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February, 1954

THE BULLETIN of the Tulsa County Medical Society

IN THIS ISSUE

A Guest Editorial By Dr. Edward J. McCormick, President, American Medical Association

as an

1954 Committee Personnel

as of a

Program, Oklahoma Academy Of General Practice Annual Meeting, Tulsa, Oklahoma, February 15-17

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Cleveland Neurosurgeon Speaks Here Feb. 22

Vol. 20



No. 2

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Burns, J. J., and others: J. Pharmacol. & Exper. Therap. 106:375, 1952. (2) Byron, C. S., and Orenstein, H. B.; New York State J. Med. 53:676 (Mar. 15) 1955. (3) Cyrrie, J. P.; Lancet 2:15 (July 5) 1952. (4) Davies, H. R.; Barter, R. W.; Gee, A., and Hirson, C.: Brit, M. J. 2:1392 (Dec. 27) 1952. (5) Dolfel, N. E., and Griffin, A. C.: Stanford M. Bull. 2:65, 1953. (6) Domenjoz, R.: Federation Proc. 11:339, 1952. (7) Domenjoz, R.: Internat. Rec. Med. 165:467, 1952. (8) Odtman, A. B., and Yü, T. F.: Am. J. Med. 13:744, 1952. (10) Kuzell, W. C.: Annual Review of Medicine, Stanford, Annual Reviews, 2:367, 1951. (11) Kuzell, W. C., and Schaffarzick, R. W.: Bull, on Rheu-

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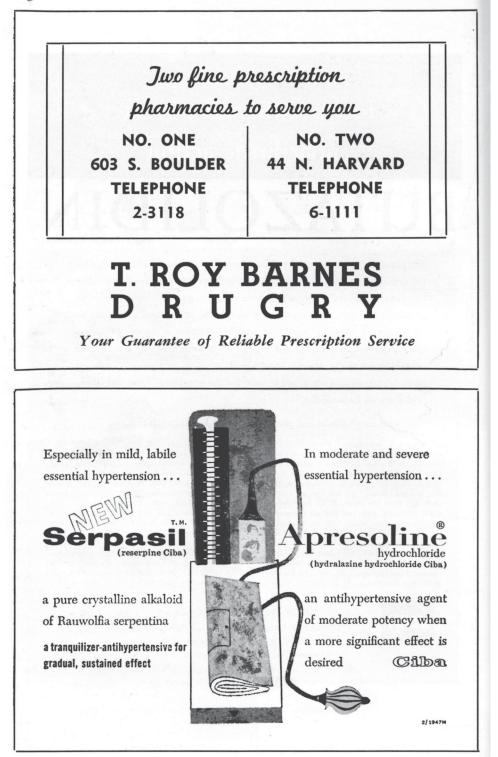


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The Bulletin.









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With The Editor ...

The lurid magazine stories about feesplitting by a very small minority of surgeons are tarring the entire profession with the brush . . . No matter how carefully the articles point out the small incidence of offenders, the public may well get the idea it is a common practice . . . Collier's color cover of two evil-looking M.D.'s slipping rebates to each other will hang in public memory . . . Of course, a cover showing thousands of honest and ethical surgeons constantly working towards improving the standards of American Surgery wouldn't sell any magazines

. . . Perhaps its time for the American College of Surgeons to take some positive steps to define the extent of the practice —perhaps to name names and show proof

. . . A put up or shut up policy . . . The College has yet to so much as acknowledge receipt of the Oklahoma State Medical Association's House of Delegates letter of last April asking for any information or proof that Oklahoma doctors are guilty of fee-splitting . . . The furore goes hard with Tulsa and Oklahoma where the practice is unknown . . . St. John's Hospital has announced plans for a new \$3,500,000 addition of 125 beds . . . Tulsa doctors have already pledged thousands to start the campaign . . . And still it goes on: a public solicitation in Tulsa last month to send a leukemia-ridden child to a notorious cancer quack in Canada . . . When will people learn that cancer cures don't come in bottles? . . . The Oklahoma State Medical Association is fostering a new liaison committee between doctors, nurses, and hospital administrators . . . It looks like a logical place to coordinate some mutual problems . . . President Ike wants Congress to set up a federal corporation to reinsure commercial and non-profit health insurance plans, thus enabling them to give catastrophic illness coverage . . . Plan will surely put federal controls on health and medical insurance carriers . . . Is it another foot in the door towards eventual federal compulsory health insurance? . . . We wonder.

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THE BULLETIN

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Frank J. Nelson, M.D., President-Elect the Charles G. Stuard, M.D., Secretary-Treas. Executive Secretary

Vol. 20 TULSA, OKLAHOMA, FEBRUARY, 1954 No. 2

G. P. ACADEMY MEETS HERE FEB. 15-17 Fourteen Visiting Distinguished Guest Speakers Highlight Program. All Oklahoma Medical Doctors Invited To Attend.

A record attendance of Oklahoma doctors is expected for the 1954 Annual Meeting of the Oklahoma Academy of General Practice at Tulsa, Monday through Wednesday, February 15-17. Scientific sessions will be open to all medical doctors and there will be no registration fee.

Six visiting distinguished guest speakers will highlight the scientific program of the Academy on Monday and Tuesday, February 15-16. On Wednesday, February 17, convention registrants will be guests of Lederle Laboratories at a daylong clinical session featuring an additional seven medical personalities as guest lecturers.

Scheduled to appear on the Academy program are the following:

Dr. William F. Guerriero, Clinical Associate Professor of Obstetrics and Gynecology, Southwestern Medical College, Dallas, Texas.

Dr. Horace L. Hodes, Director of the Department of Pediatrics, Mount Sinai Hospital, New York, N. Y.

