

Texas

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Leave in book

# OSTEOPATHIC PHYSICIANS

# Journal

VOLUME XXII

FORT WORTH, TEXAS, NOVEMBER, 1965

NUMBER 7



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# Texas Osteopathic Physicians' Journal

OFFICIAL PUBLICATION OF THE  
TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS

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VOLUME XXII

FORT WORTH, TEXAS, NOVEMBER, 1965

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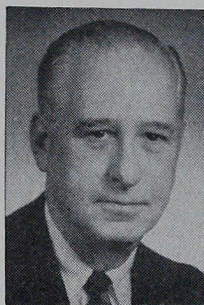
## Annual Postgraduate Seminar

December 3-4, 1965

Statler Hilton Hotel

Dallas, Texas

### GUEST SPEAKERS



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Senior and Consulting Surgeon,  
Detroit Osteopathic Hospital  
Detroit, Michigan



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Section of Hematology,  
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# SEALS—

stepping stones  
to better  
health...

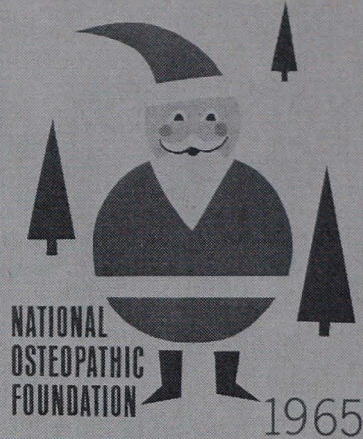


MRS. DONALD E. HACKLEY  
State Funds Chairman

Stepping stones are a sign of progress and advancement. No better description can be given to Osteopathic Seal proceeds. As we consider each contribution to the annual Osteopathic Seal drive, let us remember that student loans and research are directly linked to progress and advancement for this profession.

The students who finish their medical education thanks to Seals are the future standard bearers for osteopathic medicine. They will be the direct benefactors of the finest medical training available. Finest because they will be steeped with the concepts of osteopathic medicine and all other methods for treating health and disease. Their ability to apply the

STUDENT LOANS / RESEARCH



osteopathic health care concepts with these other therapeutic aids truly will make them well rounded physicians and future leaders of the profession. The research conducted by our colleagues and hospitals is another sign of progress in the profession. Not only will it help in combating the afflictions that plague us, it will also allow us to continue researching the concepts that makes this profession a separate and distinct school of medicine.

The money you give to Osteopathic Seals, will provide these stepping stones, not only this year but in years to come. With this in mind, why not make that contribution just a little larger?



# 26 Texas Freshmen Enroll

An outstanding group of young Texans was enrolled in September to begin the four year program leading to the coveted "D.O." degree.

Sixteen Texans were accepted at Kansas City College of Osteopathy and Surgery, seven were enrolled at Kirksville College of Osteopathy and Surgery and three were enrolled at College of Osteopathic Medicine and Surgery.

Pre-osteopathic medical training was received by this group from some of the finest universities in the country. A partial list of colleges previously attended includes:

Baylor University  
Texas Technological College  
North Texas State University  
University of Houston  
Abilene Christian College  
Lamar Tech  
West Virginia University  
University of Texas  
Texas Christian University

Names of the students and city of residence in Texas are:

## K.C.C.O.S.

George E. Bryant, Port Neches  
Gary D. Carter, Fort Worth  
Melvin E. Curry, Burleson (TAOP&S  
Scholarship Awardee)  
Donnie D. Davis, Abilene  
Roddy A. Gardner, Pecos  
Nancy K. Giles, Fort Worth  
Charles A. Hayden, Houston  
Robert D. Henley, Houston  
Gerald E. Hoffman, Houston  
Frank Jackson, Paris  
Ronnie L. Nelms, Lubbock  
Richard M. Olson, Dallas

Walter A. Pressly, Fort Worth  
Frank W. Roberts, Odessa (A.O.A.  
Auxiliary Scholarship Awardee)  
Bruce E. Weaver, Amarillo  
William E. Whitley, Dallas

## K.C.O.S.

J. R. McLean, Jr., Jacksonville  
Robert G. Maul, Lubbock  
Glenn R. Monte, Port Arthur  
Ben L. Northam, Fort Worth (Phil  
R. Russell Scholarship Awardee)  
Reginald Platt, III, Houston  
John Thomas Taylor, Brownwood  
(TAOP&S Scholarship Awardee)  
Eugene W. Williams, Jr., Dallas  
C.O.M.S.  
Larry J. Breitenstein, Fort Worth  
Charles W. Rudd, Houston  
Michael F. Wright, Rising Star

Some osteopathic colleges note occasional unrest in the student body caused by ill-advised talk by the few on "merger". Undergraduates want assurance that the profession they are studying to join will remain separate and distinct. Undergraduates' feelings are best expressed in this statement by the president of one class, "If you don't stay separate and distinct, you admit to being second rate and unfit by trying to tag along with a self-confessed first rate crowd." Because of the high caliber of intelligence represented in the student bodies of your osteopathic schools these young people could have gained admission to medical schools. Having made the decision to be D.O.'s they feel that they are entitled to confidence in the future of the profession, not just staying in existence but moving forward on all fronts to an even better tomorrow.

## Re-elected Again

Dr. Harry B. Elmetts, COMS 1946, Chairman of the Department of Pharmacology, has been re-elected for an

unprecedented fifth term as Chairman of the American Osteopathic Board of Dermatology.



# Six Texas State Scholarships Awarded



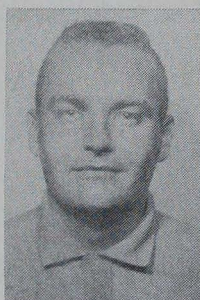
LARRY DULLYE



BOBBY RAY HALEY



FRANKLIN O. HERREN



JOEL DAVID HOLLIDAY



BILLY A. PURYEAR



DONALD W. ROACH

Six osteopathic students were recently awarded one-year scholarships of \$800 each made available by the Texas Legislature in its recent regular session. The Legislature appropriated \$9,600 for a two-year period to be paid to the colleges for tuition of applicants selected by TAOP&S. Dr. Elmer C. Baum, Chairman of the Public Health Committee, said the scholarships will be awarded to applicants each year on the basis of academic achievement, financial need, Texas residence and other requirements as evaluated by the Committee.

Funds in the budget of the Coordinating Board of the Texas College and University System have been made available to the Texas State Board of Medical Examiners which will forward them to the colleges for payment only on tuition this academic year.

