

# TEXAS OSTEOPATHIC PHYSICIANS JOURNAL

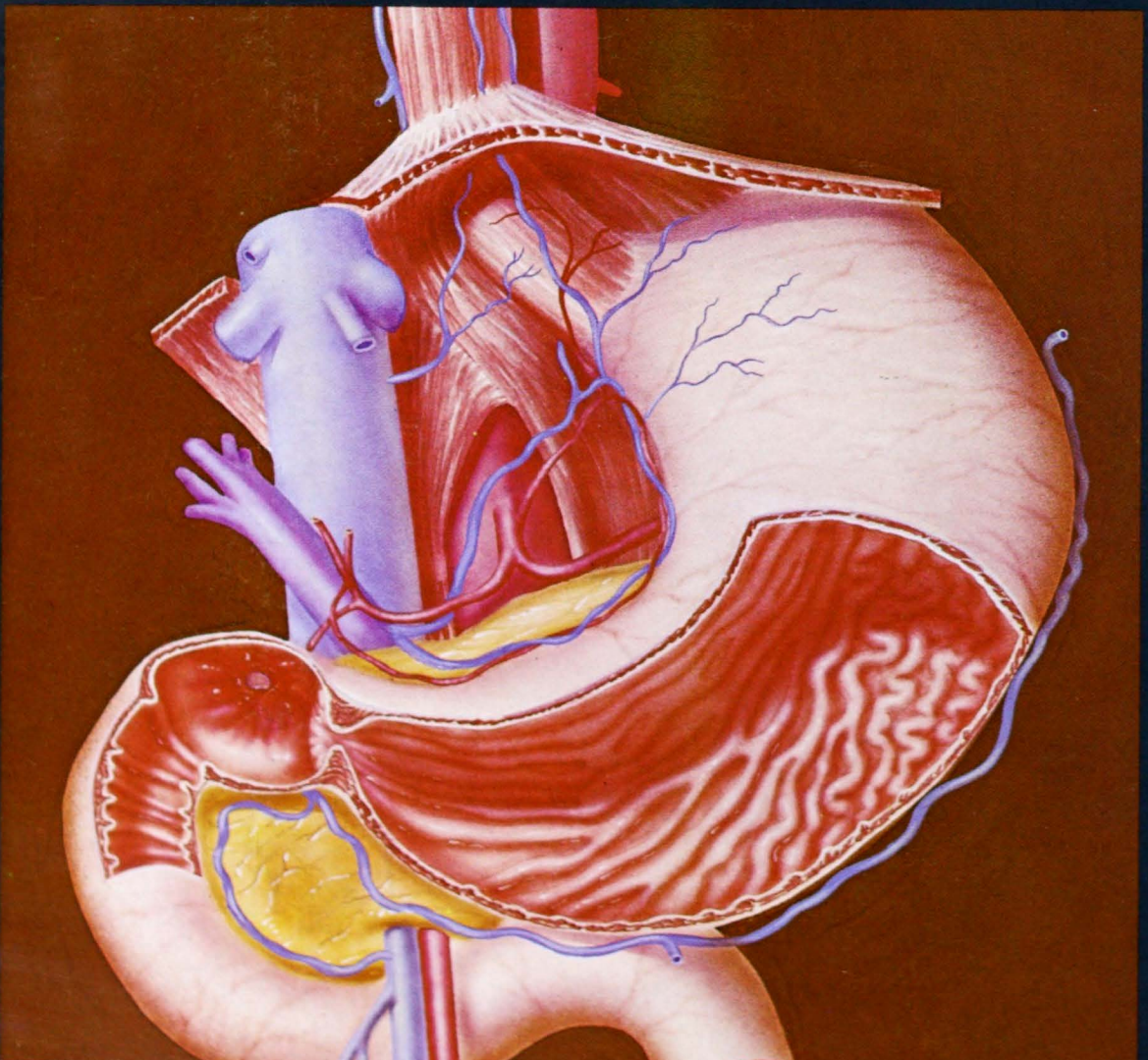
March 1975



13 TOMA Districts Represented at First Governmental Operations Seminar



When the  
complaint is always  
“indigestion”..  
it may be  
duodenal ulcer





Repeated episodes of vague gastrointestinal discomfort such as heartburn, belching, epigastric pain, and other symptoms commonly called "indigestion" may be indicative of duodenal ulcer and warrant further investigation. When investigation reveals the presence of a duodenal ulcer, healing the lesion may pose less of a problem for the patient than instituting the suggested measures to help prevent exacerbation of his symptoms. Healing the acute lesion may only necessitate disruption of the patient's normal routine for a relatively short period of time. However, long-term management, in order to keep the duodenal ulcer healed, often requires lengthy adjustments in the patient's life style—in eating habits, in handling anxiety-provoking situations—and the patient may need extra help and counseling in successfully achieving these changes, and perhaps at times may also need the benefits of adjunctive medication.

**If it's duodenal ulcer, consider Librax<sup>®</sup> as adjunctive therapy** During the period when the lesion is healing, the patient will probably do better with a comprehensive medical regimen: one that not only takes into account symptomatic relief of hypersecretion and hypermotility, but one that also provides relief of excessive anxiety that may contribute to the exacerbation of these somatic symptoms.