Dr. Manuel E. Lichtenstein, Associate Professor of Surgery, Northwestern University School of Medicine, Chicago, Illinois.

Dr. Perrin H. Long, Professor and Chairman of the Department of Medicine, Downstate Medical Center of the University of New York, Brooklyn, N. Y.

Dr. Carlo Scuderi, Associate Professor of Surgery, University of Illinois School of Medicine, Chicago, Ill. Dr. Harry Wilkins, Professor and Chairman of the Department of Neurosurgery, University of Oklahoma School of Medicine, Oklahoma City, Okla.

The panel of guest speakers for the Lederle Laboratories presentation will include:

Dr. Henry K. Ransom, Professor of Surgery, University of Michigan Medical School, Ann Arbor, Michigan.

Dr. Jackson Smith, Assistant Professor of Psychiatry, Baylor University School of Medicine, Houston, Texas.

Dr. Eugene Ellis, Clinical Professor of Medicine, University of Southern California Medicine School, Los Angeles, Calif.

Dr. Irving B. Steck, Assistant Professor of Medicine, University of Illinois School of Medicine, Chicago, Illinois.

Dr. William B. Kountz, Professor and Chairman of the Department of Gerontology, Washington University School of Medicine, St. Louis, Missouri.

Two additional guest speakers will be announced later. The Lederle Laboratories program will be open only to doctors who have registered at the Academy of General Practice sessions during the previous two days. There will be no registration fee. Physicians in attendance will be guests for luncheon and for a social hour closing the conference.

As a special feature of the Academy convention, the Tulsa Academy of General Practice will present its Fourth Public Affairs Forum on Tuesday evening, FebruPage 8

ary 16, 1954, at 7:30 P.M., at Central High School South Auditorium. Again co-sponsored by the Tulsa World, the Forum will feature a discussion of Children's Diseases. Dr. Horace L. Hodes, Director of the Department of Pediatrics at Mount Sinai Hospital, New York, N. Y., will join a panel of discussants.

The Tulsa Academy of General Practice will also be host to convention visitors at a complimentary breakfast on Tuesday, February 16. A large number of attractive door prizes has been contributed by local merchants.

All sessions of the convention will be at Hotel Tulsa. Twenty-five commercial exhibits will be open Monday and Tuesday, February 15-16, from 8:30 A.M. to 5:00 P.M. Special periods have been allocated to permit convention registrants to visit each booth.

The Annual Banquet of the Academy will be held at 6:30 P.M. on Monday evening, February 15. There will be no formal speaker but a program of light entertainment has been arranged.

Doctors' wives and other ladies in attendance will be guests at a Style Show in the After Five Room of Hotel Tulsa on Tuesday, February 16, at 12:00 Noon. Fashions will be shown by the Patio Shop of Tulsa.

Dr. Earl M. Lusk of Tulsa is General Chairman of the Meeting, assisted by Dr. Horace H. Porter, Dr. Wilmot B. Boone, Dr. E. Lee Gentry, Dr. Logan A. Spann, Dr. Marshall O. Hart, Mrs. Lowell L. Stokes, and Dr. V. C. Rutherford of Oklahoma City.

The program will be as follows:

Monday, February 15, 1954

8:00 A.M. Registration.

9:00 A.M. "Carcinoma of the Cervix." Dr. William F. Guerriero, Dallas, Texas.

9:30 A.M. "Diagnosis of Intercranial Lesions." Dr. Harry Wilkins, Oklahoma City, Oklahoma.

10:00 A.M. Intermission to visit commercial exhibits.

10:30 A.M. "The Clinical Significance of the Position and Station of the Appendix." Dr. Manuel E. Lichtenstein, Chicago, Illinois. 11:15 A.M. "Treatment of the Severe Forms of Poliomyelitis and the Present Status of Measures Aimed at the Prevention of the Disease." Dr. Horace L. Hodes, New York, N. Y.

12:00 Noon. Roundtable Luncheon.

1:45 P.M. "Emergencies In Everyday Practice — A Symposium." All guest speakers participating.

3:45 P.M. Intermission to visit exhibitors.

4:00 P.M. "Uses and Abuses of Antibiotics." Dr. Perrin H. Long, Brooklyn, N.Y.

6:30 P.M. Social Hour.

7:45 P.M. Annual Banquet.

Tuesday, February 16, 1954

7:30 A.M. Breakfast, compliments of the Tulsa Academy of General Practice.

8:30 A.M. Annual Business Meeting. 9:30 A.M. Intermission to visit exhibitors.

10:00 A.M. "Backache: From The Standpoint of a General Practitioner — Diagnosis and Treatment." Dr. Carlo Scuderi, Chicago, Illinois.

10:30 A.M. Intermission to visit exhibitors.

11:00 A.M. "Pelvic Pain." Dr. William F. Guerriero, Dallas, Texas.

12:00 Noon. Roundtable Luncheon.

1:45 P.M. "The Significance of Gall Stones to the Patient and the Surgeon." Dr. Manuel E. Lichtenstein, Chicago, Ill.

2:15 P.M. Intermission to visit exhibitors.

2:30 P.M. "The Antibiotic Problem and the Question of Antagonism." Dr. Horace L. Hodes, New York, N.Y.

3:00 P.M. "Treatment of Both Bone Fractures of the Leg." Dr. Carlo Scuderi, Chicago, Illinois.

3:30 P.M. "The Etiology and Management of Longevity." Dr. Perrin H. Long, Brooklyn, N. Y.

7:30 P.M. Public Forum, Central High School Auditorium. Subject: "Diseases of Children."