The winners of the scholarships, selected from among 41 applicants, are:

Larry Dullye, San Antonio, a senior at Kansas City College of Osteopathy and Surgery. He received his pre-medical training at Trinity University where he was graduated with a B.S.

Bobby Ray Haley, Amarillo, a junior at Kirksville College of Osteopathy and Surgery. He received a B.S. from West Texas State University and served an externship at Fort Worth Osteopathic Hospital this past summer.

Franklin O. Herren, Mineola, a senior at Kansas City College of Osteopathy and Surgery. He was graduated with a B.S. from Abilene Christian College.

Joel David Holliday, Lufkin, a senior at Kansas City College of Osteopathy and Surgery. He received a B.S. from Stephen F. Austin State College and served a senior externship this past summer.

Billy H. Puryear, Weatherford, a sophomore at Kansas City College of



Osteopathy and Surgery. He was graduated with a B.S. from East Texas State University and received a certification in physical therapy from Baylor University School of Physical Therapy.

Donald W. Roach, Houston, a sophomore at Kansas City College of Osteopathy and Surgery. He received his B.S. from the University of Houston.

## Dr. McGrath President of Academy of Orthopedics



THOMAS T. McGRATH, D.O.

Dr. Thomas T. McGrath of Fort Worth was installed as president of the Osteopathic Academy of Orthopedics at its recent meeting in Houston. He has previously served as its second vice president.

Dr. McGrath is also a fellow in the American College of Osteopathic Surgeons and is immediate past president of the Texas Society of Osteopathic Surgeons.

A graduate of Kansas City College of

Osteopathy and Surgery, he previously served as chairman of the Department of Surgery and of the Department of Orthopedics at the College.

## Dr. Stern President of Anesthesiologists



PAUL A. STERN, D.O.

Dr. Paul A. Stern of Dallas took office as president of the American Osteopathic College of Anesthesiologists during the group's recent meeting in Houston.

Dr. Stern has been chairman of the anesthesia department of Dallas Osteopathic Hospital, which he helped found, since 1951. He is currently the hospital's director of medical education and has previously served as its secretary-treasurer and chief-of-staff.

A graduate of Kansas City College of Osteopathy and Surgery, Dr. Stern was made a fellow of the College of Anesthesiologists and elected to its board of governors in 1963.

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# Do You Know How Your Texas State Board of Medical Examiners Operates —



M. H. CRABB, M.D.

Have you ever wondered what the Texas State Board of Medical Examiners is doing for you? We are not going to bore you with its history, but believe you should know that your present Board was established in 1907, combining allopathic, osteopathic, eclectic, and homeopathic physicians under one Board. The Medical Practice Act of 1907 made no provision for doctors to register and pay an annual Registration fee. The Board had little authority other than licensing physicians.

In 1919 the law was amended to provide for revocation of a physician's license upon his conviction in the State or Federal Court of a crime of the grade of felony, or one involving moral turpitude, or for aiding, abetting or procuring an abortion, and set forth the provision that practitioners could not prescribe narcotic drugs to habitual users, except in the course of their professional practice.

In 1931 the law was amended. It provided that all doctors be required to record their licenses in the District Clerk's Office in the county in which they resided. Also, every doctor was required to register with the Texas State Board of Medical Examiners and pay a fee of \$2.00 annually. This money was to be used for the enforcement of the Medical Practice Act. In 1932 there

were about 5800 physicians registered with the Board. However, due to lack of funds it was impossible to enforce the Medical Practice Act as it should have been. At times we had no investigators, and sometimes one investigator for part time to cover the State of Texas.

From 1907 to 1953 there were no physicians' licenses cancelled. The workload of our Board Office, which was understaffed, steadily increased, and it was impossible for adequate records to be kept. It was apparent that our funds were insufficient for the proper functioning of the Board.

In 1953 the Medical Practice Act was amended and the Annual Registration fee was raised to \$5.00, examination fees were raised from \$25.00 to \$50.00, and reciprocity fees increased from \$50.00 to \$100.00. House Bill 254 was passed giving your Board the authority to cancel, revoke, or suspend a doctor's license for unprofessional conduct. Prior to this time your Board did not have this power. With the increase in revenue, this gave your Board adequate finances to move forward. Immediately three full time investigators were hired and we began to file suits on quacks, cite physicians who were violating the Medical Practice Act to appear before the Board in order to reprimand them or suspend or cancel their licenses.

Since October, 1963, we have had four Investigators. In the past four years 2,006 complaints have been filed; 3,155 investigations made; 183 cases filed in the Court; 63 cases filed with the Board; 55 convictions by the Court; 54 convictions by the Board; and 59 injunctions filed on quacks. During meetings from 1956 through December, 1964, the Board has held 311 hearings,



and in addition 72 Board actions have been taken without hearings. The following is a breakdown of these actions taken during this period of years, 1956 to 1964: 63 licenses revoked; 8 licenses suspended; 17 doctors reprimanded; 11 cases dismissed; 17 narcotic permits suspended; 16 no-actions taken on the doctors; 18 licenses restored; 20 narcotic permits restored; 27 requests for narcotic permits denied; 35 reinstatement of licenses denied; 22 physicians requested by the Board to be cited or appear before the Board; 8 licenses restored which had been cancelled for nonpayment of fee and because questionable information had been received during the processing of their applications; 80 personal probationary reports to the Board, in accordance with the terms of probation; 2 decisions on hearings postponed; 7 licenses restored by the Board and the doctors put on probation; 2 doctors' probationary terms changed due to excellent rehabilitation; 1 probationary report to the Board waived due to the doctor's excellent progress of rehabilitation; and no action taken on 1 application for reinstatement of license.

In 1955 Remington Rand was hired to install the best filing system available for our office. The records had never been revised since 1908. This was a tremendous undertaking. At that time we had in our "unable to locate" file the names of hundreds of doctors who had never registered with the Board and paid their Annual Registration fee in accordance with the law. Registered letters were sent to them at their last known address notifying them that their license would be cancelled. We cancelled 450 licenses. Today this procedure is followed on March 1st of each year in accordance with the law. During the revision of our files we found hundreds of files on physicians who were deceased. These were separated from the current ones. Today this is done on a monthly basis.

We have a Medical Register card

file giving all pertinent information on 16,580 physicians licensed in Texas. All investigation information compiled is cross referenced to the individual's permanent record card so that we may know at a glance whether we have questionable information on that particular doctor.

About 10 years ago Dr. Casberg from the University of Texas wrote us for statistical information relative to the migration of doctors to and from Texas, the number of physicians licensed from Texas and out-of-state schools, etc. It required three girls working approximately three weeks to compile this information. Today, this information could be given by return mail, as we have statistical information on every phase of this office, which is kept on a perpetual and yearly basis. We are very proud of our Statistical Department.