Because Librax offers dual relief for both somatic symptoms and undue anxiety, it is often prescribed adjunctively in cases of duodenal ulcer. Librax can be helpful both in the management of the acute attacks and in helping the patient maintain his gains while the lesion is healing.

**1** Only Librax provides, in a single capsule, the well-known antianxiety action of Librium<sup>®</sup> (chlordiazepoxide HCl) and the dependable antisecretory/antispasmodic action of Quarzan<sup>™</sup> (clidinium Br)—both products of Roche research.

**2** The calming action of Librium makes Librax unique among agents for the adjunctive treatment of certain gastrointestinal disorders.

**3** Librax is relatively free from side reactions and complications. While dryness of the mouth and blurring of vision are the most frequently reported side effects with clidinium Br, and drowsiness, ataxia and confusion are the side effects reported most frequently with chlordiazepoxide HCl (particularly in the elderly and debilitated), physicians should be aware of the possibility of other adverse reactions as noted on following page.

**4** Up to 8 capsules daily in divided doses may be prescribed according to your patient's individual needs—1 or 2 capsules, 3 or 4 times daily.

**helps relieve  
anxiety-linked symptoms  
of duodenal ulcer**

**adjunctive  
Librax<sup>®</sup>**

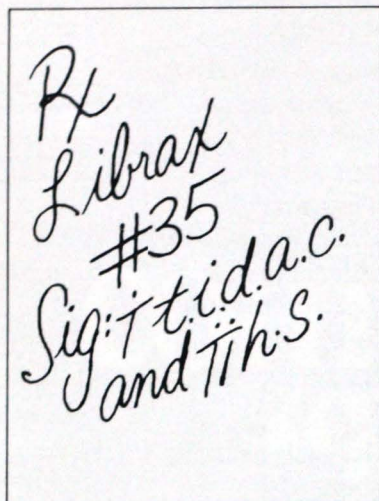
Each capsule contains 5 mg chlordiazepoxide HCl and 2.5 mg clidinium Br.



Please see following page  
for a summary of  
product information.

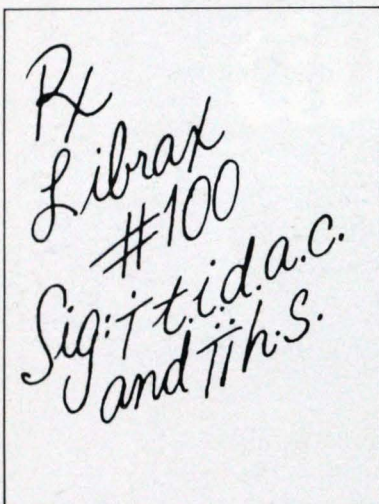


## Initial therapy



The initial prescription allows evaluation of patient response to therapy.

## Follow-up therapy



Follow-up therapy, with a prescription for 2 to 3 weeks' medication, usually helps maintain patient gains.

**Before prescribing, please consult complete product information, a summary of which follows:**

**Indications:** Symptomatic relief of hypersecretion, hypermotility and anxiety and tension states associated with organic or functional gastrointestinal disorders; and as adjunctive therapy in the management of peptic ulcer, gastritis, duodenitis, irritable bowel syndrome, spastic colitis, and mild ulcerative colitis.

**Contraindications:** Patients with glaucoma; prostatic hypertrophy and benign bladder neck obstruction; known hypersensitivity to chlordiazepoxide hydrochloride and/or clidinium bromide.

**Warnings:** Caution patients about possible combined effects with alcohol and other CNS depressants. As with all CNS-acting drugs, caution patients against hazardous occupations requiring complete mental alertness (*e.g.*, operating machinery, driving). Though physical and psychological dependence have rarely been reported on recommended doses, use caution in administering Librium (chlordiazepoxide hydrochloride) to known addiction-prone individuals or those who might increase dosage; withdrawal symptoms (including convulsions), following discontinuation of the drug and similar to those seen with barbiturates, have been reported. Use of any drug in pregnancy, lactation, or in women of childbearing age requires that its potential benefits be weighed against its possible hazards. As with all anticholinergic drugs, an inhibiting effect on lactation may occur.

**Precautions:** In elderly and debilitated, limit dosage to smallest effective amount to preclude development of ataxia, oversedation or confusion (not more than two capsules per day initially; increase gradually as needed and tolerated). Though generally not recommended, if combination therapy with other psychotropics seems indicated, carefully consider individual pharmacologic effects, particularly in use of potentiating drugs such as MAO inhibitors and phenothiazines. Observe usual precautions in presence of impaired renal or hepatic function. Paradoxical reactions (*e.g.*, excitement, stimulation and acute rage) have been reported in psychiatric patients. Employ usual precautions in treatment of anxiety states with evidence of impending depression; suicidal tendencies may be present and protective measures necessary. Variable effects on blood coagulation have been reported very rarely in patients receiving the drug and oral anticoagulants; causal relationship has not been established clinically.