Wednesday, February 17, 1954

10:00 A.M. "Diagnosis and Management of Peptic and Dudodenal Ulcer." Dr. Henry K. Ransom, Ann Arbor, Mich.

(Continued On Page 32)

February, 1954

Guest Editorial

A Special Message by Edward J. McCormick, M. D., Toledo, Obio, President, American Medical Association

During my first six months in office as President of the American Medical Association I met many people in all walks of life who attest to the fact that the medical profession's relations with the public are *not* good. We have a policing job to do among members of our profession. Naturally, I am not in favor of pointing the finger of shame at the sins of a small number of doctors and completely ignoring the majority of honest physicians who are contributing so much to the welfare and health of the American People. But I think it is time for all of us to begin a concerted effort to restore the public's confidence in the profession.

To achieve our goal, we must solve our problems at the "grass roots" and not at the national level. Good public relations cannot be purchased but must be earned through exemplary conduct and genuine service in the public interest.

Physicians must lend an ear to public thinking on fees and physician-patient relationships. Articles in the nation's press and the many letters which have come to me personally indicate that our policing must be done through the medium of existing disciplinary machinery.

Organized medicine, through the American Medical Association's many councils and committees, is sponsoring many worthwhile projects in the fields of rural health, industrial health, health education. Many doctors, as well as laymen, seem to know very little about these activities although they are fully aware of the profession's many scientific endeavors.

Perhaps some more effective methods should be devised for communicating with the individual physician. Certainly, the time has come when our medical schools, too, must recognize their responsibility and begin the formal teaching of medical ethics so that these men and women currently graduating will be able to meet the challenges — not only those challenges of socialism and communism but also those of unethical practice in medicine.

Until we physicians arm ourselves with knowledge of medicine's aims and purposes, we cannot hope to win the support and confidence of the public. Each of us as individual, practicing physicians — must actively participate in the affairs of our county and state medical societies and voice our opinions in the direction of medicine's affairs. Only then, can we hope to win the respect and confidence of our patients, friends, and fellow citizens in our local communities and in the nation.

Like a clean slate, the months ahead promise us a golden opportunity for spelling out medicine's positive story. Let's make 1954 a year of *action* by working together toward our common goal — better health for the people of our land.

Sincerely,

Church & M Cornicet

President, American Medical Association

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1954 COMMITTEE PERSONNEL

STANDING COMMITTEES

Bulletin

Milford S. Ungerman, M.D., Chm. (1) William Buchan, M.D. (2) John G. Matt, M.D. (3)

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Lucien M. Pascucci, M.D., Chm. (1) Herbert S. Orr, M.D. William M. Benzing, M.D.

Clinic

Herbert J. Forrest, M.D., Chm. (1) James B. Thompson, M.D. (2) Horace H. Porter, M.D. (3)

Constitution & By-Laws Earl M. Lusk, M.D., Chm. (3) Terrell Covington, Jr., M.D. (2) A. B. Carney, M.D. (1)

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Paul N. Atkins, Jr., M.D., Chm. (2) Roger Q. Atchley, M.D. (1) Simon Pollack, M.D. (3)

Ethics

E. Lee Gentry, M.D., Chm. (1) Berget H. Blocksom, M.D. (2) Howard M. Cohenour, M.D. (3)

Fraudulent Practices

Marshall O. Hart, M.D., Chm. (2) R. G. Ray, M.D., (1) Hugh B. Nicholas, M.D. (3)

Grievances John E. McDonald, M.D.

The term of office served by members of Standing Committees is indicated by the numeral in parenthesis following the name. Those names marked "(3)" serve until December 31, 1956; "(2)" until December 31, 1955; and "(1)" until December 31, 1954. The Grievances Committee is automatically made up of the five immediate living Past-Presidents of the Society. Members of the Public Policy Committee and of all Special Committees serve only one year. W. A. Showman, M.D. Fred E. Woodson, M.D. Marshall O. Hart, M.D. John G. Matt, M. D.

Insurance

F. L. Flack, M.D., Chm. (3) B. W. Ward, M.D. (2) Frank A. Stuart, M. D. (1)

Ladies Auxiliary Robert H. Johnson, M.D., Chm. (3) C. E. Brighton, M. D. (2)

Mary V. Graham, M.D. (1) Program

Logan A. Spann, M.D., Chm. (1) Edward L. Moore, M.D. (2) Walter E. Brown, M.D. (3)

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February, 1954

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Public Health D. L. Garrett, M.D., Chm. (1) T. Paul Haney, M.D. Hugh C. Graham, M.D.

Red Cross Blood Center Felix R. Park, M.D., Chm. (3) Mary V. Graham, M.D. (2) William F. Thomas, Jr., M.D. (1) Leo Lowbeer, M.D. (Advisory) Emil E. Palik, M.D. (Advisory)

Welfare

J. W. Childs, M.D., Chm. (1) W. Albert Cook, M.D. (2) E. G. Hyatt, M.D. (3)

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1954 COMMITTEE PERSONNEL SELECTED BY DR. HOOVER

Dr. Wilkie D. Hoover, President, has announced personnel of twenty-two standing and special committees of the Tulsa County Medical Society for 1954. A complete listing of committee membership appears on Page 10 of this issue of The Bulletin.

A Special Insurance Advisory Committee under the direction of Dr. Fred E. Woodson has been appointed for the first time this year. With a large membership of seventeen members, it will advise and assist the regular Insurance Committee in handling malpractice suits against Tulsa doctors and in educating physicians against the dangers of malpractice charges.