In 1960 the Board instituted a program requiring all physicians not licensed in Texas to apply for institutional permits to serve an internship or residency, or work in a Texas Hospital. All foreign graduates were required to be certified by the Educational Council for Foreign Medical Graduates. The hospitals have been most cooperative with us in carrying out this program. In 1964 we issued Institutional Permits to 245 U.S. graduates and 47 foreign medical graduates for internships, and 250 U.S. graduates and 247 foreign graduates for residencies. In addition there were 647 serving a residency and 149 serving internships who were licensed in Texas, making a total of 1,585.

As an example of increase, the number of our reciprocity applicants has increased from 197 for the year 1954 to 354 for the year 1964, and foreign medical graduate applicants for the same years from 11 to 145.

All foreign medical graduates are required to appear for a personal interview when their applications are considered for admittance to the examina-



tion or for a permanent license by reciprocity. Today, all applicants are checked very thoroughly—not only for their medical qualifications, but also for their moral character. Physicians on whom questionable information is received during the processing of their applications are required to appear for a personal interview before the Board when their applications are considered. Physicians who allow their licenses to be cancelled for nonpayment of fee and request reinstatement must reapply to the Board and file an application. They are also investigated very thoroughly.

The total pieces of mail sent out by the office from 1960 through 1964 has been: Annual Registration 163,758, General Correspondence 87,951, or a total of 251,709.

We issue a Directory of Physicians who are currently licensed as of March 15 of each year. Today about 2,000 copies of this directory are mailed complimentary each year.

Our personnel staff has increased from three to fourteen, including an attorney for the Board in conjunction with the Attorney General's Department.

Due to the increased workload and rising operating costs, we have found it necessary to raise your Annual Registration fee from \$5.00 to \$10.00. This additional revenue will enable the proper functioning of your Board, to afford increasing vigilance for the protection of the public, and serve you better in the coming years.

M. H. CRABB, M.D., *Secretary*  
Texas State Board of Medical Examiners

Mattern 100 M.A. X-Ray with tilt table, fluoroscope, spot attachment, cassettes, hangers, etc. Excellent machine for general practitioner. Looks like new. Write or telephone collect: Dr. H. H. Edwards, 3814 Broadway, TAYlor 4-8211, San Antonio, Texas.

## Van O'Linda Memorial

Numerous inquiries and a substantial number of memorial gifts have been received at the Kirksville College of Osteopathy and Surgery and by the family of recently deceased Dr. Calvin Van O'Linda. Those inquiring and giving have wished to know what was planned as a memorial to the able and well-liked young physician and teacher whose death has been such a blow to the College and to all who knew him. A review of Dr. Van O'Linda's annual reports reveals that he had sought vigorously for several years to improve the obstetrical department with a partition and doors to separate it from the central and more public area of the hospital, and through remodeling and renovation of patient rooms. Funds being unavailable these improvements had not been achieved at the time of his death. It is believed that no other memorial could be devised that would be as gratifying to all donors as the development of the obstetrical floor as the Van O'Linda Memorial Wing of KOH.

The feeling of faculty and staff about the proposed memorial was well expressed by Dr. Richard E. Eby, "Probably no one has worked beyond his capacity more than did Cal. His patients and colleagues alike hold his memory in high esteem despite the relatively few years he was spared to serve them. The designation of the OB-Gyn wing as a living tribute to his zeal and painful dedication will be beautifully and lastingly appropriate."

Contributions to the Van O'Linda Memorial Fund are being received by Mrs. Martha Van O'Linda at 26 Grim Drive in Kirksville, by President Morris Thompson at KCOS administrative offices and by Mr. Clare Pearson, Administrator at KOH. All contributions will be acknowledged and devoted to the development of the KOH facilities for obstetrics and gynecology as the Van O'Linda Memorial Wing.



# American Osteopathic Association

Office of

CARL E. MORRISON, D.O.

Chairman: Council on Federal Health Programs

1757 K. Street, N.W.

Washington, D.C.

October 12, 1965

## Washington News Letter

*Osteopathic College Assistance Bill Sent to President.* Yesterday afternoon, the House concurred in the Senate amendments to H. R. 3141, which had passed the Senate September 30th. The House concurrence sent the bill to the President. The legislation in its final form (1) extends for three years the existing program of grants for construction and renovation of schools of osteopathy, (2) extends the existing program of student loans for osteopathic students, raises the maximum individual loan per year from \$2,000 to \$2,500, and authorizes "forgiveness" of up to 50% of a loan made to an osteopathic student if he practices in a designated shortage area, (3) authorizes a new program of grants to osteopathic schools for improving the quality of education, including basic improvement grant to each osteopathic college of \$12,500 plus \$250 for each full-time student during the first year of the program, and \$25,000 plus \$500 for each full-time student for each of the subsequent 3 years, and special improvement grants to each osteopathic college with possible qualification for up to \$100,000 the first year, with possibilities ranging up to \$400,000 in the succeeding years, but in order to qualify a school would have to expand its first-year enrollment by 21½% or five students whichever is greater over its highest first-year enrollment in any of the years 1960-65, UNLESS THE SCHOOL CONVINCES THE SURGEON GENERAL THAT SUCH EXPANSION WOULD LOWER THE QUALITY OF TRAINING IN WHICH CASE THE SUR-

GEON GENERAL MAY WAIVE THE EXPANSION REQUIREMENT, and (4) authorizes scholarships for osteopathic students from low-income families of up to \$2,000 for 10% of all its first year students in 1966, 10% for all first-, and second-year students in 1967, 10% of all first-, second-, and third-year students in 1968, and 10% of all students in 1969. The bill creates a National Advisory Council including osteopathic representation to advise the Surgeon General with respect to the administration of improvement grants and scholarships. In anticipation of passage of the bill, Drs. Richard N. MacBain and Dale Dodson attended a conference in Washington on October 1st to discuss application of the bill, called by PHS.

*Heart Disease, Cancer, and Stroke Amendments Become Law.* On October 6th, the President signed S. 596 (H. R. 3140), cited as the "Heart Disease, Cancer, and Stroke Amendments of 1965", Public Law 89-239. This law is primarily due to recommendations and supportive data contained in the December 9, 1964 Report of the President's Commission on Heart Disease, Cancer, and Stroke. Copies of Volume I of the Report were mailed by HEW to the osteopathic profession, and copious extracts were published in the February D.O.