**Adverse Reactions:** No side effects or manifestations not seen with either compound alone have been reported with Librax. When chlordiazepoxide hydrochloride is used alone, drowsiness, ataxia and confusion may occur, especially in the elderly and debilitated. These are reversible in most instances by proper dosage adjustment, but are also occasionally observed at the lower dosage ranges. In a few instances syncope has been reported. Also encountered are isolated instances of skin eruptions, edema, minor menstrual irregularities, nausea and constipation, extrapyramidal symptoms, increased and decreased libido—all infrequent and generally controlled with dosage reduction; changes in EEG patterns (low-voltage fast activity) may appear during and after treatment; blood dyscrasias (including agranulocytosis), jaundice and hepatic dysfunction have been reported occasionally with chlordiazepoxide hydrochloride, making periodic blood counts and liver function tests advisable during protracted therapy. Adverse effects reported with Librax are typical of anticholinergic agents, *i.e.*, dryness of mouth, blurring of vision, urinary hesitancy and constipation. Constipation has occurred most often when Librax therapy is combined with other spasmolytics and/or low residue diets.

**Dosage:** Individualize for maximum beneficial effects. Usual maintenance dose is 1 or 2 capsules, 3 or 4 times a day, before meals and at bedtime. Geriatric patients—see Precautions.

**How Supplied:** Librax® Capsules, each containing 5 mg chlordiazepoxide hydrochloride (Librium®) and 2.5 mg clidinium bromide (Quarzan<sup>TM</sup>)—bottles of 100 and 500.



Roche Laboratories  
Division of Hoffmann-La Roche Inc.  
Nutley, New Jersey 07110

helps relieve  
anxiety-linked symptoms  
of duodenal ulcer

adjunctive  
**Librax**®

Each capsule contains 5 mg chlordiazepoxide HCl  
and 2.5 mg clidinium Br.



# About the Cover



## TEXAS OSTEOPATHIC PHYSICIANS JOURNAL

This month's cover is composed of candid shots taken during the late January Governmental Operations Seminar at Lakeway Inn near Austin.

Clockwise: Senator Bob Gam-  
mage of Houston was snapped at  
the informal reception hosted by  
Smith Kline and French on Friday  
night of the seminar.

Senator Betty Andujar is shown  
chatting with some registrants dur-  
ing a coffee break Saturday morn-  
ing.

Dr. Wendell Gabier of Groves and  
Dr. Richard W. Hall of Arlington  
listen with interest to one of the  
speakers at a seminar sessions.

Dr. Dwight Hause of Corpus  
Christi and Dr. George Grainger of  
Tyler represented TOMA Districts  
VIII and III. Mrs. Hause and Mrs.  
Grainger were among the wives who  
attended.

Dr. Arthur Wiley of Denton al-  
most got away before the photo-  
grapher could focus his camera.

Apparently in serious discussion  
concerning a point made by a mem-  
ber of the faculty are Dr. John J.  
Cegelski, Jr. of San Antonio and  
Dr. John H. Boyd of Eden.

Representative Charles Evans of  
Arlington enjoys a chat with Dr.  
Lawrence Greif of Fort Worth.

Senator Bill Meier of Euless is  
shown speaking to the Sunday  
morning plenary session which con-  
cluded the first TOMA Govern-  
mental Operations Seminar.

	Page
Seven Legislators Participate in TOMA's First Governmental Operations Seminar	6
Political Action <i>The Auxiliary's Ready When You Are!</i>	7
What Do You Think You're Doing? <i>May 1 — 3 —</i>	9
Whatever happened to — — — ?	13
TCOM-NTSU Merger Backed by Press <i>Bill Introduced in Both Houses</i>	14
Texas Ticker Tape	21
Let's Take the First <i>The First Amendment to the Constitution</i>	22
Texas Legislators Listed	23
One Booth to Sell — —	26
Legislation Studied Daily by TOMA	28
Texas Bill Follows Federal Statute Allowing Honorariums	29
ATOMA News	31
Make Your Move <i>Opportunities for D.O.s in Texas</i>	32
Unofficial Convention Tax Tips	33
Proposed Amendment to TOMA Bylaws	34
Letters	35
We're Doing Something <i>News of the Districts</i>	37
Dr. Harakal Named TCOM Department Head	38
In Memoriam	39

Published by  
TEXAS OSTEOPATHIC MEDICAL ASSOCIATION  
Volume XXXII—No. 3—March 1975  
Publication Office — 512 Bailey, Fort Worth, Texas 76107  
Phone — 817-336-0549  
Copy Deadline — 10th of month preceding publication

Mr. Tex Roberts, Editor



# Seven Legislators Participate in TOMA's First Governmental Operations Seminar



More than 100 D.O.s and wives, state legislators and other officials termed the first TOMA Seminar on Governmental Operations a big success.

The seminar was held January 24-26 at Lakeway Inn, northwest of Austin, under the sponsorship of the TOMA Governmental Relations Committee, chaired by Bobby G. Smith, D.O., and a grant by Smith Kline & French Laboratories.

Activities included a reception and dinner Friday evening, and three concurrent discussion sessions Saturday morning and Saturday afternoon, followed by a half-day rap session Sunday morning between the faculty and conference attendees, including spouses.