Dr. Hoover has reappointed many committee chairmen who, with their committees, did excellent work last year. These include Dr. Hugh Perry, reappointed tohead the Public Policy Committee; Dr. I. H. Nelson, Medical Credit Bureau Committee; Dr. Felix R. Park, Red Cross Blood Center; Dr. Thomas J. Hardman, Medical Library; Dr. Earl I. Mulmed, Postgraduate Medical Study; Dr. Jack O. Akins, Military Affairs; Dr. Marshall O. Hart, Fraudulent Practices; Dr. Earl M. Lusk, Constitution & By-Laws; and Dr. Lucien M. Pascucci, Cancer.

DR. BYRON W. STEELE has been certified as a Diplomate of the American Board of Surgery.

The Bulletin,

PRESIDENT'S PAGE

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I am much concerned over a state of affairs which characterizes American Medicine as a whole — an inability to overcome factional differences within the profession, differences which are seriously impeding efforts to unify the profession into a common front. These factional interests are naturally most manifest at the local level, but they do extend upward in state and national medical circles and increase the difficulty of prescribing and administering professional policies. Fortunately, Tulsa has less of these differences than most cities of a similar size; yet, we are not entirely free.

I believe that doctors have too much at stake to permit factional and clannish differences to hinder progressive activities conducted by the profession as a whole. Our interests are too basically similar, and our individual welfare too interrelated, to draw lines between one group or another. I believe most progressive doctors will agree with this view, yet we must discipline ourselves not to fall into a narrower and more selfish way of thinking. A medical society should represent all groups and work in the general interest. It is not a medium to advance any one faction. The differences between these groups, as I see it, are minor; they must not be magnified out of their true importance.

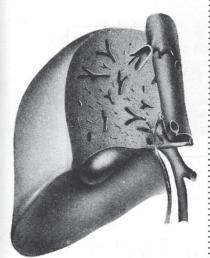
Similarly, each of these groups are important and do have a place in the scheme of things medical. Yet, it is the whole that is important — a necessary unity if the profession is to survive free and progressive in the future. This in turn should materially help to solve intra-professional differences. Our factions are already too many — hospitals, clinics, medical schools, specialty organizations, etc. — and each by itself of minimum importance in the whole. Together, as a cooperative whole, they represent American Medicine at its best. Let's make it and keep it that way.

Sincerely,

Wilkie N.

President

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*As tricholine citrate	e.						

Pint bottles.

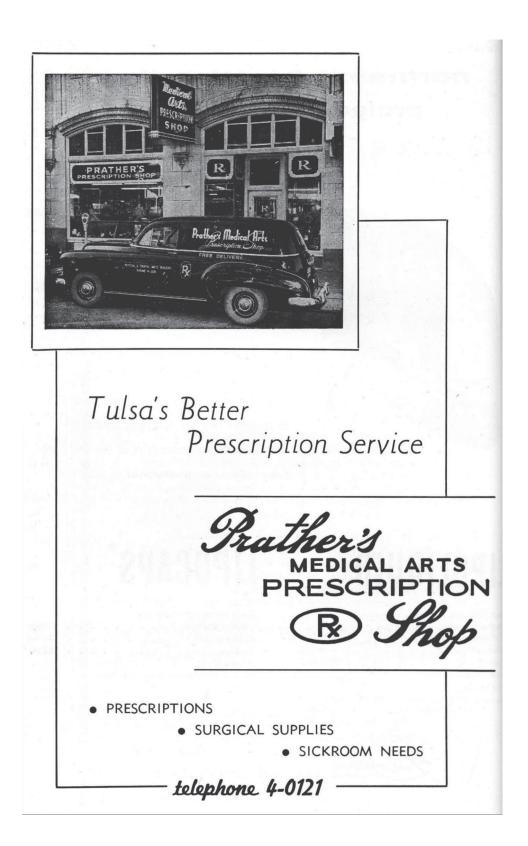
Dosage: 1 to 2 tablespoonfuls daily for adults. LIPOLIQUID is sugar- and alcohol-free.

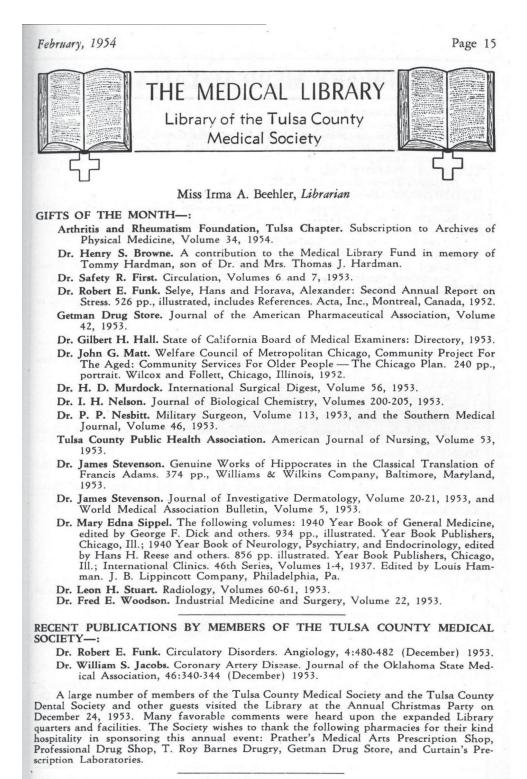
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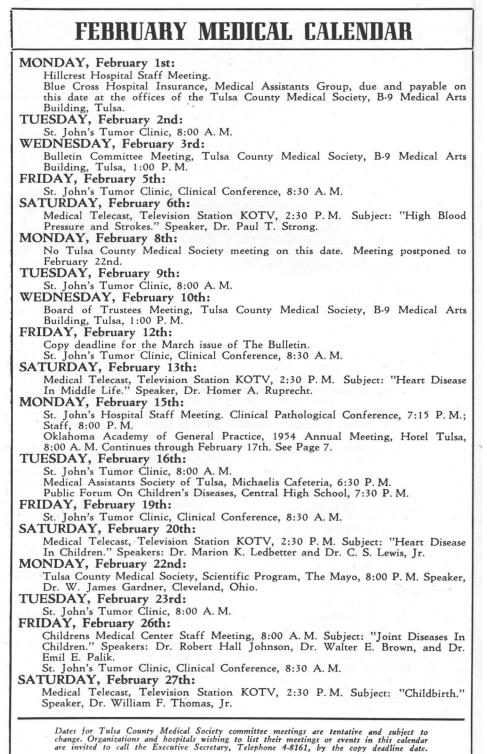