The law provides for programs utilizing existing institutions. It provides for cooperative arrangements whereby teaching institutions in cooperation with clinical centers in the area and with the hospitals in the area, and other health



activities, shall set up an advisory local committee, which will decide the program within that area. Upon approval by the local advisory committee, an application is then made to the Surgeon General for funds to establish and operate the program at the local level. The program might pay part of the expenses of establishing at community hospitals directors of continuing education. It could pay expenses of programs of continuing education involving visits by personnel from the participating teaching institution and its affiliated hospital to community hospitals. New and sophisticated equipment could be procured for community hospitals and doctors and supporting paramedical personnel can be trained in its use. Research programs could be conducted at affiliated research institutions and the training of medical students,

graduate students, and researchers could be improved through programs of cooperation between the medical schools, including osteopathic schools, the research institutions, local hospitals, and practicing physicians.

During House debate, House Commerce Committee Chairman Oren Harris stated: It is estimated one of the programs will cost approximately \$4.5 million a year. We would start out the first year, from what we know, with approximately eight that will be established and for the second and third years some 17 or more. These would serve as pilot projects distributed as equitably as possible throughout the United States whereby it would encourage others, and they would be able to establish similar programs in an effort to ultimately make this available throughout the whole country.

## Writing on Water

By GEORGE W. NORTHUP, D.O., A.O.A. *Editor*

## AOA Editorial

Shakespeare tells us that, "Men's evil manners live in brass; their virtues we write in water." He might well have been writing concerning the recording of osteopathic structural findings in hospital patient records.

With the advent of regional planning councils, osteopathic hospitals throughout the nation are called upon, as never before, to explain and demonstrate the need for new *Osteopathic* hospitals and expansion of established ones. Automatically we turn to the required structural analysis sheet in our hospital records. Too often, we wish we could turn back.

Unfortunately, the structural chart on hospital records has become more of a mechanical requirement than a diagnostic tool. It can be useful, but too often we have not made it so.

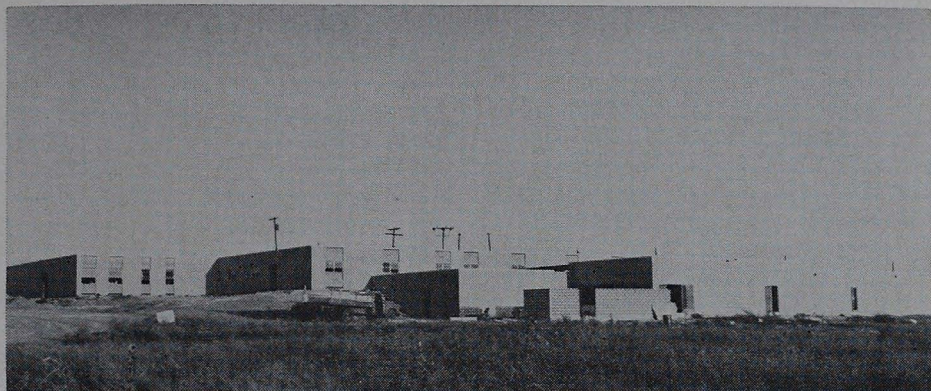
As outside agencies begin to evaluate our institutions, and as our ability to expand and build new hospitals may depend on our ability to demonstrate our distinctiveness, greater attention must be focused on accurate and meaningful recording.

Fortunately, groups within the framework of the American Osteopathic Association and some state associations have programs under way to standardize, simplify, and make more practical the reporting of structural analyses on patients entering osteopathic hospitals.

The structural analysis as part of the diagnostic work-up of a hospital patient certainly should be one of the virtues of osteopathic medicine and osteopathic hospital care. May we not write our virtues "on water" but rather in a clear-cut and meaningful manner.



# Trinity Osteopathic Medical Center Nearing Completion



The Trinity Osteopathic Medical Center, a combination 9,000 ft. clinic and 45 bed hospital, for which ground-breaking was in April, is making steady progress toward completion and is on schedule according to the contractor, Mr. Ken Kemp, with an opening date sometime in December of this year. The hospital is located in Carrollton, Texas.

The institution will have several unique features. The out-patient clinic consists of some 16 treatment rooms, with offices for six or eight doctors, to provide adequate out-patient care for both civilian and industrial medical and minor surgical difficulties. The hospital proper offers complete laboratory facilities for both the hospital and clinic, as well as full X-ray facilities and emergency room care. There are both major and minor surgeries and obstetrical labor and delivery room. There is an adequate facility for new born babies and a unique feature of a closed section psychiatric area which will provide lounges, reading rooms, an outside patio and special therapy areas for art and music therapy. The hospital also has a chapel for those who are in need of spiritual solace.

Doctors in the clinic will consist of D.O.'s Dan B. Whitehead, general sur-

geon; Dean Allen Schmidt, qualified obstetrician and gynecologist; Robert Winslow, general clinician; Leon R. Lind, anesthesiologist and general clinician and Ralph I. McRae, psychiatrist. The hospital will be open to both M.D.s and D.O.s who are qualified in their special field of endeavor and wish to use the institution for their patients.

Construction is of sound masonry fire-proof type with terrazzo floors, metal lathe and plaster walls with metal door frames. All heating is by electricity except for cooking. All bed-rooms have available oxygen and suction for emergency and special care of difficult problems. Every effort has been made to provide the community with a modern hospital facility which has a very fine potential for future expansion as the area grows.

Medical space available in new modern clinic for one physician. 1460 sq. ft., private office, reception and examining rooms.

For information call or write  
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4713 W. Commerce St.  
San Antonio, Texas  
GE 3-3371.



# G-6PD and GSH Deficiency with Case Report

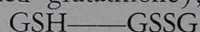
by C. D. BRASHIER, D.O., Resident  
Internal Medicine, Dallas Osteopathic Hospital

The integrity and balance of red cell strength is largely regarded as an inherent metabolic composure of the erythropoietic tissues. For several years the hemolytic characteristics of the 8-aminoquinoline radicals has excited the interest of research into the preservation of this integrity. Logically, the primaquine sensitive erythrocytes were affected through an interference reaction in their basic metabolic routes. Metabolism must occur under aerobic or anerobic circumstances. Symbiotic existence is reflected by the intra-erythrocytic contents.

The major glucose pathway is anerobic and the hexose catabolism yields lactic acid with the release of high energy phosphate bonds which convert ADP (adenosine diphosphate) to ATP (adenosine triphosphate). During this reaction, or glycolysis, one mole of

DPN (diphosphopyridine nucleotide) is reduced.

