to be of interest to both the specialist and the general practitioner. It will be held at the Palmer House in Chicago and will present a variety of subjects setting forth the latest information available to the medical profession.

Conducting the Conference will be a faculty ranging from 35 to 40 outstanding speakers each offering a presentation relating to their specialty. In addition another group will give daily teaching demonstrations which will include the presentation of patients. They will emphasize the actual

technique to be employed in handling orthopedic, medical and pediatric problems. In addition to holding these demonstrations each day, there will be a panel discussion at a round table luncheon presenting topics of timely interest.

Our technical exhibitors are eager to present their latest advances in the field of medicine which will enable the doctor of today to treat his patient most effectively. The scientific exhibitors will demonstrate the handicraft and professional worthiness of leaders of the profession and they will be found to be most worthy of study.

This is an activity of the Chicago Medical Society for its membership to whom no fee is charged. Those who are not members of the Chicago Medical Society are asked to register for the four days at the nominal fee of \$5.00.

This is the time to set up your arrangements so these four days in March will permit you to come to the Palmer House and not only visit with physicians from all sections of the United States and Canada but likewise hear and see the latest developments in modern medicine.

"What was your Sunday School lesson about?" asked the mother as her small daughter returned from church.

"About a man named Solomon," the child answered.

"And what did you learn about Solomon?"

"The teacher said he had 300 wives and 700 cucumber vines."

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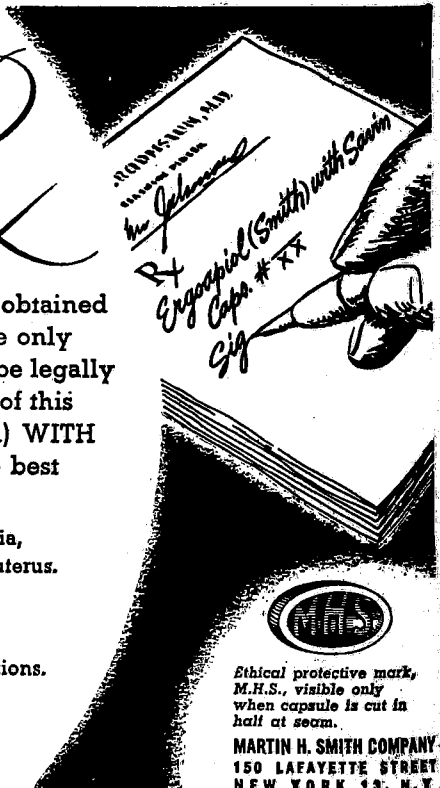
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# WOMAN'S AUXILIARY

## *To The Pierce County Medical Society*

Since there will be no meeting in December we would like to remind you again about the rummage sale on December 4, 5 and 6 at 1516 Jefferson. Grace Hauser was unable to be co-chairman of the sale so Dotty Read was asked to work with Cecilia Ootkin as co-chairman. The Nurses' Association has been very cooperative in helping us with this project, the proceeds of which will go into our student nurse recruitment fund. Several nurses are helping to collect rummage, and if you still haven't contributed and wish to do so the numbers to call are LA. 7161 and BR. 3400.

\* \* \*

The student nurse recruitment program is in full swing under the chairmanship of Ruth Murphy. The committee met recently to organize a Future Nurses Club to interest Junior High and High School students in the nursing profession. They will help advise and prepare students for their entrance into an accredited nursing school. Charter members will be the Franklin Pierce students whose new school will open about January 1st. Members attending the meeting were Mesdames Carl Scheyer, George Delaney, Haskell Maier, John Bonica, Arthur O'Leary, Treacy Duerfeldt, Arnold Herrmann, Hugh Larkin, Thomas Murphy, and Everett Nelson; also attending were Miss Forsberg of Tacoma General Hospital, and Miss Frederick, the Public Health nurse from Lincoln High School.

\* \* \*

Serving at the blood bank this month were Mesdames John Arneson, Rose Griffin, Edith Trimble, Jeanne Judd, Hilda Lantiere, Ruth Murphy, and Connie Hellyer.

\* \* \*

A hand of praise goes to Mrs. Albertus Buis who has served continuously since 1946 as a volunteer worker for the Pierce County Medical Society at the Cancer Detection Center.

\* \* \*

Did you know that . . . the Pierce County Medical Society Auxiliary has contributed \$50.00 to the American Medical Education foundation?

\* \* \*

Mary Steele who is in charge of the Speaker's Bureau sent us an interesting letter about the work that they were doing. Drs. Brigham, Norton and Hopkins have made several talks to various organizations, and there have been numerous requests for a showing of the film, "Human Growth." Congratulations to Mary Steele for the fine job that she is doing, and to the doctors who have been so cooperative in giving of their valuable time.

\* \* \*

Ed and Kay Anderson have a new daughter born about two weeks ago.

\* \* \*

### OFFICERS FOR 1952-1953

President .....	Mrs. Everett Nelson
President Elect .....	Mrs. S. R. Lantiere
First Vice President.....	Mrs. George S. Kittridge
Second Vice President.....	Mrs. Robert Gibson
Recording Secretary.....	Mrs. Robert Florence
Corresponding Secretary.....	Mrs. W. Howard Pratt
Treasurer .....	Mrs. Eugene Hanson

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Membership .....	Mrs. Fay Nace
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Social .....	Mrs. Thomas A. Smeall
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Blood Bank .....	Mrs. David Hellyer
Legislative .....	Mrs. Joseph B. Jarvis
Today's Health .....	Mrs. Elmer W. Wahlberg
Public Relations .....	Mrs. George A. Delaney
National Bulletin .....	Mrs. Robert H. Gibson
Civil Defense .....	Mrs. Murray L. Johnson

Gypsy Hoyer and her daughter Mary have just returned from a two-week visit with friends in Rochester, Minnesota.

\* \* \*

Several of our art-minded members belong to a charcoal sketching class: Kay Herrmann, Edith Magill, Ruth Johnson, Eileen Rademaker, Merle Herrmann, and Mamie Reynolds. Wonder what they do with all the pictures they take home.

\* \* \*

A Happy Holiday season to everyone !!!

## WHAT IS FREEDOM?

Freedom is the man at the lathe or at the desk doing the job he likes to do, and speaking up for himself. It is a man in the pulpit, or on the corner, speaking his mind. It is a man putting in his garden in the evening and stopping to talk with his neighbor over the fence.