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Page 16

The Bulletin,



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2. Kesten² observed that Pyribenzamine afforded complete relief or suppression of postpenicillin urticarial symptoms in 88% of cases and concluded that Pyribenzamine is a "most useful therapeutic agent in allergic symptoms which follow the administration of antitoxin or penicillin."

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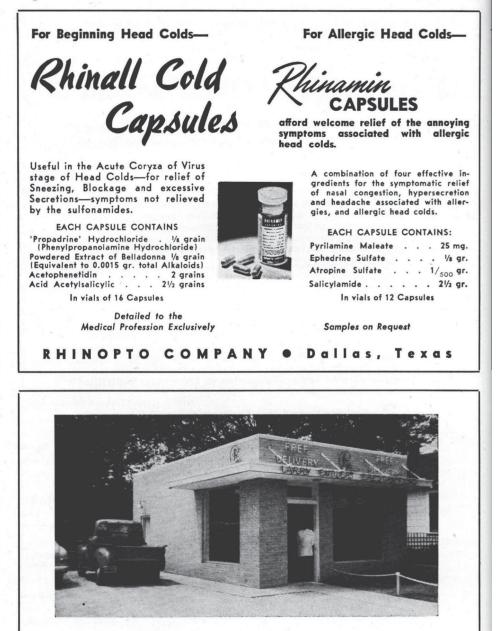
Literature available on request. Write Medical Service Division, Ciba Pharmaceutical Products, Inc., Summit, N.J.

1. SIMON, 5. W.: ANN. ALLERGY 11:218, 1953. 2. KESTEN, 8. M.: ANN. ALLERGY 6:408, 1948. 3. LOEW, E. R.: MED. CLIN. M AM. 34:351, 1950.

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from the files of THE GRIEVANCES COMMITTEE.

a case study

Editor's Note: This is another in a series of popular articles dealing with the work of the Grievances Committee of the Tulsa County Medical Society. Actual names and situations in the cases cited have been carefully disguised and altered to prevent identification and embarrassment to any doctor or patient. These case studies are published to acquaint physicains with the types of complaints being brought to the attention of the Committee and the manner in which they are bandled.

While the tremendous upswing in the sales of prepaid accident and health insurance in the past few years has been a great boon to most physicians, it has brought some practical problems to the doctor. One which is most frequently encountered is the failure of the patient to recognize that the established fee schedule specified in most policies is not intended to fix the doctor's charge or to necessarily pay the total fee. Most such policies are intended only to lighten the burden of severe illness and do not pay total medical costs. Many patients, unfortunately, fail to read their policies carefully and to understand this fact; others are victims of overenthusiastic salesmen who misrepresent the benefits of the policy.

One case which recently came to attention of the Grievances Committee of the Tulsa County Medical Society reflects this situation. The patient complained that a surgeon had charged him approximately double the amount specified in the fee schedule of his surgical care insurance. Once the Committee had ascertained that the surgeon's charges were reasonable for the type of service rendered, an explanatory letter was sent to the patient. While this failed to satisfy the patient, it was the only judicious course the Committee could take. In its comments on the case. the Grievances Committee recommended that doctors would do well to discuss fees in advance with the patient, ascertaining if the patient had insurance coverage, and

determining the approximate additional amount, if any, which the patient would be required to pay. Such tactful discussions with the patient not only eliminate misunderstanding about the charges and the extent of the insurance coverage, but have the further benefit of placing the patient's mind at rest about the charges.

Another person inquired of the Committee if it was necessary that she tell her doctor whether or not she had insurance protection. She frankly admitted her fear that the doctor would increase the fee if he knew she had such coverage. The Committee advised her to be frank with her doctor and expressed the belief that very few physicians are influenced by this factor.

A more curious case in connection with an insurance fee schedule arose recently and will be of interest to the doctor.

The Case: Mr. A., an itinerant worker, suffered a broken arm when he fell on an icy sidewalk near his home. The arm was set by Dr. X, who treated the patient to recovery. Noting that the patient was in a very low income group and supporting a family of five, Dr. X fixed the fee at one-third of his usual charge. The patient was billed on two successive months but without response. At the end of ninety days the patient came to the Doctor's office and displayed a health and accident policy. The doctor noted that the policy's fee schedule specified a fee for the service rendered which was approximately double the actual amount for which the patient had been billed. He filed for the sum specified by the fee schedule and was promptly paid by the insurance carrier.

The patient complained to the Grievances Committee that Dr. X had increased his fee upon learning of the insurance coverage and requested that the doctor be asked to refund the difference between the fee paid and the amount of the original billing. The patient apparently had no pecuniary objective as he requested the refund be made to the insurance carrier.