An alternate glycolytic catabolic system is the hexose monophosphate shunt. This is oxygen dependent or aerobic and the glucose is phosphorylated at the 6 position. Oxidation here precludes the formation of 6-phosphogluconic acid through the action of G-6PD (glucose 6-phosphate dehydrogenase). The reduced substance of this reaction is TPN or triphosphopyridine nucleotide. GSH (reduced glutathione) is a tripeptide of glutamic acid, cysteine, and glycine. GSH undergoes oxidation to form GS-SG (oxidized glutathione), i.e.,



GSSG may then be reduced to GSH in the presence of glucose 6-phosphate if a hydrogen ion donor or G-6PD is available. GSH content of the red cell is an important stabilizing factor. Red cells from drug sensitive patients are deficient in GSH.

It is evident that G-6PD is mandatory in the conversion and utilization of the hexose monophosphate shunt and the reduction of GSSG to GSH. The 8-aminoquinoline drugs, phenylhydrazine, furadantin, ascorbic acid, naphthalene, sulfas, fava beans, and certain vitamin K derivatives radically and rapidly destroy the GSH content of erythrocytes in sensitive patients and does not affect GSH concentration in non-sensitive patients. TPNH (reduced triphosphopyridine nucleotide) may also accelerate the reduction of GSSG to GSH; however, this compound is dependent upon the amount of TPN available. In primaquine sensitive patients, intracellular TPNH is markedly altered due to the concurrent lack of TPN and TPN reductase.

Obviously, the errors in metabolism are due to concentration and availabil-

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ity of GSH, TPN, TPNH, and Oxygen. Each is G-6PD dependent or related. Since the older erythrocytes seem to be affected in the hemolytic crisis, it would follow that the younger cells are richer in G-6PD. This assumption is generally agreed upon; however, conflicting reports are published, probably due to the varied methods of G-6PD activity assays. None the less, hemolysis is rapid, severe, and ceases spontaneously when the older cells are collectively destroyed. Thus eliminating the possibility of a terminal experience.

The genetic transport is uncertain; however, recessiveness with sex linkage or sex limitation is the consensual view.

Susceptible peoples include the Iraqi Jews, American Negroes, and peoples of India, Formosa, Thailand, Italy, Greece, Spain, Bulgaria, Africa, and West China. The occurrence of G-6PD deficiency in areas of a high malaria incidence has disclosed the relative immunity these patients have to the malaria parasite—similar to patients with sickle cell hemoglobin disease. Commercial laboratory testing of G-6PD activity include the direct G-6PD assay, GSH-linked assay, spectrophotometric measurement of TPN, and the rapid cresyl blue dye test. The cresyl blue test is accurate and provides the substrate G-6PD with the additive TPN.

### Case Report

Twenty-one month old negro male entered Dallas Osteopathic Hospital in an acute hemolytic crisis. The sclerae were markedly icteric. Repeated abdominal palpation revealed no hepatosplenomegaly. Close inspection of the conjunctiva, buccal, palatine, and sub-onyx areas disclosed no petechiosis.

History denoted an upper respiratory infection requiring a visit to a physician three days prior to hospital admission. A combined sulfa preparation was prescribed and a total of six doses had been consumed previous to admission. No other medicines had been taken in the past six months.

Admitting RBC 2,350,000, WBC

18,000, Hb 22% or 3.0 gms., 61 Segs, 37 Lymphs, 2 Stabs, and Hct 11.0 vol%. Marked anisocytosis and poikilocytosis with numerous nucleated red cells were demonstrated on the peripheral smear.

The pro-thrombin time was 40 seconds with a 16 second control. There was a trace of hemoglobin in the urine. Direct and indirect Coombs were negative as were the cold agglutinins. The alkaline phosphatase was 5.1 Bodansky units, potassium 5.1 mEq/l, SICK 380 units, SGOT 50 units, and sodium 138 mEq/l.

The total bilirubin was 6.2 mgm% with 5.0 mgm% indirect reacting and 1.2 mgm% direct reacting. The BUN was 12.0 mgm%. Serum iron was elevated to 173.4 mcg% and the blood sugar was 103 mgm%. A bone marrow aspiration was done immediately.

The following day after 400 milliliters of whole blood had been infused, the total bilirubin was 5.2 mgm%, Hb

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7.6 grams, RBC 2,710,000, and two nucleated red cells observed on the peripheral smear. A heterophil, ASOT, and latex agglutination for the RA factor were negative. The third hospital day was characterized by 11.9 grams Hb and 4,000,000 RBC. The total bilirubin was 1.8 mgm%, PT 22 seconds, and BUN 14.2 mgm%. The bone marrow report denoted markedly hyperplastic marrow exhibiting abundant erythrocytic activity and immaturity (typical hemolytic marrow). The G-6PD cresyl blue assay was consistently depressed on three consecutive days to levels more than compatible with G-6PD deficiency.

The fifth hospital day revealed complete cessation of hemolysis and an apparently well child. He was discharged two days later. Repeated sickle preps were negative and there were no spherocytes.

\* \* \*

In Von Gierke's and Pompe's disease (glycogen storage diseases) there is a characteristic deficit of glucose 6-phosphatase. Recent investigation has also demonstrated a profound reduction in

G-6PD activity. These are extra-corpuscular assays. A third type of glycogen storage disease is the "Debrancher" enzymed deficiency classified as an impaired GSH metabolism with a concomitant GSSG increase; however, the total glutathione content (GSH plus GSSG) is reduced.

In conclusion it becomes apparent that the minor glucolytic pathways of cellular metabolism, which are aerobic, hold a major influence over intracellular respiration, integrity, and utilizable energy. Undoubtedly future research will discover many new metabolic and enzymatic avenues that will lend tremendous knowledge to the catabolic scheme of life.

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## New Heart Film

"Reprieve," a 16 mm color motion picture sponsored by the Public Health Service, U.S. Department of Health, Education, and Welfare, now available for public showing, offers hope and encouragement for the million-plus American men and women who each year survive a heart attack.

In the 22-minute film, former President Dwight D. Eisenhower and other heart patients, tell how sensible living habits and adherence to doctors' orders have enabled them to return to active and useful living.

Dr. E. Cowles Andrus, past President of the American Heart Association, is the principal medical commentator in the film. He speaks of the importance

of Coronary Care units for hospitals which enable physicians and nurses to do their job more effectively. These units provide the means for immediate recognition of unexpected cardiac emergencies and for prompt action.

Dr. Eugene H. Guthrie, Chief of the Division of Chronic Diseases of the Public Health Service, introduces the film and describes the mission of the Public Health Service in helping to reduce the toll of death and disability from heart attacks.