It is the unafraid faces of men and women and children at the beach, or looking out of the car window speeding along the four lane highway.

It is a man saying, "Howdy stranger," without looking cautiously over his shoulder. It is the people of the Country making up their own minds. It is the soprano singing the Star Spangled Banner off key meaning every word of it.

Freedom is the air you breathe and the sweat you sweat. It is you, and a hundred and fifty million people like you with their chins up daring anybody to take it away from you.

—Bulletin Winnebago Co. Medical Society.

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## ACCIDENTS—GREATEST THREAT TO SCHOOL CHILDREN

Accidents in our country claim about 6,000 lives annually among children at ages 5 to 14 years. This is nearly twice the total of young lives taken by leukemia and other cancers, acute poliomyelitis, and pneumonia and influenza. Accidents now account for fully one third of all deaths at the elementary school ages, whereas about 15 years ago the proportion was only one-fifth. This relative increase reflects the more rapid gains achieved in the conquest of disease than in the control of accidents. While the rate from fatal injuries at the school ages fell 30 per cent between 1933-1934 and 1948-1949, the mortality from disease dropped 65 percent. Now more than ever before, accidents constitute the greatest threat to the life of American youngsters.

An insight into how and where school-age boys and girls lose their lives in mishaps is provided by the claim records of children insured in the Industrial Department of the Metropolitan Insurance Company who died in accidents in 1951. They are mostly urban children, but their experience, as the following paragraphs will indicate, affords a good picture of the situation among children in the general population of the United States.

Mishaps involving motor vehicles are the leading cause of accidental death at the school ages, accounting for 39 percent of all fatal injuries last year. Next in order is drowning, with 30 percent of the total. Together, these two types of accidents contributed well over two-thirds of the 476 fatalities under review. Burns and conflagrations, third in rank, account for 9 percent of the deaths, and firearm accidents for nearly 5 percent.

The relative importance of the various types of accidents in this study is determined largely by the experience among boys, who contributed four-fifths of all the deaths. Among girls of school age, motor vehicle mishaps accounted for one-half of the fatalities, a higher proportion than among boys. Burns and conflagrations, ranking second, contributed about one-fifth of the fatal injuries among girls, followed closely by drownings.

Of the 186 children killed by motor vehicles in this insurance experience, at least 145 were hit or run over; only a relatively small proportion of the victims were passengers of automobiles at the time of the accident. The details available from the

death claim reports point up the hazards that youngsters face in using streets and highways as thoroughfares or play areas. Twenty-two of the fatally injured children are known to have been hit or run over when they ran into or played on streets or highways. About the same number were killed while crossing thoroughfares; among girls hit or run over by motor vehicle, crossing accidents led all others. Youngsters—virtually all boys—struck while riding bicycles accounted for the loss of 30 lives in this study. Some of these fatalities occurred through the carelessness of drivers of automobiles or trucks, but a number resulted from the lack of caution and hazardous practices of cyclists. Motor vehicles fatally injured six children coasting on sleds.

Nine-tenths of the 144 drownings were among boys, reflecting their greater tendency to play away from home and their more venturesome inclinations. It may be seen that 24 of the victims fell into rivers, creeks, or canals; some were playing alongside these bodies of water, while others slipped into the water while fishing. Wading, swimming, and accidents involving small boats or rafts took 20 or more lives. Playing on thin ice accounted for 11 of the drownings.

More than half of the 45 children who died from burns and conflagrations were trapped in burning buildings. The remainder were attributed to a variety of circumstances, such as pouring flammable liquids on bonfires, playing around oil drums or oil tanks which exploded, or clothing ignited by stoves or some other heating apparatus.

All of the 23 fatalities from firearms were among boys. Hunting and shooting at logs or other outdoor targets took eight lives. Playing with guns, including one who was playing "Russian roulette," claimed seven victims in this insurance experience. As usual, "thinking the gun wasn't loaded" figured in the record.

Falls accounted for 17 deaths, three of them among girls. Contributing to the total were falls from a roof, a tree, a fence, and a slide. Injuries in diving, scuffling on ice, and racing on roller skates in the street also took several lives; only 2 of the 17 fatalities involved stairs.

Several additional means of injury merit at least brief mention. Hanging or strangulation while playing with ropes, belts, and the like caused the loss of eight lives; one of the victims was strangled while playing cowboy with a slip-knotted rope. Seven youngsters of school age were struck by trains while walking on tracks or playing on a railroad right-of-way or between trains. Electric current killed four children while they were playing near a third rail, an electric transmission tower, or an electrified fence.

This study clearly shows the need for intensification of safety education both in the schoolroom and in the home. Particular emphasis must be put on reducing motor vehicle accidents and fatalities arising out of recreational activities. Accidents—by far the leading cause of death among children—are, for the most part, preventable.

—Statistical Bulletin Metropolitan Life Inc. Co.

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# The Hospitals . . .

## TACOMA GENERAL

Dr. Michael Delich has joined the Interne Staff here at Tacoma General. He is a graduate of the Medical Faculty, University of Zagreb, Jugoslavia. Recently he has lived in Auckland, New Zealand, and is in Tacoma under the Exchange Visitor Program. He is a classmate and long-time friend of Dr. Joseph Veich, Resident Psychiatrist at Western State Hospital.

\* \* \*

On Thanksgiving Day, Dr. Charles P. Larson left for Washington, D. C., where he was a participant in a course in Forensic Medicine, part of the Armed Forces Institute of Pathology.

\* \* \*

Much admired around these parts is the very swish new Oldsmobile being driven by Dr. Annest.

\* \* \*

Tacoma General Dietitians who attended the Convention of the Washington State Dietetic Association in Seattle on November 7 and 8 are: Mrs. Eudora Fulkerson, Miss Dorothea Jordan, Miss Nedra Betty, and Mrs. Ethel Guilford.

\* \* \*

Mrs. Eudora Fulkerson, Tacoma General's Chief Dietitian, was Washington State delegate to the national convention of the American Dietetic Association, which was held in Minneapolis, Minn.

\* \* \*

Urban TeVrucht, popular 3-11 laboratory technician for the past three years, is now working downtown in the Tacoma Medical Laboratory.