Advance mailings advised everyone attending that there would be no substantive issues discussed, but the seminar would be an educational session to inform on the inner workings of the legislative, judicial and executive branches of state government in Texas.

Among the topics covered were the committees of two houses of the legislature, what their functions are, how they are appointed, and the ground rules during the time the legislature is in session. The governor's office was discussed, along with the procedures involved in appointing the numerous boards and commissions that fall within his list of duties.

State Senator Bob Gammage of Houston received almost undivided attention in his narrative about a piece of legislation that he originated, introduced and carried throughout the intricate processes involved in getting it approved by both houses and signed into law by the governor.

Walter H. Richter of Austin, a former state senator, moderated the Sunday morning session and appealed for wider participation by citizens in the governmental process, beginning at the precinct caucus level.



He, and several others of the faculty, maintained that politics was not a dirty word; and that lobbying, either by groups or by individual citizens, is an American right. Outlined in detail was the political action arm of the Texas Trial Lawyers, and how it is financed by non-deductible contributions by individual lawyers.

LIFT (Lawyers Involved For Texas) is recognized as one of the most effective political action groups in the state.



The faculty included Senator Betty Andujar of Fort Worth, Senator Tom Creighton of Mineral Wells, Senator Bob Gammage of Houston, Senator Bill Meier of Euless, Representative Lane Denton of Waco, Representative Charles Evans of Hurst, Representative Tim Von Dohlen of Goliad, Attorney Ronald Godbey of Hurst, Walter H. Richter of Austin, Attorney Irwin R. Salmanson of Austin, Colonel Stan Stout, COG Health Planning Council, of Austin, and Sophie Carroll Weiss of the staff of the Joint Subcommittee on Public Health, Texas Legislature.

D.O. wives were invited and attended all of the sessions of the seminar, including Mrs. Elaine Armbruster of Houston, President of the Auxiliary to TOMA.



Almost all the 15 TOMA districts were represented; and among TOMA leaders attending was President H. Eugene Brown, D.O. of Lubbock.



# POLITICAL ACTION

## The Auxiliary's Ready When You Are!

by Mrs. David R. Armbruster  
ATOMA President



The Governmental Operations Seminar at Lakeway was, without a doubt, one of the most interesting, informative and stimulating meetings I have attended. Throughout this year I have searched for new areas of involvement for the Auxiliary to help further the osteopathic medical profession. Legislative action is an exciting avenue for us to pursue.

During the entire seminar I kept thinking of specific individuals in our Auxiliary who would have so much to contribute in this area because of their knowledge and love for involvement in political action and, of course, their personal concern for our profession.

My experience with politics to this point has been very limited, and I was delighted to discover that even I could make a valuable contribution.

We were divided into small groups and it wasn't just a lecture presentation but an exchange of ideas. Doctors and their wives were asking senators, representatives, lobbyists, and staff pointed questions and getting answers. Many of my concerns were expressed:

1. The governmental limitations being placed on health care.
2. The fact that people are making laws who are not trained in the field of medicine.
3. What can our profession do to have a voice?
4. How to get involved?

We were given so much information on how a bill becomes a law, how to have input into the legislature, and how to develop meaningful communications. It was pointed

out many times and in many ways that, we as wives of osteopathic physicians, can and must play an important part in this whole process. It must be a two-fold program—an individual and an organized effort.

First we must have an organization to keep our membership informed on what bills are in the formative stage and what our profession's position is. Then a plan of action must be initiated for the input we need to inform our senators and legislators. This can be accomplished by phone calls, personal visits, letters, telegrams and informing patients and friends. Good candidates must receive our support through campaign efforts and financial backing. Again, we need to work for them through an organized effort.

My questions after attending the final session of the seminar were many:

1. Does our profession have an organization for political action?
2. What is TOPS?
3. How is money raised to support this organized effort?
4. Why is it that so many doctors and their wives are unaware of this organization?
5. How is our membership informed on legislative issues which need our help and where do we get information concerning our profession's position on said issues?

One of the closing remarks made by Mr. Walter Richter was, "Your profession may be a minority profession now, but without involvement it may not only be a minority

profession, but an extinct profession."

As the wife of a D.O., the urge for immediate action was a normal reaction. Realizing, of course, that our profession must first outline their organization and inform us concerning what they need from the Auxiliary, we must wait patiently. I'm excited to find our State Association is hard at work on this project and feel very soon, we as an Auxiliary, will be involved in the area of political action for the profession which is our whole life—the osteopathic medical profession!

*(In answer to some of the questions posed by Mrs. Armbruster: The Texas Osteopathic Political Society was formed in mid-1972 by a small group of D.O.s as an organization entirely separate from TOMA, as is required by law. It was modeled on the Trial Lawyers Association's program, LIFT, which allows that entity to solicit funds for political action and expend such funds in support of candidates for the State Legislature.*

*After the formation of TOPS, a letter was sent to each D.O. in Texas, asking for support. The response was underwhelming!*

*Elsewhere in this issue is an item concerning a legislative survey sent out by the Governmental Relations Committee of TOMA. A copy of the survey was sent to each TOMA member. Although the response to this survey was much better than the letter concerning TOPS, it seems, in retrospect, that it should have also been sent to Auxiliary members! —Ed.)*



# Kefzol<sup>®</sup> cefazolin sodium

Ampoules, equivalent to 1 Gm. of cefazolin



Additional information available  
to the profession on request.  
Eli Lilly and Company  
Indianapolis, Indiana 46206  
400380



# What Do You Think You're Doing?

- - MAY 1 - 3 - -

We *hope* you're thinking about attending the 76th Annual Convention and Scientific Seminar of the Texas Osteopathic Medical Association at the Sheraton-Dallas.