For showing to groups, prints of the film, "Reprieve," can be obtained on loan free of charge by writing to the Public Health Service Audiovisual Facility, Atlanta, Georgia 30333.





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October 18, 1965

Mr. Robert T. Price,  
Executive Secretary  
Texas Association of Osteopathic  
Physicians and Surgeons  
512 Bailey Street  
Ft. Worth, Texas 76017

Dear Mr. Price:

I would like to inform you and the Texas State Osteopathic Association of the caliber and stature of one of your members.

Dr. T. T. McGrath of Ft. Worth, Texas recently came to Daytona Beach, Florida at my request and participated in my defense to a malicious malpractice suit. Dr. McGrath joined our defense, which was entirely Osteopathic, against the plaintiff's which was entirely of Allopathic presentation. My defense proved the false charges false and I feel Dr. McGrath's expert testimony and brilliant presentation participated heavily in our success.

My colleagues and I sincerely feel this law suit will have repercussions throughout the State of Florida to the benefit of the Osteopathic Profession. I feel that the Osteopathic Profession can look forward to enrichment and progress as long as we can claim men of this quality.

Please reiterate my thanks and appreciation to Dr. McGrath at your next meeting.

Very truly yours,

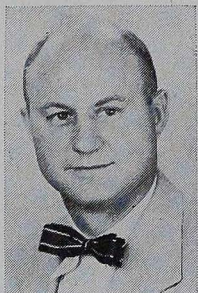
*Sam D. Matheny D.O.*

Sam D. Matheny, D. O.

(EDITOR'S NOTE: The above letter is felt to be of unusual interest in showing the value of maintaining a strong, separate independent school of practice. R.B.Price)



## Dr. Baum Attends Conference



ELMER C. BAUM, D.O.

Elmer C. Baum, D.O., of Austin, was one of four D.O.'s invited by the President of the United States to at-

tend and participate in the recent White House Conference on Health, in Washington, D.C., early in November.

Other osteopathic physicians invited by telephone call from the Office of the President were Wesley B. Larsen, currently president of A.O.A., W. Clemens Andreen of Wyandotte, Michigan and Robert A. Kistner of Chicago, Illinois.

While in the capital city, Dr. Baum also attended a regular meeting of the A.O.A.'s *Council on Federal Health Programs*.

## New Assistant to President

President Thompson announced the employment of Charles I. Krueger October 15 as Assistant to the President at KCOS. Mr. Krueger will replace Miss Gwendolyn Selsor who recently resigned to accept employment in New York City.

Fifteen years as manager of the Kirksville Chamber of Commerce plus other administrative and promotional positions gives Krueger a wide range of experience to equip him for his new assignment. He has served as Adair County Extension Agent, as Chief of the Statistical Section of the Missouri Office of the Agriculture Adjustment Agency, as president of the Missouri Association of Fairs and Agricultural Exhibitions, as president of the Missouri

Chamber of Commerce Executives, as secretary of the Kirksville Industrial Development Corporation, and as executive secretary of the Kirksville United Fund.

The parents of two sons, Mr. and Mrs. Krueger lives at 301 Illinois Street in Kirksville. Fred, a 22 year old son is a student in dental school at the University of Missouri in Kansas City. Leon, 24, is doing graduate study at the University of Missouri in Columbia. Mrs. Krueger is well known to KCOS students and many graduates as the long-time assistant to Dr. I. M. Korr, chairman of the KCOS Division of Physiological Sciences.

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## FILMS

**DOCTORS TO THE STONE AGE**—A 16 mm. motion picture—28 minutes. Black and white, sound. This is the story of a primitive people and the year-round medical missions flown by physician-pilots of DOCARE (Doctors of Osteopathic Care). The film shows how osteopathic physicians are aiding the cave-dwelling Tarahumaras who live in the mountains of northern Mexico. The startling existence of these Indians, their superstitions and customs are memorably documented by the camera. Filmed at the Indian settlement of Sisoguichi in Chihuahua, Mexico. Presented by the American Osteopathic Association in recognition of the humane services performed by its member physicians.

**THE FITNESS CHALLENGE**—A 16 mm. motion picture—28 minutes. Color and sound. This film, made in support of and with the cooperation of the President's Council on Physical Fitness, stresses that the chief aim of adult fitness is developing increased heart and lung capacity through proper diet, exercise and physical recreation. Muscle-building is not the goal. The film also points out the need for a physician's advice before undertaking any kind of fitness program. "The Fitness Challenge" is a challenge to better physical health and mental alertness. It opens with remarks by President John F. Kennedy and closes with comments by Clarence "Bud" Wilkinson, head football coach at University of Oklahoma and Special Consultant to the President's Council.

**PHYSICIAN AND SURGEON, D.O.**—A 16 mm. motion picture—14 minutes. Color and sound. This film, recommended for use by state osteopathic associations, begin with an explanation of the letters which follow the

doctor's name and the significance of the degree D.O. The film moves swiftly into a visualization of the education of an osteopathic physician, beginning with his pre-osteopathic college training and following through until graduation, internship, and practice in the community. "Physician and Surgeon, D.O." is designed particularly for vocational guidance in schools or college; for vocational programs of service clubs and for other special groups.

**AMERICAN DOCTOR**—A 16 mm. motion picture—28½ minutes. Color and sound. This film tells the story of the birth, growth, and future goals of osteopathic medicine. It traces the growth of medicine through the centuries and establishes osteopathic medicine as a part of the continuing development of the healing arts. Flash-backs depict the contributions of such great men as Hippocrates, Andreas Vesalius and Thomas Sydenham. Before taking up the profession as it is today, "American Doctor" utilizes the live action screen-play technique to tell the story of Dr. Still's boyhood, his study of medicine under his father and the founding of the first osteopathic college. This is considered one of the best public relations tools currently available to tell the story of osteopathy to the general public.

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## New Director of NOF

William J. Ratsch has been employed as the new Director of the National Osteopathic Foundation by action of the NOF Board. He will succeed Mortimer Enright who resigned. Mr. Ratsch assumed duties in mid-September. He was recently public relations director and fund raiser for the Air Force Museum at Wright-Patterson Air Force Base, Ohio.

*From TICKER TAPE*

November, 1965



# AUXILIARY NEWS

## Why Join the Auxiliary?



MRS. JOHN H. BURNETT

Gaining new members and renewing old ones are perennial problems that confront any organization. The Osteopathic Auxiliary is no exception.

We, as wives of osteopathic physicians, have an important function in the realm of public relations. Both individually and collectively we can work on public health drives, stimulate interest among high school students in osteopathic medicine, and concern ourselves personally with making a favorable impression.