\* \* \*

Six native Alaskan girls are receiving training in obstetrics in our Maternity Department. They are students from the Mt. Edgumbe Practical Nurse School, which is on Mt. Edgumbe Island across the channel from Sitka. This is the first time out of Alaska for all of the girls. They will be here eight weeks, and are living at the Tacoma Indian Hospital. They are particularly enjoying riding escalators and eating ice cream sundaes.

\* \* \*

Dr. John Bonica enjoyed a few weeks vacation in New York with his family after attending the Convention of the American Society of Anesthesiologists.

\* \* \*

Miss Helen Mar Jewett, Principal of the School of Nursing, enjoyed a Thanksgiving vacation in Long Beach, California, with her brother.

Newcomer to the staff of Anesthesiologists is Dr. Jocelyn Mandelstam, a Londoner, who has come to Tacoma from Atlanta, Georgia, where she was a preceptor in Anesthesiology at St. Joseph's Infirmary.

\* \* \*

The McGill Alumni Association of which Dr. Larson is an active member had a recent successful meeting at the Top of the Ocean. McGill graduates from all parts of the state attended. Besides Dr.

Larson, Tacoma doctors who were present are: Drs. Huff, Brooke, Fairbourn, Sheppard, and Bede.

\* \* \*

Tacoma General extends congratulations to Dr. and Mrs. Harold Johnston on the birth of a daughter, Susan Hart.

\* \* \*

The carnival of the School of Nursing was a social and financial success. Money goes for the student annual, the WHITE CAP. The student scholarship fund is benefitted by the sale of the bedspread and radio.

\* \* \*

In the interest of recruitment Miss Leona Forsberg of the Faculty and Miss Joyce Mattsen and Miss Lois Powell, students, taught a class in mathematics at Stadium High School. The point was to show the value of math to the nurse. Miss Forsberg, Miss Leona Nelson and Miss Lolita Lowell, recently went to South Bend where they showed the film "Girls in White" at the South Bend High School, and discussed with students the opportunities in a nursing career.

\* \* \*

At the November meeting of the Medical Staff Dr. Charles Arnold was welcomed back to active membership, and Dr. Charles Bogue was welcomed as a new member.

## REPORT OF CONTAGIOUS DISEASES

The following is a report on the number of contagious diseases reported in Tacoma and Pierce County for the period of October 21, 1952, to November 20, 1952, inclusive:

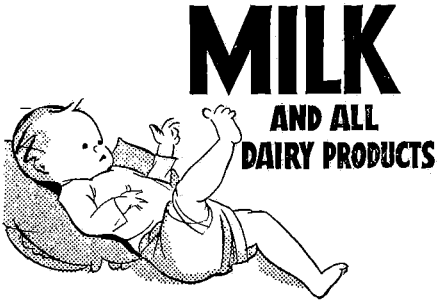
Chickenpox .....	25
German Measles .....	4
Gonorrhoea .....	19
Hepatitis .....	1
Measles .....	11
Meningitis .....	2
Mumps .....	25
Poliomyelitis .....	14
Scarlet Fever .....	11
Shigellosis .....	3
Syphilis .....	4
Tuberculosis .....	17

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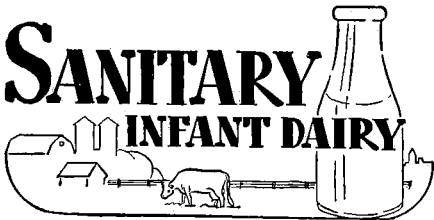


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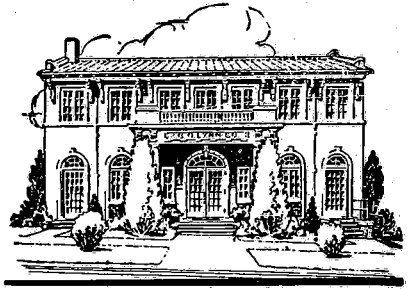


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## ARMY MSC HELICOPTER EVACUATION SERVICE 'OFFICIALLY INTEGRATED'

Helicopters equipped as ambulances, which have been evacuating combat casualties since the early days of fighting in Korea, now are being recognized officially as an integral part of the Army Medical Service organization.

The Army announces that 34-man helicopter units will be assembled and trained as distinct organizations. Each unit will include five two-rotor utility helicopters capable of carrying three litter patients or four ambulatory patients, as well as a medical attendant and pilot.

Pilots will be Medical Service Corps lieutenants specially trained in basic aviation and helicopter operations at the Army's aviation flight training center, Fort Sill, Okla., where the first training course is now being conducted. Other personnel for each unit will include a MSC captain as commanding officer, an operations officer and 21 enlisted technicians.

The first unit is being activated at the MSC school at Fort Sam Houston, Texas, where it will be used for training purposes. Other units will be formed as soon as personnel, equipment and training facilities become available.

Have you heard about the guy who finally got rid of B.O. and then found out people did not like him anyway?

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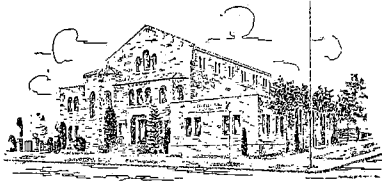
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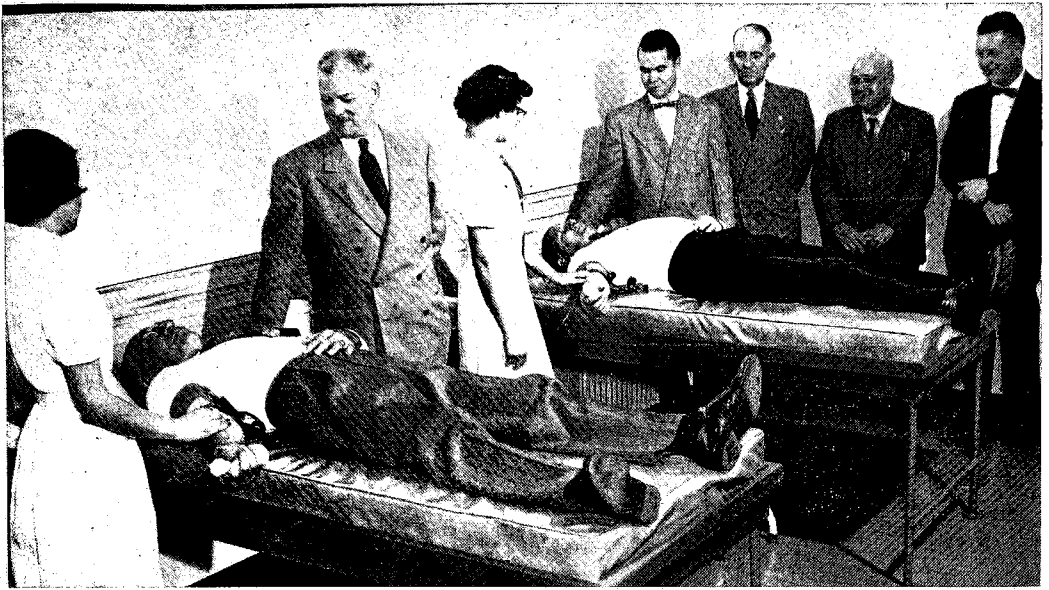
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## HISTORY OF THE TACOMA-PIERCE COUNTY BLOOD BANK