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The Decision: The Grievances Committee ruled that the doctor was entitled to the amount specified by the fee schedule. This decision was based on several facts: (1) the doctor had exhibited concern for the financial condition of the patient in placing his original fee at one-third of his usual charge; (2) the original fee was determined at a time when the doctor was not aware of the patient's insurance coverage, and (3) the doctor had satisfactorily performed work of a quality and in an amount to entitle him to the fee as specified by the insurance carrier. Moreover, it was noted that the doctor still did not receive as much as his usual fee for the work performed, had worked no hardship upon the patient, and had, at no time, made an effort to profit beyond the amount in the established fee schedule.

The Committee was concerned that the doctor's action in changing the amount of the fee was, under a strict interpretation, a violation of Chapter 1, Section 6 of the American Medical Association's Code of Ethics which forbids the increasing of a fee originally announced to the patient. The Committee felt the circumstances, however, were such to justify the action. While the doctor concerned voluntarily agreed to abide by his original fee, the insurance carrier insisted upon paying the amount specified in the fee schedule after receiving the Committee's explanation of the incident. The patient was also reported as satisfied upon ascertaining the facts.

The Committee was critical of the doctor for not determining at an earlier date if the patient had insurance coverage. The Committee believes the doctor must assume this responsibility and that it is unwise to rely upon the patient for such information. The Committee recommends as a guide to physician's conduct that it would be preferable to abide by the strict interpretation of the Code of Ethics and not increase a fee at any time when it has already been billed to the patient. Although occasionally costing the physician through no fault of his own, it will prevent misunderstanding with patients and the possibility of a subsequent public relations harm to the physician and the profession.

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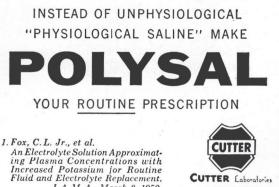
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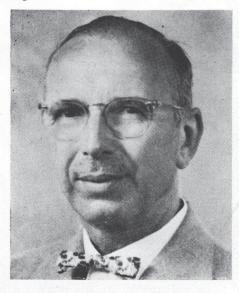
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J.A.M.A., March 8, 1952.

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CLEVELAND NEUROSURGEON TO SPEAK HERE FEBRUARY 22

Dr. W. James Gardner, nationally known neurosurgeon of the Cleveland Clinic, Cleveland, Ohio, will be guest speaker for the Tulsa County Medical Society on Monday, February 22, 1954, at 8:00 p.m. at The Mayo. His subject will be "Relief of Trigeminal Neuralgia by Decompression of the Sensory Root."

Members will please note that the meeting will be on the 4th Monday of the month rather than the second Monday. The Tulsa Academy of General Practice will not meet on that date.

Dr. Gardner is a graduate of the University of Pennsylvania School of Medicine, Class of 1924. He interned at the University of Pennsylvania Hospital at Philadelphia for two years and subsequently served a three year residency in neurology at the same institution. He is a Diplomate of the American Board of Surgery, Fellow of the American College of Surgeons, and a member of the Central Neuro-Psychiatry Association and the Southern Neurological Society. During World War II he served as a Lieutenant-Commander in the United States Naval Medical Corps. Dr. Gardner will be introduced by Dr. Hays R. Yandell.

Other Spring speakers for the Tulsa County Medical Society as announced last month by Dr. Logan A. Spann, Program Chairman, include:

Monday, March 8, 1954. Dr. Harry E. Bacon, proctologist, Philadelphia, Pa.

Monday, April 26, 1954. Dr. Don P. Morris, Professor of Psychiatry, University of Illinois, Champaign, Illinois.

1953 SPECIAL ASSESSMENT TO BE REFUNDED TO DOCTORS

Acting at the meeting of January 11, 1954, members of the Tulsa County Medical Society voted to discontinue a special fund created last year for the ultimate purpose of purchasing or constructing a building to house the Medical Library and Executive offices. The Society also voted to refund a \$20.00 special assessment levied last year for the building fund.

Under the terms of the motion, the \$20.00 paid last year will be applied towards 1954 membership dues. Members who paid the assessment may deduct that amount when paying current dues. Checks in refund of the assessment will be issued in early February to members who have already paid their 1954 dues in full.

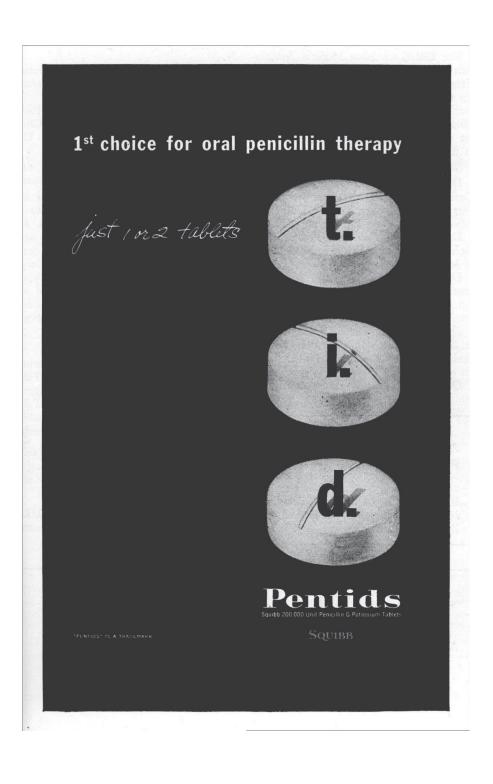
The vote on a proposal to continue the assessment for a second year was tied. Assessments require a three-fourths majority of the total votes cast in order to pass.

DR. EARL M. LUSK TO HEAD GENERAL PRACTICE ACADEMY

Dr. Earl M. Lusk, member of the staff of Tulsa Clinic, was elected President-Elect of the Tulsa Academy of General Practice at the annual business meeting of the organization on December 16, 1953. He will serve as President in 1955, succeeding Dr. L. A. Munding, Tulsa general practitioner who took office January 1st.