Probably the most important project in which the Auxiliary participates is the awarding of scholarships to qualified young men interested in becoming osteopathic physicians. The survival of the profession is partially dependent upon recruiting students for our colleges.

How many times have membership chairmen heard the comment, "What do I get out of Auxiliary membership?" First, it is a privilege that only wives, mothers, and daughters of osteopathic physicians enjoy. Six hundred wives united and working for a common goal can contribute immeasurably to the advancement of the profession. Dues alone from this number would add greatly to the service rendered by the organization.

Have you given serious thought to membership in the Auxiliary? Since our number is small, each member is vitally important. Your dues, attendance, and participation are needed now. Your name on the State Auxiliary roster will enhance your prestige and ours. Say "Yes" this year to your district membership chairman.

MAY BURNETT (Mrs. JOHN H.)

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Poster cards similar to the above but with additional detailed information are being sent to each Liberal Arts College and Junior College in the State of Texas, with a letter of explanation to the Dean and to the Pre-Med adviser.

STUDENTS WHOSE HOMES ARE IN TEXAS, but who are studying at colleges outside the state are eligible for

these freshmen scholarships but their schools will not have received these items. Each member of the TAOP&S who knows of a student interested in Osteopathy who is studying outside the state should make a specific effort to bring this information to the attention of that student.

Applications must be in before April 15—For further information contact:

**TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS**

512 Bailey Avenue Fort Worth, Texas 76107

## Guild Stages Benefit

A card party and style show-luncheon was held recently by Fort Worth Osteopathic Guild.

Fashions from Washer Brothers were shown during the luncheon with guild members serving as models.

Proceeds will go to a fund to provide special equipment for Fort Worth Osteopathic Hospital.

Mrs. H. J. Ranelle was in charge of arrangements and models included Mrs. Thomas G. Leach, Mrs. William Alvis, Mrs. Melvin E. Johnson, Mrs. Thomas R. Turner, Mrs. C. E. Dickey and other guild members.

## They Don't Listen

Nearly one-third of all patients apparently fail to follow their physicians' orders, says Dr. Milton S. Davis, associate professor of sociology in medicine at Cornell University Medical College. Writing in the Journal of the American Medical Association, Dr. Davis describes the type of patient least likely to comply with the doctor's directions as "an older person; more likely a woman than a man from a lower socioeconomic level, and probably with a lower level of education."

*from THE NATIONAL OBSERVER*

November, 1965



# S. O. P. A. NEWS

## District No. Two

The November meeting was held at the State Office Building. Mr. Tom Abbott from Wyeth Laboratories presented a very education film, "Recognition and Management of Anxiety."

Our next meeting will be December 7. The election of officers will be held and plans for the Christmas party will be made.

We wish to extend our welcome to our four new members: Dorothy Lewis and Velma Atha, assistants to Dr. Lawrence A. Wills; and Shirley Clinch and Ann Dean who are with Lake Worth Osteopathic Hospital.

We regret that some of our members were ill and unable to attend.

Mary Ann Wahoff, Reporter

## District No. Twelve

Luke F. Wade, district manager of the Port Arthur branch of the Social Security office, presented the August meeting. He explained the new Medicare program in detail. The program was most important as we are all interested in knowing the benefits so as to explain them to our patients and thereby render more service to them. Mr. Wade has been with the Port Arthur branch of Social Security for two years and was supervisor of the Monroe Louisiana office previously. He has worked in the field of Social Security for 24 years since his graduation from the University of Texas. The meeting was held at the new Metropolitan Life Insurance offices on Gulfway Drive, Port Arthur. Mr. Kenneth Clingman of the Metropolitan Life Insurance Company assisted Mr. Wade. Medicare booklets were given to those present.

The September meeting was held at the office of Dr. Jack Taylor in Port Arthur. A candy sale was planned to

raise funds for the Association treasury. Public Relations materials that are available to all osteopathic physicians were distributed to the membership and plans were made to purchase these materials for each office.

The following officers were elected: Mrs. Marilyn Mobley, president; Mrs. Katy Holstead, vice president; Mrs. Betty Latimer, secretary; Mrs. Betty Storey, treasurer.

The October meeting of District 12 was held at the Ramada Inn in Beaumont. This meeting ended three years of organization for District 12.

The installation banquet was planned by retiring President Dorothy Welch, office assistant to Dr. Jack Taylor. She spoke on the accomplishments, growth and set backs of our Association. Dr. John Ruffle spoke on the functions, principles and purposes of S.O.P.A. Toastmaster was Mr. Johnny Stevens, a local television personality. We had the privilege of having Mr. Stevens and his very amusing wit with us at our last convention. He and Dr. Ruffle should be a team as they provided an evening of light hearted fun. Mr. Benny Bearden, Doctors Hospital administrator, gave the invocation.

The installation ceremony was presented by Elaine Eitel, wife of Dr. John Eitel. The social hour preceding the banquet was planned and hosted by Dr. Larry Giffen.

BETTY WOODALL, Reporter

## M.D.'s "Win" Social Security Coverage

Beginning January 1, 1966, all self employed M.D.'s will have to start paying Social Security taxes. In spite of a determined fight by the A.M.A., they have now been blanketed into the Social Security program.



# NEWS OF THE DISTRICTS

## District No. One



GLENN R. SCOTT, D.O.

They did it again! Dr. Don and Effie Hackley invited District One to have its meeting up at the ranch and have an afternoon of ranch fun. Believe you me, it was a rare treat. Horses and shetlands for the kids and later a hayrack ride behind a tractor to see a part of the ranch. The big pit was opened at 12:45 p.m. and the tenderest, tastiest barbecue was pulled out. The lines formed fast for barbecue, ranch style beans and all of the trimmings. There were cakes galore and a stock tank iced and full of soft drinks of all descriptions. We had a business meeting too, I am told — western style, under a tree and over a stump. I was talking to Anna Bee Robinson and Effie Hackley when I heard someone say, "the ayes have it, we're adjourned." If western justice was like this western election, it's no wonder that the hangin' trees got so slick. After

a big dinner, I picked out the closest high hill and went up for a look around. We say it's flat up here in the Panhandle, but not so. The view from atop this small mesa was beautiful. Peace and quiet and beauty to me, but I suppose to the ranch hands and workers, it's a place for a day's work. We estimated the crowd at this meeting of grownups and children at minimum 75. It was a wonderful day, wonderful food and preparation by the wonderful host and hostess, Dr. Don and his lovely wife. Thanks folks, for a wonderful day.