By H. S. McILVAIGH, *Member, Board of Trustees*

On July 23, 1946, the Tacoma-Pierce County Blood Bank opened its doors at 728½ St. Helens Avenue and from the beginning it has proved its value as a community project.

The credit for establishing the Blood Bank rightfully belongs to a number of medical doctors who realized the pressing need for such an institution in Pierce County and were ready and eager to give of their time and ability toward its creation.

After having failed to arouse sufficient interest among other groups to sponsor and finance a blood bank, these doctors appealed to the Tacoma Central Labor Council for support and cooperation to make such a project a reality. The response to their appeal was enthusiastic and the Central Labor Council, with its affiliated unions, agreed to support the effort financially.

A non-profit corporation was formed under the laws of the State of Washington, and by-laws to govern its operation were adopted which placed the management and welfare of the Blood Bank in the hands of a Board of Trustees consisting of three medical doctors and four members of the Central Labor Council.

Under the original financial plan adopted by the Central Labor Council, \$30,000.00 was raised and the Blood Bank became a going concern in less than one year after its doors were opened.

The need for larger quarters became apparent almost immediately after the institution was founded, and a building fund was soon established with the view to erecting a new building or purchasing property that could be converted to the needs of a blood bank operation.

Finally, in December 1950, a lot was purchased at 1211 South 12th Street, at the Tacoma Medical

Center, and plans for a new building were approved. The building was completed for occupancy in September 1951 at a total cost—lot and building—of approximately \$80,000.00. It is a modern, handsome structure, equipped to handle all demands on the Blood Bank for many years.

During the construction of the new building it was necessary to borrow enough money to complete the structure and a loan bearing no interest was obtained from the Central Labor Council in the amount of \$44,500.00. It was understood and agreed that this loan would be paid off at the rate of not less than \$425.00 a month. More than one-half the already has been liquidated.

The Tacoma-Pierce County Blood Bank is not a labor institution. It belongs to the whole community and is dedicated to community health. Its services are available to all who need them. It is operated on a non-profit basis and only those directly connected with its operation receive any of its income. There is no capital stock, therefore no dividends are paid to anyone. M. J. Wicks, M.D., is the Director and is in charge of its operation.

The Board of Trustees, the members of which serve without compensation, consists of the following individuals: Burton A. Brown, M.D., Eugene W. Hanson, M.D., Chas. P. Larson, M.D., H. J. Davelaar, R. L. Clevenger, Jr., H. S. McIlvaigh and Kenneth Gordon. The Tacoma Central Labor Council is proud to have enjoyed a small part in the establishment of this vital institution.

## TACOMA-PIERCE COUNTY BLOOD BANK AND THE DOCTORS

By BURTON A. BROWN, M.D.

Doctors, today, fully appreciate the beneficent and indispensable role of blood banks in their

(Continued on Page 19)

DEAR DOCTOR:

We welcome you to our new, modern prescription department. Our prescription service commands the most prominent spot in the center of our new large store. We believe prescriptions are the most important part of our business.

(Signed) HAROLD W. MEYER

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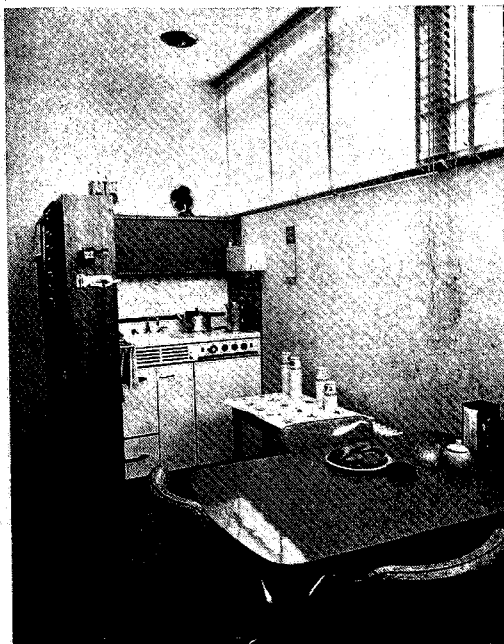
### HOMOGENIZED FOR HEALTH

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## MEDOSWEET KREAMILK

MEDOSWEET DAIRIES, INC. — TACOMA, WASH.



(Continued from Page 17)

present advanced stage of scientific development and efficient operation. As with most agencies of human welfare, however, there is a natural tendency to take our blood bank for granted, and in so doing, to place it in the background of our minds until occasion or necessity brings it again into sharp relief, as it meets our demands for quantity and quality with accuracy and promptness.

To meet the constant and variable demands of hospitals and the military forces, a smooth running and complex organization must be maintained. The Tacoma-Pierce County Blood Bank, as now equipped, organized, and functioning is a distinct community asset. It, in turn is served by the community through the many persons who contribute of their blood, either as individuals, or as members of the many groups, such as church, clubs, fraternal, labor unions, commercial and civic organizations who maintain blood pools for their members and families.

There are many members of these groups as well as individual donors who take a quiet satisfaction and modest pride in giving unit after unit of blood regularly. However, since blood over three weeks old cannot be used for transfusion but is reserved for processing into plasma, there must be a constant volume of donations to replenish the outflow and the outdated units. There is, therefore, the necessity of regular appeals to the entire membership of the several pools, as well as to the public at large. The responsibility of maintaining a proper liaison with these multiple groups, for periodic prodding, pleading and appealing, and securing a certain degree of publicity from time to time, is an unending burdensome task borne by the director, assisted by the Board of Trustees and the technical staff. Regardless of constant urg-

ing of all groups, even in these days of military need and patriotic motivation, there are occasions when stocks are critically low. Units of certain types become exhausted and the demands for them cannot be met.