Other officers named by the group include Dr. Lowell L. Stokes, Vice-President; Dr. Marshall O. Hart, re-elected Secretary-Treasurer; and Dr. Wilmot B. Boone, reelected to the Board of Trustees. Holdover trustees include Dr. Logan A. Spann and Dr. Wilkie D. Hoover.

DR. SAMUEL L. FRENCH has removed his practice to Paducah, Kentucky.



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OSMA ANNUAL MEETING TO FEATURE TEN GUEST SPEAKERS

The Oklahoma State Medical Association last month announced the names of eight visiting distinguished guest speakers who will appear on the scientific program of the 1954 Annual Meeting in Oklahoma City, May 10-12. Two others, yet to be selected, will bring the total to ten.

Scheduled to appear are:

Dr. J. Robert Willson, Professor and Chairman of the Department of Obstetrics and Gynecology, Temple University School of Medicine, Philadelphia, Pa.

Dr. Earl D. Osborne, Professor of Dermatology, University of Buffalo School of Medicine, Buffalo, New York.

Dr. H. Relton McCarroll, Assistant Professor of Orthopedic Surgery, Washington University School of Medicine, St. Louis, Mo.

Dr. J. Roderick Kitchell, Associate Professor of Medicine, University of Pennsylvania School of Medicine, Philadelphia, Pa.

Dr. Virginia Apgar. Professor of An-

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Dr. E. H. Parsons, Associate Professor of Psychiatry, Washington University School of Medicine, St. Louis, Mo.

Dr. John B. Hazard, Director of Pathology, Cleveland Clinic, Cleveland, Ohio.

Dr. C. Allen Good, Radiologist, The Mayo Clinic, Rochester, Minn.

Speakers in the field of Surgery and Pediatrics will be announced in February.

Tulsa doctors planning to attend are urged to write for hotel reservations at the earliest convenience. Requests for accommodations should be placed with the Hotels Committee, Oklahoma State Medical Association, 1227 Classen Drive, Oklahoma City, Oklahoma. Do not write hotels directly. Please state type of accommodation desired, dates of arrival and departure, and give first and second choice of hotels.

DR. J. E. BROOKSHIRE was recently honored by the Akdar Shrine of Tulsa for over 53 years of service to the organization. A Life Member of the Tulsa County Medical Society, Dr. Brookshire has been a member of the Masonic Lodge

DR. LAWRENCE A. DENNEY, former Tulsa physician now practicing at Chula-Vista, California, was a Tulsa visitor last month.

Its a daughter for DR. and MRS. THEODORE TURNBULL, born December 21, 1953.

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LETTERS

Editor, The Bulletin:

At the January 11th meeting of the Tulsa County Medical Society, the membership failed to authorize a proposed assessment of \$20.00 to continue the Library Building Fund set up last year. It was also voted to refund the \$20.00 collected for this purpose in 1953. This action was taken by a small group of members present—about one-sixth of the total membership—and of this number only half voted to reject the proposed assessment. Thus, the assessment failed by perhaps 12 or 13 votes.

I believe this action represents one of the most backward steps ever taken by the Tulsa County Medical Society, and ours is a Society which has gained a wide reputation for its progressiveness. Many members were as shocked as I to learn of the action, and in talking with numerous doctors I know that a large segment of the Society shares my sentiments. The action demonstrates a lack of far-sightedness and understanding in regard to our Library problem. We have now expanded to the limits of the present Library quarters and in five years or so we will again be faced with the problem of where to keep our growing collection of books and journals.

The Library of the Tulsa County Medical Society is a splendid asset to the medical profession of Tulsa-one which few cities of our size enjoy. I cannot conceive that any Tulsa doctor would want to limit its usefulness, nor can I conceive that any Tulsa doctor would deny its practical value. At the same time, in keeping with our pattern of progress, the Society should own its own building at some time in the near future. Many other county medical societies, including our neighbor at Wichita, have done so to their benefit. If we fail to keep pace with medical progress, we are damaging ourselves, our patients, and our profession.

Many doctors have suggested to me that regardless of the action taken at the January 11th meeting, that we leave our contributions to the Building Fund intact

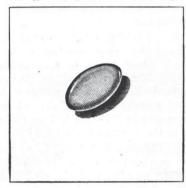
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and continue to contribute to it each year. I have already requested the Executive Secretary to leave my assessments in the Fund, and I intend to continue to do so for the next three years. I hope that those members who share my sentiments will follow my action. In this way we can retain sight of a useful objective. We will sincerely regret it in the years to come if we let this project die.

John G. Matt, M.D.

CARDIOLOGY CLINIC SET

A day-long cardiology clinic at Hillcrest Hospital is planned for Thursday, March 18, 1954, by the Tulsa Academy of General Practice. Visiting guest speakers and local physicians will appear on the program. The clinic will replace the Academy's usual monthly meeting.

Its a daughter for DR. and MRS. EMIL M. CHILDERS, born January 6, 1954.

DR. ROBERT E. FUNK has closed his professional offices and will reside in San Diego, California, for several months while recuperating from an illness.

Recent speakers for the Central High School Pre-Med Club have included DR. CARL C. MORGAN, JR., DR. MANUEL BROWN, and DR. ROBERT L. IMLER, JR.

DR. DAVE B. LHEVINE has entered upon a four months course of advanced study in Atomic Medicine at Mount Sinai Hospital of New York, N. Y. In March he will go to Oak Ridge, Tennessee, to attend the Oak Ridge Institute for Nuclear Studies.

DR. CLIFFORD W. ALLEN, Tulsa neurosurgeon now serving with the United States Navy is now stationed at the Naval Hospital at Bethesda, Maryland. Dr. Allen recently completed several months duty in Korea, where he was present at Freedom Village during a part of the prisoner exchange.