J. Francis and Dorothy have returned from Brownfield — Grandpa and Grandma Brown are doing fine. They have a grandson by Susie.

If we appear nervous, it's because we are biting nails and sweating out Hill-Burton. Please, no loud noises.

Dr. Ed and Louise Mayer tell us that Waikiki Beach and Las Vegas are as active as ever. Dr. Mayer attended a surgical meeting in Mexico City.

W. L. Davis, administrator of Amarillo Osteopathic Hospital, and Johnette got a bear up in Wyoming and are now chasing an elk in Colorado. I understand he wants this bearskin rug to have his picture taken on.

Dr. E. H. Mann and Harriett and Dr. Glenn R. Scott are planning and arranging to go to the National Convention in Houston the first week in

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November. This sounds like a real program. Fun? You know durned well we go to lectures only.

Dr. E. W. Cain has a new boat and will be headed for Guyamus, Mexico, to fish. The Lester Vicks are back from the Holy Land. News filters over that Drs. Witt, Clayton, Hall and Levy are keeping busy in Groom patching up the highway accidentees on top of the heavy area practice.

GLENN R. SCOTT, D.O., *Reporter*

### District No. Two



D. D. BEYER, D.O.

Dr. John Burnett, our state President, talked to the members of District 2 at their dinner meeting October 19th at Colonial Country Club in Fort Worth. His speech was very well received. The comments of some of the doctors and wives were as follows: The speech was very impressive, presented with dignity,

and presented with class. In his speech, Dr. Burnett emphasized Public Relations and different types of literature for Vocational Guidance which is available to doctors and Vocational Guidance directors in high schools and colleges. Dr. Bobby Gene Smith, program chairman for District Two, presented the recommendations to the membership of District Two from the Executive Committee that a Vocational Guidance dinner be held in Fort Worth. The vote of the members was unanimous to support this dinner. At this meeting we had the largest attendance we have had in the last year.

Dr. and Mrs. R. B. Beyer enjoyed their trip to the Bahamas recently.

Dr. Virginia Ellis attended the Certifying Board Meeting of ACO at the recent AOA convention. The Board examined several doctors for certification. Dr. Ellis also visited her brother, Alam M. Poole of Palmer, Massachusetts, who is Senior Physician of Monson State Hospital.

Mr. and Mrs. Carl Everett and Dr. and Mrs. George Luibel attended the AOA Convention, and also toured New York State and Washington, D.C.

Dr. Wills visited in Washington, D.C. recently on his vacation.

Dr. William A. Griffith, a neophyte amateur archeologist, was elected to the

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#### **SID MURRAY "Pays In A Hurry"**

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F O R  
**MUTUAL LIFE OF NEW YORK**



Presidency of the Tarrant County Archeological Society, a branch of the Texas Archeological Society.

Dr. Catherine Carlton was elected Secretary of the Board of the Fort Worth Society for Crippled Children and Adults, Inc.

Dr. Gerald Bennett has assumed duties as Head of the Pathology Department and Educational Director with Fort Worth Osteopathic Hospital. He comes from KCOS where he served a residency in Pathology.

Daniel O. O'Connell, Food Services Director at Fort Worth Osteopathic Hospital became the proud papa of a 10 pound, 5 ounce, boy October 15th.

Dr. R. E. Beck joined Dr. John Kemplin in the Department of Radiology at Fort Worth Osteopathic Hospital. He served as Assistant Professor of Radiology at the Kansas City College before he came here.

Dr. Joel Alter started his Residency in Surgery in August at Fort Worth Osteopathic Hospital. The other Surgical Resident, Dr. H. R. Thomas, has completed his Basic Science Program for the American College of Osteopathic Surgeons and has taken a two-weeks course in Surgical Anatomy at Kirksville College.

Dr. James H. Black, serving a Residency in Anesthesiology at Fort Worth Osteopathic Hospital attended McGill University at Montreal, Canada, for a one-week Basic Science Review in Anesthesiology.

Dr. Frank Wheeler, one of our Anesthesiologists, visited Dr. Patrick McCaffery in Grand Rapids, Michigan, on his way to the AOA Convention.

Dr. Thomas Turner, as an AOA member on the Committee on Disaster Medical Care attended the 14th Annual Convention of the United States Civil Defense Council at the Sahara Hotel in Las Vegas last month.

Dr. Russell Jenkins reports a recent trip to California. Russ says the purpose of the vacation was to visit relatives of his wife, Connie.

From the following foreign travel I believe District Two is a good place to practice: Drs. Elbert and Catherine Carlton visited Dr. Catherine's sister in England. They report an Osteopathic technique session with some of the Seniors of the British Osteopathic College in London.

Dr. and Mrs. C. E. Dickey visited their daughter and her husband in West Germany and made an extended tour of Switzerland, Italy, France and England. Clifford reports that the beer in Germany is out of this world.

Dr. and Mrs. George Pease spent a month in Europe visiting Holland, France, Spain and Italy. George states that one of the high points of the trip was Barcelona, Spain.

Drs. Noel and Virginia Ellis had a hilarious time in Hawaii. Noel says he would like to retire there because the scenery was so nice. He did not mention the girls.

Yvonne Turner, wife of Dr. Tom Turner, and Shirley Thomas, wife of Dr. Harry Thomas, have gotten their Private Pilot's licenses.

Dr. and Mrs. George Kelso attended the Osteopathic State Convention of Florida which was held in Nassau, Bahamas. They reported a fine time.

Dr. Myron Jones, Jr., who recently completed his Residency in Internal Medicine at the Oklahoma Osteopathic Hospital in Tulsa, joined the staff of the Mid-Cities Memorial Hospital as an Internist. We welcome him and his wife into District Two.

Dr. Russell Jenkins and wife, Connie, attended the workshop program following the ACOS meeting in Houston, relative to intern and resident training programs.

Any member of District Two of TAOP&S, please either telephone or write any news in to me. It must be in by the first of the month.

D. D. Beyer, D.O.,  
Reporter



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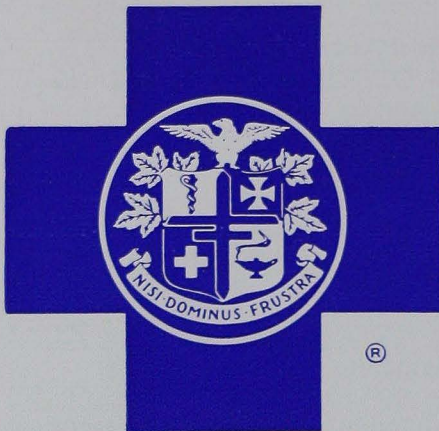
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