A lot of your colleagues will be, but as of this date we can't tell you how many. However, this is information we're going to have to have soon.

Sound financial planning has to play a big part in putting on a successful convention. This is one of the big reasons the TOMA bylaws were amended last year to allow a charge to be made for social functions associated with the convention.

Costs and other circumstances (such as the energy crunch last year) vary widely from year to year and from one convention site to another so that it is almost impossible to estimate attendance at any convention. Attendance records are kept on all conventions and include the number of meals served at each function. However, there can be a variance from year to year of as many as 75 people attending any one function.

Since hotels are asking for meal guarantees 48 hours in advance of each service, it has become imperative that convention attendees register *in advance*. If we tell the caterer to prepare 400 meals for the Keynote Luncheon, for instance, then we are charged for 400 meals—even if only 350 are served. With the cost of food being what it is today, we could easily pay out \$500 needlessly if we give too high an estimate.

Because there has been no registration fee for members attending the TOMA Convention, your treasurer, who is the convention finance officer, has been in an untenable position in trying to contain costs.

Since the House of Delegates decided that convention expenses, over and above convention income, should not come out of the TOMA general fund, a fee to cover social functions can now be charged. However, there still is no fee for attending the lectures.

In order to get an estimate of how many will be attending the social functions, this year a flat fee will be charged for those registering in advance.

Since the purpose of this fee is simply to take up the slack and make the convention pay for itself, rather than the Association paying out thousands of dollars to subsidize it, it is proposed that the fee be kept to a minimum for those who register in advance. In other words, the registration fee probably will not be enough to cover the actual costs of the social functions, but an attempt is being made to estimate cost and attendance figures, as well as income from exhibits and grants, and to equalize registration fees to cover the balance of the expenses.

*Information on registration fees and hotel accommodations will be in the mail within a short time, and advance registration blanks, as well as room reservation cards will be included.*

The February issue of this *Journal* contains much information about the Scientific Seminar part of the convention. More details will be mailed soon, and the April *Journal* will be devoted in large part to convention activities.

Those who register in advance for the convention will be able to take advantage of a very low registration fee. However, those who do not register in advance must buy separate tickets for each function at the full actual price.

Also, special badges will be prepared for advance registrants, as they were for the 1974 convention. There was much comment about these attractive badges and their legibility.

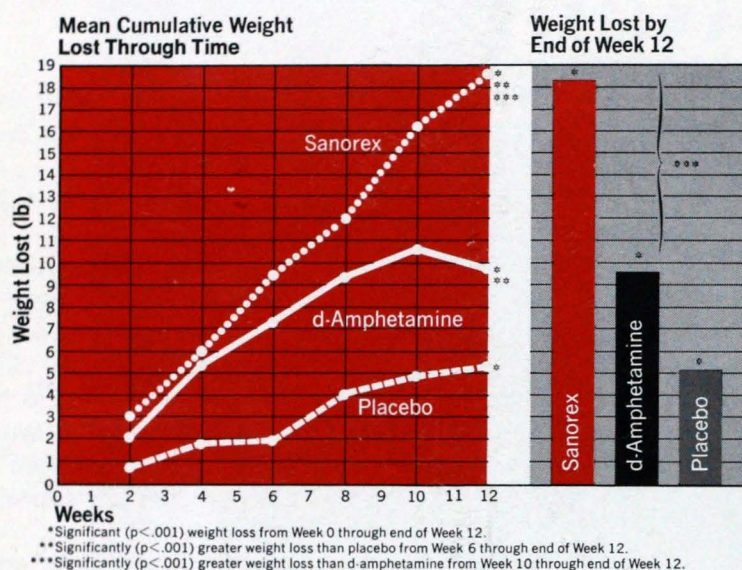
Because of the fluctuation in food prices, the hotel catering office has not been able to give us firm prices, but they have assured us these will be in the mail in a few days. When total costs are computed, a registration fee can be quoted that, hopefully, will be somewhere in the ballpark as far as covering actual convention costs is concerned. ▲