Since the doctors are the greatest agents for the consumers, the patients, they likewise can be the greatest group factor in procuring the end product. Each member of the Pierce County Medical Society, who ever has occasion to order one or more blood transfusions, or to anticipate its use in ward or surgery, will earnestly endeavor to: 1. Anticipate the need at the earliest advance moment, that (2) he may urge upon the family or friends the necessity to go to the blood bank and establish credit by donating one or more units. (3) Re-assure the prospective donor as to the ease, simplicity and safety of giving; (4) Inform the family of the reduction in costs to the extent of \$30.00 for each unit given and used; (5) Encourage the establishment of more than one or two credits when there are several willing donors; (6) make, as promptly as possible the decision for the return to the bank of unused units; and (7) That, if emergency circumstances do not prevent, the duty of obtaining donors will not be left until after the time of transfusion, nor especially after recovery of the patient. All experience teaches that it is much more difficult, if not at times, impossible to obtain replacements after the great moment of need has passed.

The ordering of a transfusion means the consumption of a precious and perishable commodity, that carries with it the obligation of replacement, wherever possible. It should never, like some drug or other routine orders, be treated with profligate abandon.

The earnest and sustained consideration of these matters, by the medical profession, can be a great stimulus to the recurring lags in blood procurement and conservation.

## THE ACTIVITIES OF THE TACOMA-PIERCE COUNTY BLOOD BANK

By M. J. WICKS, M.D., *Director*

The Tacoma-Pierce County Blood Bank has become a well established medical institution growing with the progress of medicine. All physicians of Pierce County may well be proud of their Blood Bank which many of them have nurtured through its infancy. Some of these details will be expressed elsewhere in this issue of *The Bulletin*. A review of the activities of the Blood Bank is given below.

### I—Whole Blood for Transfusions

The fundamental concern of blood banks is to supply whole compatible blood for transfusions. About 5500 units are used each year in Pierce County and enough blood of all types, including ABO and the three Rh groups, must be on hand at all times. To keep the bank stocked for any emergency has been helped greatly by the encouragement which physicians have given to patients to have blood replaced after use. It is to be urged that the use of blood be anticipated and donors

(Continued on Page 21)



“Speaking of penicillin-sulfonamide combinations, I prefer Pentid-Sulfas.”

“Why Pentid-Sulfas?”

“Because the tablets are formulated for q.i.d. dosage. They do not interfere with meals or interrupt my patients’ sleep . . . and an average day’s treatment is only ½ the cost of the newer antibiotics.”

## Pentid-Sulfas

(formerly Penfonylin)

Squibb 200,000 Units Penicillin G Potassium with  
0.5 Gm. Meth-Dia-Mer Sulfonamide Tablets

**SQUIBB**



(Continued from Page 19)

sent in early so that stocks of blood will not be depleted.

About a year ago the Blood Bank was licensed No. 202 by the National Institutes of Health to become one of only twenty Blood Banks so licensed in the country. This insures the physicians that the best technics are used at all times in preparing blood for their patients.

### II — Blood Bank Pools

Lodges, churches, labor unions and outlying communities send their members regularly to the Blood Bank or are visited by the Mobile Unit. This is insurance that each member will have replacements so he will not have to forfeit the \$30.00 penalty fee charged for not replacing the blood used. This also is insurance that the Blood Bank will have a minimum supply of blood on hand. Some physicians have such pools in their names to be used for their patients.

### III — Plasma

Irradiated filtered plasma is prepared from bloods which have not been used in the first twenty-one days after donation. About 6% of blood donations are used in making plasma. It is made under the direction of the National Institution of Health and is bacteriologically free of the virus of infectious hepatitis. Blood Bank plasma is stored in the hospitals for emergency use. SPECIFY BLOOD BANK PLASMA.

### IV — Red Cell Suspensions for Transfusions

An ever increasing demand for this preparation is seen in certain conditions and is being met on request by the Blood Bank laboratory. Some indications are: (1) Patients with secondary anemia and normal blood volume; (2) Restoration of hemoglobin after treatment for shock with plasma; (3) Patients with cardiac disease who must be treated for anemia without increasing the blood volume; (4) Patients needing a minimum of sodium chloride since this is removed in the preparation of red cell suspensions. These doses of blood may be given at no extra expense to the patient.

### V — Small Units of Blood for Babies

As yet the demand for these units has not warranted keeping a supply on hand because of the twenty-one day dating period. One hundred and fifty cc. units are prepared on request however and saves not only loss of blood from tapping a full pint but is a financial saving to the patient.

### VI — Special Services

The program of the Blood Bank includes preparations for Civil Defense so that in disaster, whether in peace or war, there will be sufficient whole blood to meet any demand.

Reciprocity is maintained with all Blood Centers in the country so that relatives in some other state may give blood for patients in Tacoma.

Blood is being taken and shipped daily to the Armed Forces.

A pamphlet "Rh: What It Means to You" is being prepared to be distributed free of charge to physicians on request for their patients. This is the beginning of an anticipated growing service of dissemination of scientific information by the Blood Bank.



## THE BLOOD BANK AND THE HOSPITALS

By WALTER A. HEATH, *Administrator,  
Tacoma General Hospital*

A modern hospital to fulfill its responsibility to the staff and to its patients must be prepared to provide fresh blood at a moment's notice when the need arises. The adequacy and character of the blood supply is very important. Some of the larger hospitals have established their own blood banks, but unless the volume justifies providing special facilities with skilled personnel in charge the results cannot be satisfactory. A centralized Blood Bank is the solution.

The Tacoma-Pierce County Blood Bank has meant a great deal to the hospitals in making it possible to furnish fresh blood to the physicians and his patient free of processing responsibilities and at a minimum of cost to the patient. This is in marked contrast to the situation, as recent as ten years ago, when blood transfusion was a major undertaking, expensive and time consuming.

(Continued on Page 23)

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TACOMA'S LEADING FUNERAL DIRECTORS

Phone BRoadway 3268

510 South Tacoma Avenue

(Continued from Page 21)

Our Blood Bank has made whole blood as readily available as other therapeutic agents.