DR. HENRY S. BROWNE will be a guest speaker at the American College of Surgeons meeting in Chicago, March 2, 1954.

DR. JOHN G. MATT has taken attractie new professional offices at 1105 Medical Arts Building, Tulsa.

LONG BEFORE HOT FLUSHES APPEAR ...

Patients presenting such classic menopausal symptoms as hot flushes cause little diagnostic difficulty. However, throughout the period of declining ovarian function which may begin long before hot flushes appear, many women complain of distressing symptoms which though less clearly defined are actually due to estrogen deficiency. For example, insomnia, headache, easy fatigability, and symptoms affecting the bones, joints, and the skin may not be readily identified as due to estrogen deficiency because they may occur years before, or even years after cessation of menstruation.

Investigators^{1,2} have found that as the body attempts to adjust itself to declining estrogen production, a number of symptoms may appear which call for the prompt institution of estrogen replacement therapy. These symptoms may be nervous, circulatory, arthralgic, or dermatologic in character because the loss of ovarian hormone "withdraws one of the most important regulators of the organism"s and affects many body functions. If such metabolic imbalance or deficiency is evidenced, the administration of estrogen is clearly indicated.

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- Werner, A.: Acta endocrinol. 13:87, 1953.
 Malleson, J.: Lancet 2:158 (July 25) 1953.
 Goldzieher, J. A., and Goldzieher, J. W.: Endocrine Treatment' in General Practice, New York, Springer Publishing Company, Inc., 1953, p. 23.



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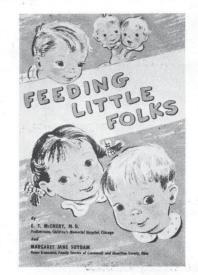
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BLOOD CENTER NEWS

DISTRIBUTION & REPLACEMENT REPORT

December, 1953

Hospital:	Bloods Used:	Replace- ments:	% Repl.
St. John's		205	36.5%
Hillcrest		175	51.6%
Osteopathic	54	25	46.3%
Byrne		11	45.8%
Mercy		11	61.2%
Moton	11	0	0.0%
Tulsa Osteo.	2	1	50.0%
Broken Arrow		0	0.0%
Other	32	15	50.0%
Totals	1,046	445	42.5%

The Tulsa County Red Cross Blood Center observed its fifth anniversary on January 11, 1954, as a project of the Tulsa County Chapter of the American Red Cross and the Tulsa County Medical Society.

The progress of the Center in those five years is reflected by the figures for blood distribution to hospitals: 1949, 6,059 pints; 1950, 7,269 pints; 1951, 8,869 pints; 952, 10,116 pints; and 1953, 11,330 pints. The Center had 13,747 donor visits in 1953 compared to 6,623 in 1949. A marked increase in the number of donors referred by participating firms and organizations with 5,843 coming from this source in 1953 as against 2,969 in 1949.

Group leaders of donor teams at Tulsa industries, firms, and organizations were presented with ceramic achievement trophies by the Center at special ceremonies on January 21st. An outstanding record was that of Douglas Aircraft Corporation whose employees made 2,110 donor visits to the Center.

Mr. Robert S. Meredith, Blood Center Administrator, estimates 1954 needs at 12,270 pints. This will require approximately 15,500 donor visits since the rejection rate is now 20 per cent.

The breakdown of weekly blood needs by types is as follows: O Positive, 95 pints; A Positive, 78 pints; O Negative, 19 pints; B Positive, 18 pints; A Negative, 14 pints; AB Positive, 7 pints; B Negative, 3¹/₂ pints; AB Negative, 1¹/₂ pints.

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MEDICAL TELECASTS TO BE SEEN AT NEW TIME

The popular series of medical telecasts jointly sponsored by the Tulsa County Heart Association and the Tulsa County Public Health Association, now seen each Saturday over Television Station KOTV, has been rescheduled at the new time of 2:30 P. M.

Members of the Tulsa County Medical Society who will appear in February include:

February 6th: "High Blood Pressure and Strokes," Dr. Paul T. Strong.

February 13th: "Heart Disease in Middle Life." Dr. Homer A. Ruprecht.

February 20th: "Heart Disease in Children." Dr. C. S. Lewis, Jr., and Dr. Marion K. Ledbetter.

February 27th: "Childbirth." Dr. William F. Thomas, Jr.

The series is under the direction of Mrs. Allan Craig and Dr. R. C. Pigford.

G. P. CONVENTION

(Continued From Page 8)

10:40 A.M. "Pernicious Anemia." Speaker to be announced.

11:20 A.M. "Neurologic and Psychiatric Problems of the Aged." Dr. Jackson Smith, Houston, Texas.

11:50 A.M. Questions and Answers Panel.

12:30 P.M. Luncheon.

2:00 P.M. "Peripheral Vascular Disease." Dr. Eugene Ellis, Los Angeles, Calif.

3:05 P.M. "Eye Disorders In Old Age." Speaker to be announced.

3:35 P.M. Coffee recess.

3:50 P.M. "Rheumatic Problems in the Aged." Dr. Irving B. Steck, Chicago, Illinois.

4:25 P.M. "Nutritional Aspects of Aging." Dr. William B. Kountz, St. Louis, Missouri.

5:00 P.M. Questions and Answers.

5:30 P.M. Social Hour.

DR. THOMAS A. McDOWELL, Tulsa surgeon now serving with the United States Navy Medical Corps, has been transferred to a new assignment at Havana, Cuba. Dr. McDowell visited in Tulsa over the Christmas holidays.



The Bulletin,

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February, 1954

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