# SANOREX<sup>®</sup> IN (MAZINDOL)<sup>III</sup>

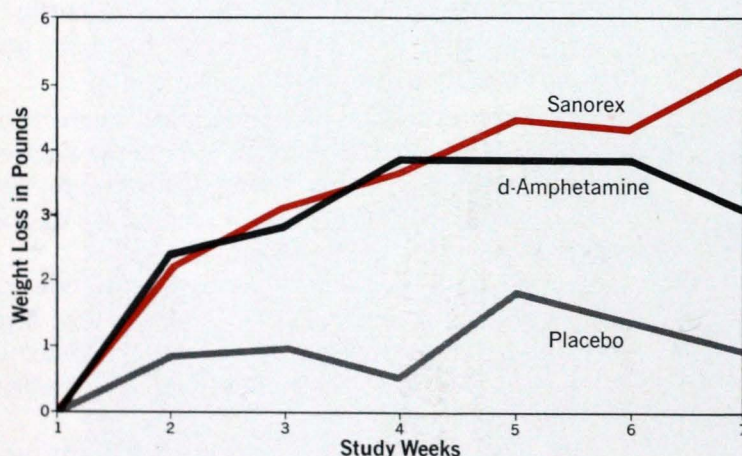
TABLETS, 1 mg and 2 mg

## AS EFFECTIVE AS d-AMPHETAMINE



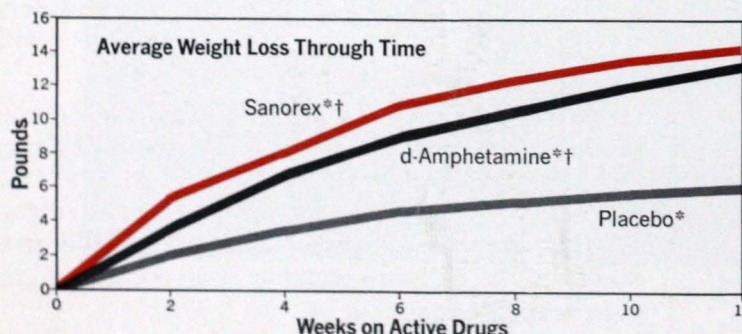
In a double-blind study<sup>1</sup> of 40 obese patients (all of whom completed the study), Sanorex (1 mg t.i.d.) was more effective than either placebo or d-amphetamine (5 mg t.i.d.) in helping patients lose weight.

The 14 patients on Sanorex experienced a substantially greater mean weight loss—1½ to 2 lb/wk, as compared with 1 to 1½ lb/wk for the 14 d-amphetamine patients—throughout the 12-week phase of active medication. After the sixth week, the superiority of Sanorex became increasingly evident. And as treatment progressed, so did weight loss in patients on Sanorex—whereas after the tenth week, patients on d-amphetamine began to regain some weight.



In a double-blind study<sup>2</sup> of 90 obese patients (59 of whom completed the study), Sanorex (1 mg t.i.d.) was more effective than either placebo or d-amphetamine (5 mg t.i.d.) in helping patients lose weight.

By the end of the third week of active medication, weight loss in the 20 d-amphetamine patients began to plateau, and by the end of the fifth week, these patients began to regain some weight. On the other hand, the 18 patients on Sanorex continued to lose weight throughout the six-week course of therapy.



In a double-blind study<sup>3</sup> of 93 obese patients (all of whom completed the study), 30 patients received Sanorex (1 mg t.i.d.), 31 received placebo, and 32 received d-amphetamine (5 mg t.i.d.).

During the 12-week phase of active medication, patients on Sanorex lost an average of 14.1 lb, compared with 13.1 lb for d-amphetamine patients and 5.6 lb for placebo patients. Throughout the active medication phase, 63% of patients on Sanorex lost more than 1 lb/wk, compared with 38% of the d-amphetamine group and 29% of the placebo group.



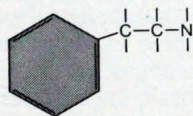
# OBESENITY

the soft underbelly  
of American health

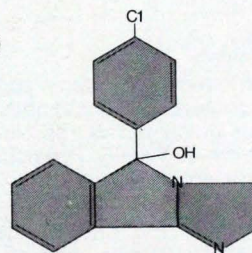
## BUT WITH CERTAIN DIFFERENCES

Although the pharmacologic activity of Sanorex and that of amphetamines are similar in many ways (including central nervous system stimulation in humans and animals, as well as production of stereotyped behavior in animals), animal experiments suggest that there are differences.\* Sanorex also differs in basic chemical structure from amphetamines and all other prescription anorexants.

### Different Chemical Structure



An important chemical similarity between amphetamines and all other prescription anorexants except Sanorex is the basic phenethylamine structure to which their differentiating chemical radicals are attached.

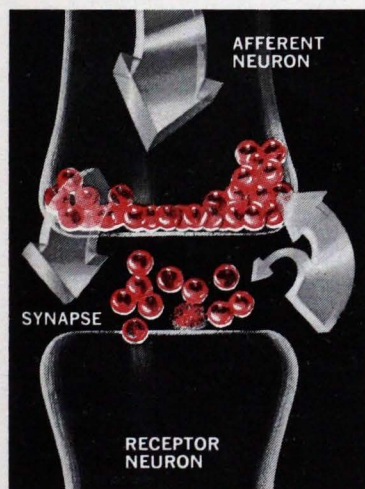



An important chemical difference between Sanorex and all other prescription anorexants is that Sanorex is an isoindole; it does not contain a phenethylamine structure.