This nonprofit yet self supporting organization is entitled to the commendation of the people of this community for the splendid contribution it has made to the health of the people in this county. The donors, too, should feel a sense of pride and satisfaction that their gift of blood has brought health and life to others. It has been said that "blood is the only medicine of the people, by the people and for the people." Blood is free except for handling costs and that is the way it should be. Dr. DeWitt Burnham put it this way "The blood in my veins is worth ten million bucks a pint—if I don't want you to have it. If I want you to have it—it's free."

### WHY WOMEN OUTNUMBER MEN

In 1950, for the first time in our history, the census has shown more females than males in our population. At that time there were about 1,430,000 more women than men, and the indications are that this excess will become even larger in the future.

Many factors are contributing to the growing predominance of females over males. Of these, the most important is the higher death rate of the males. At birth, the ratio of the two sexes has been very stable from year to year at a level of about 1,055 males per 1,000 females. On the other hand, the ratio of male to female deaths has been increasing; in 1930 this ratio was 1,210 males per 1,000 females, and by 1951 it had risen to 1,333 males per 1,000 females.

Both sexes have shown a long-term improvement in mortality, but the reduction has been more rapid among the females. As a result, the gain in population by natural increase (the excess of births over deaths) has been greater for females than for males. In the six postwar years 1945 through 1951, for example, natural increase added nearly 7,000,000 females to the population of our country, exceeding the male increment by about 590,000.

Accentuating this trend has been the sex pattern of migration into and out of the United States. For most of the country's history, there was a marked excess of males over females among immigrants. However, the picture was reversed about 1930; in each year since then immigration has been predominantly female. In fact, during the depression years 1932 to 1936 male immigrants were only two thirds as numerous as female immigrants. During the early postwar period the disparity was even greater. In one year—1946—for every male among our immigrants there were three females. This recent influx of women reflects, for the most part, the admission into our country of war brides and fiancées of American servicemen.

While fewer men than women have been coming into our country each year, more men than women have been leaving. During the difficult years of the early 1930's the number of male emigrants outnumbered females by almost 2 to 1. In no single

year of that decade was this ratio less than 1½ to 1. For most of the postwar years, however, there has been a relatively small excess of males over females among our emigrants. In the five fiscal years ending June 30, 1950, somewhat over 13,000 more males than females left the country. On the other hand, during the same period there were 168,500 more females than males among our immigrants. There has thus been a net gain of 181,500 females over males by migration in the five years immediately after World War II.

War deaths have been another factor in widening the margin between our male and female populations. The present excess of women over men would be about a third of a million less had it not been for our losses in World War II.

In view of these various trends, it is not surprising that, beginning with 1945, there has been a reversal of the sex ratio in our population. The excess of women is concentrated largely at ages 45 and over, where the sex ratio is 956 males per 1,000 females. This difference increases rapidly with advance in age, and at ages 70 and over it reaches 855 males per 1,000 females. According to present indications, the excess of females over males will grow, with an attendant increase in widowhood and dependency.

—Statistical Bulletin, Metropolitan  
Life Insurance Co.

### NETWORK TELECASTS FROM A.M.A. MEETINGS

Last June, two network telecasts were originated from the American Medical Association's annual meeting. Sponsored by Smith, Kline and French Laboratories, the programs gave TV viewers in 39 cities a chance to see what goes on at an A.M.A. meeting.

The response to these telecasts exceeded all expectations. Two separate reporting organizations estimated that 7,500,000 persons watched the programs. A survey of physicians who saw the telecasts showed that 98 per cent of them favored continued telecasting of A.M.A. meeting activities.

The American Medical Association has given permission for two more series of TV shows—one series to originate from the Clinical Session in Denver, Colorado; the other to originate from the 102nd Annual Session in New York City.

Each of these programs benefit the medical profession in two ways. First, it demonstrates to the general public that physicians are continually learning new and better ways to practice medicine. Second, a certain segment of each telecast is used by the A.M.A. for any message it might want to get across.

Although millions of people saw the June shows, the potential audience in December, 1952, and June, 1953, is even greater. If enough interest is aroused in each community receiving the telecasts, it is entirely possible that each program will reach more than 10,000,000 Americans.

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**Method** . . . includes education of patient to reverse the attitude toward drinking, to re-form the sense of values, to create new patterns for the life of sobriety.

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Charles Griffith  
Supervision

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## POSTGRADUATE CONVENTION

Any general practitioner should be able to find a variety of information or instruction directed to his own special needs at the 17th Alumni Postgraduate Convention, sponsored by the Alumni Association of the College of Medical Evangelists School of Medicine, in Los Angeles, March 8-13, 1953.

Subjects dealt with will range through the spectrum of professional concerns, from ethics, office management, and public relations to ulcers, tumors, and cancer; from functional to traumatic diseases; from physical to psychosomatic medicine; from diagnosis to prognosis; from obstetrics to geriatrics.

The crammed six-day meeting will highlight nationally known specialists coming from ten medical schools and eleven major cities and representing many famous clinics, hospitals, and professional organizations in the West, Mid-West, and East. Pooling the results of their wide-ranging clinical and research experience, these men will be able to help keep up to date the busy general practitioners upon whom so many Americans depend for medical and surgical care.

From Sunday through Tuesday, March 8-10, at the Ambassador Hotel in Los Angeles, convention-goers will hear lectures and panel presentations and see motion pictures and scientific exhibits on latest developments in medical practice and medical science. At Sunday and Tuesday luncheons, special opportunity will be provided for round table discussions with specialists and with other general practitioners at the convention. (Space will limit these Round Tables to about 275 participants.)

Wednesday through Friday, on the Los Angeles campus of the College of Medical Evangelists, besides a wide choice of refresher courses ranging from allergy to x-ray, the 1953 APC will feature six three-hour conference clinics. Concentrating on dermatology, functional diseases, tumors, heart diseases, orthopedics, and hopeless prognosis, at each of these conference clinics representatives of several related specialties will discuss the diagnosis and management of typical cases, with actual patients presented whenever feasible.

Details will be forthcoming in a later release on speakers, lecture topics, and refresher courses, as well as on the social program planned by the Woman's Auxiliary for convention-going wives.

## What's Your Dollar Worth???

The cost of living dollar, generally rated as worth about 54 cents in pre-war purchasing power, is really worth varying amounts depending upon what you spend it for. Northwestern National Life Insurance researchers find that if you buy food, the dollar is worth 43 cents. It buys 44 cents worth if you're building a home, but as rent money it's worth 77 cents. When you equip your home, your dollar buys 48 cents worth, while it shrinks to 50 cents if you buy clothing or coal. You hit the jackpot in electric bills, the dollar going up to \$1.01 in value.