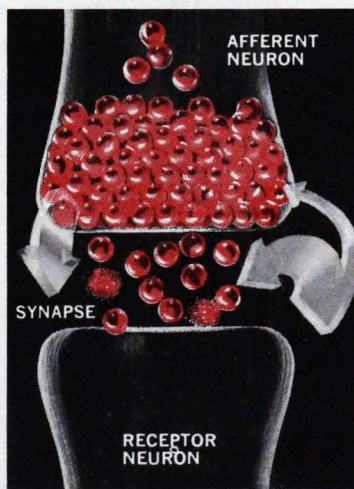
### Different Neurochemical Action\*


#### Action of d-Amphetamine

In animal studies, d-amphetamine (like intake of food) activates afferent neurons leading to appetite centers in the hypothalamus. Resulting release of norepinephrine activates the receptor neurons. Unlike food, however, d-amphetamine also suppresses norepinephrine synthesis. Thus, increasingly larger doses of d-amphetamine become necessary to produce an effect.\*



 NOREPINEPHRINE



 NOREPINEPHRINE

\*The significance of these differences for humans is uncertain.

### Simplicity and Flexibility of Dosage

Simple one-a-day dosage is facilitated by 2-mg tablets (taken 1 hour before lunch).

New flexibility (for the patient in whom 1 mg t.i.d. is preferred) is now facilitated by new 1-mg tablets (taken 1 hour before meals).

For Brief Summary, please see following page.



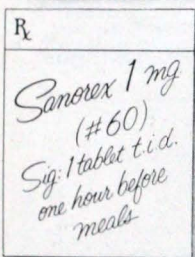
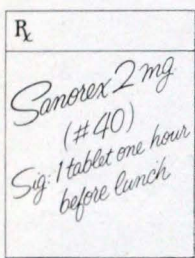


# SANOREX<sup>®</sup>

## (MAZINDOL) <sup>III</sup>



## AS EFFECTIVE AS d-AMPHETAMINE BUT WITH CERTAIN DIFFERENCES



### References

1. Kornhaber A: Problems and current concepts in the treatment of obesity. Scientific Exhibit presented at the New York State Academy of Family Physicians 25th Annual Scientific Convention, McAfee, NJ, May 8-10, 1973.
2. DeFelice EA, Chaykin LB, Cohen A: Double-blind clinical evaluation of mazindol, dextroamphetamine, and placebo in treatment of exogenous obesity. *Curr Ther Res* 15:358-366, July 1973.
3. Vernace BJ: Practical considerations for managing obese patients: Initial interview and effective treatment in the office. Scientific Exhibit presented at the American Medical Association, 27th Clinical Convention, Anaheim, Calif, Dec 1-4, 1973.

**Indication:** In exogenous obesity, as a short-term (a few weeks) adjunct in a weight-reduction regimen based on caloric restriction. The limited usefulness of agents of this class should be measured against possible risk factors.

**Contraindications:** Glaucoma; hypersensitivity or idiosyncrasy to the drug; agitated states; history of drug abuse; during, or within 14 days following, administration of monoamine oxidase inhibitors (hypertensive crisis may result).

**Warnings:** Tolerance to many anorectic drugs may develop within a few weeks; if this occurs, do not exceed recommended dose, but discontinue drug. May impair ability to engage in potentially hazardous activities, such as operating machinery or driving a motor vehicle, and patient should be cautioned accordingly.

**Drug Interactions:** May decrease the hypotensive effect of guanethidine; patients should be monitored accordingly. May markedly potentiate pressor effect of exogenous catecholamines; if a patient recently taking mazindol must be given pressor amine agents (e.g., levarterenol or isoproterenol) for shock (e.g., from a myocardial infarction), extreme care should be taken in monitoring blood pressure at frequent intervals and initiating pressor therapy with a low initial dose and careful titration.

**Drug Dependence:** Mazindol shares important pharmacologic properties with amphetamines and related stimulant drugs that have been extensively abused and can produce tolerance and severe psychologic dependence. Manifestations of chronic overdosage or withdrawal with mazindol have not been deter-

mined in humans. Abstinence effects have been observed in dogs after abrupt cessation for prolonged periods. There was some self-administration of the drug in monkeys. EEG studies and "liking" scores in human subjects yielded equivocal results. While the abuse potential of mazindol has not been further defined, possibility of dependence should be kept in mind when evaluating the desirability of including the drug in a weight-reduction program.

**Usage in Pregnancy:** In rats and rabbits an increase in neonatal mortality and a possible increased incidence of rib anomalies in rats were observed at relatively high doses.

Although these studies have not indicated important adverse effects, the use of mazindol in pregnancy or in women who may become pregnant requires that potential benefit be weighed against possible hazard to mother and infant.

**Usage in Children:** Not recommended for use in children under 12 years of age.

**Precautions:** Insulin requirements in diabetes mellitus may be altered. Smallest amount of mazindol feasible should be prescribed or dispensed at one time to minimize possibility of overdosage. Use cautiously in hypertension, with monitoring of blood pressure; not recommended in severe hypertension or in symptomatic cardiovascular disease including arrhythmias.