—The Daily Reporter.

## STATEMENT BY DWIGHT D. EISENHOWER

"The government is rightly concerned with assisting its citizens to provide savings for their old age. The Social Security Act of 1935 embodied the doctrine that society through government should provide minimum benefits for the aged. We all favor this.

"In 1942 the government made an important supplement to the Social Security Act by legislation which offered tax advantages to corporations and their employees in the establishment of pension funds (Section 165, Internal Revenue Code). I am thoroughly in accord with the principle of this legislation. Over 16,000 pension plans have been filed under this law providing more adequate security for the employees of corporations covered thereby. When this legislation was being considered, self-employed individuals were evidently forgotten. Yet they get old and sick just as other people do. There are over ten million workers who cannot take advantage of these tax release provisions now offered to corporations and their employees. They include owners of small businesses, doctors, lawyers, architects, accountants farmers, artists, singers, writers, independent people of every kind and description but who are not regularly employed by a corporation. I think something ought to be done to help these people to help themselves by allowing a reasonable tax reduction for money put aside by them for their own savings. This would encourage and assist them to provide their own funds for their old age and retirement. If I am elected I will favor legislation along these lines.

(Signed) DWIGHT D. EISENHOWER."

Ralph H. Cake.

## POINT IV AGENCY SEEKING 24 PUBLIC HEALTH PHYSICIANS FOR 12 COUNTRIES

Because of stepped up Point IV operations, the Technical Cooperation Administration says it urgently needs 24 public health physicians for assignments in Burma, Iran, Jordan, Saudi Arabia, Bolivia, Chile, Colombia, Costa Rica, Ecuador, Honduras, Nicaragua and Panama. Twenty-nine U. S. physicians are now working on TCA health and sanitation projects in more than 30 countries.

An agency spokesman said posts of deputy chief, health and sanitation staff, are available in Burma, Jordan and Saudi Arabia, and seven chiefs of regional offices are open in Iran. Salaries range from \$10,000 to \$15,000 a year, including allowances.

Dr. H. van Zile Hyde, director of health and sanitation staff for TCA, left Washington recently for Geneva where he was to be joined by a World Health Organization representative. The two will tour Near East countries in an effort to bring about better coordination between WHO and TCA health programs.



# LAKWOOD PHARMACY

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Under the leadership of these men the 'Everything in one place' idea has been gaining wider and wider acceptance. Mountain View Memorial Park is the only institution offering all burial facilities under one management—mortuary, cemetery, chapel, crematory and outdoor columbarium. The Mortuary, while being a part of the park, will conduct services **at any church** and make **burial in any cemetery selected.**

## MOUNTAIN VIEW FUNERAL HOME

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## ILO CONVENTION ON SOCIAL SECURITY STILL UNDER STUDY BY EXECUTIVE DEPTS.

State Department reports that the International Labor Organization convention on minimum standards of social security (including national compulsory health insurance) is still under review by the executive branch. The department has informed several members of Congress who have inquired about the convention that if the administration decides to go along with the original opinion of the U. S. delegation to the ILO meeting at Geneva, then the convention will be referred to Congress and the States "for whatever action they may decide to take."

State Department points out that the U. S. delegation agreed that the convention should not be recommended to the Senate for ratification as a treaty (which would be binding on this government and all the states) but should instead be passed along to Congress and the states for final disposition. If the administration adopts this course, the effect merely would be to call the agreement to the attention of Congress and the states.

An ILO official in Washington says that no member country has yet ratified the convention, four months after its approval at Geneva, but that this is not considered unusual. There is no time limit on approval or rejection of an ILO convention.

## ALL ABOARD!

An asylum patient was pronounced cured and was saying goodbye to the examining board of doctors.

"What are you going to do on the outside?" asked one.

"Well," said the patient thoughtfully, "I have passed my bar examination and may practice law. I have also had some banking experience and might try my hand there. Then on the other hand, I'm not certain just what I'll do. Maybe I'll be a steam engine."

## Karen Rynning

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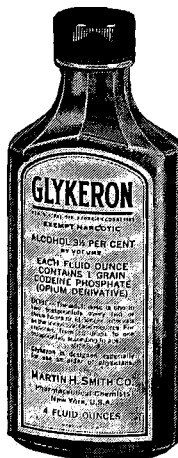
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Control the cough that weakens your patient.

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.



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## TAFT TO TAKE CHAIRMANSHIP OF LABOR-WELFARE COMMITTEE

Senator Taft, announcing he plans to assume chairmanship of the important Labor and Public Welfare Committee, says that in the next Congress he will concentrate on social welfare problems rather than labor legislation. In the Republican-controlled Eightieth Congress Senator Taft also headed this committee, but divided his interest between social legislation and labor, including sponsorship of the Taft-Hartley law. In explaining his attitude, the Senator is quoted as saying:

"This time my interest is more in the public welfare end of the committee's work than in the labor end. General Eisenhower has spoken of expanding the social welfare program, and I am interested in seeing that the new legislation takes the proper course."

The Labor and Welfare Committee has handled a majority of bills important to medicine, including compulsory health insurance, aid to medical education, aid to local public health departments, drug prescriptions and some veterans bills.

## 17,000 ONCE-DEFERRED 4F'S NOW IN SERVICE

The lowered mental standard for military induction, ordered by Congress, is bringing results. Already 17,000 men once classified IV-F for mental reasons are in uniform and approximately the same number are awaiting induction. Of the 114,000 re-examined so far, 33,000 or slightly less than one-third have been found mentally fit for service. Still to be re-examined are 186,000. Congress in June, 1951, directed that the percentile score in the Armed Forces Qualification Test (mental) be lowered from 13 to 10. Re-examinations began the first of this year and are now running at the rate of about 25,000 a month. Congress also ordered that the same physical standards effective in 1945, at the close of World War II, should prevail. The armed forces say, however, that since 1948 physical standards have been no higher than in 1945.

## Army Announces Programs To Ease Shortage of Nurses

Army Medical Service is planning two steps in an attempt to ease the shortage of nurses. It will broaden its practical nurse training program this fall with two new 48-week courses in advanced medical-technical procedure, opening Oct. 27 in Dallas and San Francisco. Army also plans a 3-month intensified campaign starting next February for recruitment in the Army Nurse Corps and Women's Specialist Corps. If the call for 500 nurses and 125 medical specialists can't be met by volunteers, Army will begin calling women from its organized and voluntary reserves. Meanwhile, Air Corps says it is getting enough nurses through volunteers, and Navy reports an adequate supply of nurses through voluntary recruitment of reserves.

## BLOOD PROGRAM GOAL IS 650,000 PINTS PER MONTH

Latest information from the National Blood Program indicates monthly procurement from all sources will have to total 650,000 pints, or 8 million pints a year, if all needs are to be met. The total takes into consideration blood supplies obtained and distributed outside the Blood Program, as well as those handled by Red Cross and the Armed Forces, both of which are integrated with the Program. The most recent similar effort, the year-long campaign of the Armed Forces, averaged a little less than half the monthly goal set for the current drive, on which there is no time limit. Publicity and advertising to be used in the campaign were outlined at a meeting in Washington attended by members of the Office of Defense Mobilization's Sub-committee on Blood and its Public Relations Policy Committee, and representatives from the Armed Forces, Civil Defense Administration and the American National Red Cross. Sponsoring the briefing session was the Advertising Council, which is supervising and coordinating all National Blood Program advertising.

## THE PENALTY YOU PAY

"The penalty that people pay for not being interested in politics," according to Plato, "is to be governed by people worse than themselves." Our greatest danger today is not from Russia, but from ourselves, from our growing disregard of principles.

Citizenship is a two way street. It entitles one to privileges and to protection of the Laws of the Country; in return it requires allegiance and active participation in building the economic and political privileges and to protection of the Laws of the integrity of the Community and Nation.

Our most important need today is for better men to lift the fallen banners of our integrity and lead us again toward the light. It is the duty of a loyal citizen to use his vote properly. If we do not use our vote, then we cannot consistently complain about the type of public officials we have in the U.S. There is a committee being formed to make people more conscious of this power of their vote and their slogan is: "Government by Decision, Not by Default."

—*Bulletin Winnebago Co. Med. Society.*

## WASHINGTON STATE ACADEMY OF GENERAL PRACTICE

The Washington State Academy of General Practice held its annual meeting in Wenatchee on October 31, November 1st and 2nd. Tacoma doctors who attended were Drs. Wallberg, Trimble, Grffin, William Brown, Kohler, Drues, Larson, Robertson and Judd.

A most instructive and interesting program was presented; there was also a program for the doctor's wives. A fitting climax was a barbecue at Stehekin Lodge after a beautiful excursion up Lake Chelan.

Plans are being drawn to hold the 1954 state convention in Tacoma.

\* \* \*

GENERAL PRACTITIONER now in Army and stationed at Madigan Army Hospital expects discharge in February, 1953. Would like to find association or locum tenens. Please call MA. 8439.

\* \* \*

## APOLOGY

For no justifiable reason it was announced in last month's Bulletin that the election of officers for the Society would take place at the November meeting. Inasmuch as the election of officers *always* takes place at the December meeting only a momentary (we hope) aberration can be held responsible. We apologize, and beg to announce that the election of officers will take place on Tuesday evening, December 9th.

\* \* \*

## LAST CALL

This is the last notice that can be made before the publication of the annual Medical Society directory: if your addresses and telephone numbers were not correct in the Roster that was published in the October issue of the Bulletin or have changed since then please call the office. We are anxious to have the directory as accurate as possible, and it can only be done through your cooperation.

\* \* \*

There are on file in the Society's office the names of a number of girls who are looking for work in doctors' offices. Many are experienced and very well qualified; please call MArket 2020 if you need help in your office.

## A Simple Definition

The "Gulf Breeze" house organ of the Gulf Insurance Company of Dallas cites the following definition as found in Britain's Health Act:

"The expression 'infectious disease' means primarily any disease included in regulations under Subsection 1 of Section 29, whether absolutely or by definition of a particular stage of such disease, but in any section of Part IV of this act from the application from which a disease or a stage of a disease is excluded under Subsection 2 of said Section 29, the expression does not include such disease or such disease in such stage as the case may be." Everything clear now?

—*The Insurance Record*

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The superior flavor of all three "Vi-Sols" assures patient acceptance. Mothers appreciate their convenience too.

**dispersibility**

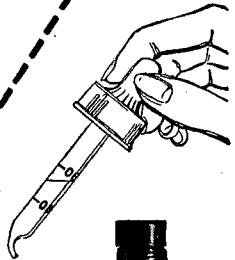
With their clear, non-sticky texture, the "Vi-Sols" disperse instantly in fruit juice or water; mix readily with formula.

**hypoallergenicity**

Since all their vitamins are in synthetic form, the "Vi-Sols" are well tolerated even by allergic patients.

**stability**

Stable at room temperature, the "Vi-Sols" require no refrigeration. They may safely be autoclaved with the formula.



**POLY-VI-SOL**  
**TRI-VI-SOL**  
**CE-VI-SOL**

Available in 15 and 50 cc. bottles,  
with calibrated droppers

	Vitamin A	Vitamin D	Ascorbic Acid	Thiamine	Riboflavin	Niacinamide
<b>POLY-VI-SOL</b> Each 0.6 cc. supplies	5000 Units	1000 Units	50 mg.	1 mg.	0.8 mg.	5 mg.
<b>TRI-VI-SOL</b> Each 0.6 cc. supplies	5000 Units	1000 Units	50 mg.			
<b>CE-VI-SOL</b> Each 0.5 cc. supplies			50 mg.			

MEAD JOHNSON & COMPANY, **MEAD'S** EVANSVILLE 21, IND., U.S.A.

Local Representative: W. E. Harvey, 6022 So. Lawrence St., HA. 9559, Tacoma 9

Pierce County Medical Society

Medical Arts Building  
Tacoma 2, Washington

Sec. 34.66, P. L. & R.

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## MONTHLY MEETINGS

### STAFF OF TACOMA GENERAL

First Tuesday of each month (Second Tuesday in January)

### STAFF OF ST. JOSEPH'S

Third Monday of each month—at 6:15 p.m.

### TACOMA ACADEMY OF MEDICINE

Fourth Tuesday of each month—6 p.m. at Tacoma Club

### SURGICAL SOCIETY

Third Tuesday of each month—6:30 p.m. at Tacoma Club