**Adverse Reactions:** Most commonly, dry mouth, tachycardia, constipation, nervousness, and insomnia. **Cardiovascular:** Palpitation, tachycardia. **Central Nervous System:** Overstimulation, restlessness, dizziness, insomnia, dysphoria, tremor, headache, depression, drowsiness, weakness. **Gastrointestinal:** Dryness of mouth, unpleasant taste, diarrhea, constipation, nausea, other gastrointestinal disturbances. **Skin:** Rash, excessive sweating, clamminess. **Endocrine:** Impotence, changes in libido have rarely been observed. **Eye:** Long-term treatment with high doses in dogs resulted in some corneal opacities, reversible on cessation of medication; no such effect has been observed in humans.

**Dosage and Administration:** 1 mg three times daily, one hour before meals, or 2 mg per day, taken one hour before lunch in a single dose.

**How Supplied:** Tablets, 1 mg and 2 mg, in packages of 100.

Before prescribing or administering, see package circular for Prescribing Information.

74-214 R



SANDOZ PHARMACEUTICALS, EAST HANOVER, N.J. 07936





# Whatever happened to - - - ?

*(You fill in the blanks)*

Ever wish you could go back in time to what you think of now as your "finest hour"? The good old days (at least as they seem in retrospect) when life was simpler and you enjoyed it more?

"Memories are made of this."

And that's the theme for our 76th annual convention at the Sheraton-Dallas May 1-3.

Of course, the future and the *NOW* will have their place, especially at the Scientific Seminar, the exhibits, and the fine accommodations, but according to Mrs. M. L. Coleman, Auxiliary chairman (chairperson?) for the convention, you're going to be treated to a good dose of nostalgia, especially during the Fun Night festivities May 3.



What year or period in time appeals to you? Was it when you just turned 21? When you (or your spouse) finally finished many years of training to become an osteopathic physician? Or perhaps a long ago time in history that has always seemed appealing to you?

Well, why not live in that era—at least for a night, or at least in your dress for that night. That's what the TOMA Auxiliary wants you to do.



If you remember with fondness the year you were queen of the prom, did you save the dress you wore that night, or can you find one from the same period?

Perhaps you think the Elizabethan era would have been a fun time in which to live. Or to really lead the simple life, you might go 'way back to when an animal's skin was all you needed to wear and all you had to chase was the animal, rather than the (not so) almighty dollar.



You *have* to remember Ted Mack's Original Amateur Hour (before TV?). Although you can expect some professional entertainment Fun Night, you will also have a chance to see and hear some undiscovered talent that has been dormant in some doctors and their spouses. Although talent scouts will not be invited to attend this function, and these performers may not go on to greater things in the entertainment field after their one night stand, some of them may be tempted to try it when they hear what is sure to be overwhelming applause from the audience.



Horse and buggy doctors are requested to leave their transportation in the stable (O.K.—garage) of the Sheraton-Dallas.

For this one night, be the person you want to be; live in the time you want to live in. Dress the part—and enjoy, enjoy!





# TCOM-NTSU Merger Backed by Press

*Tarrant County legislators author bill to  
establish TCOM as separate institution  
under management of NTSU Board of Regents*

by Ray Stokes  
TCOM Director of Development and Public Relations

"Go for osteopathic medical school" was an editorial headline which appeared in the February 4 issue of the Fort Worth Press.

"Fort Worth should enthusiastically back the proposed merger of the Texas College of Osteopathic Medicine with North Texas State University and the strengthening of the medical school in Fort Worth," the editorial stated.

This editorial support of the proposed merger which is now before the State legislature came on the heels of a joint press conference held by the authors of the bill, State Representative Gib Lewis and State Senator Betty Andujar.

The bill, House Bill 445, which would establish TCOM as a separate institution under the management of the Board of Regents of NTSU is co-signed by all of Tarrant County's delegation except Representative W.C. (Bud) Sherman. Senator Andujar will sponsor the bill in the senate.

The Press editorial, oddly enough, came just less than two months following a declaration in the same newspaper in support of the merger when the proposal was presented before the Texas College and University Coordinating Board in early December. The proposed merger was unanimously approved by that body.

The Fort Worth Star-Telegram also endorsed the merger in a strongly worded editorial on the same date the first Press editorial appeared.

Representatives of both institutions and the business community attended the news conference called by Lewis to explain the bill.

Under provisions of the bill the NTSU regents will

have control over TCOM but the board will act separately and independently on all matters affecting TCOM as a separate institution.

"This proposed merger," Lewis said, "is important to the advancement of medical education in Texas to meet urgent and growing health care needs across the state. The Texas College of Osteopathic Medicine has made an excellent beginning in its first four years of instruction.

"Placing this existing going institution in the state system of higher education will make possible its faster expansion toward the goal of producing more than 100 new physicians every year. TCOM emphasizes the development of graduates who will become family physicians or general practitioners and more doctors of this kind are greatly needed in many areas of Texas," the bill's author concluded.

Both legislators, Lewis and Andujar, said they believe that if the state fully finances TCOM the benefits will definitely outweigh the cost. Both also said they expect no opposition to the bill.

Lewis estimated that if the bill is enacted into Law about \$40 million may be requested over the next five years to pay for capital improvements.

Senator Andujar, whose husband is an M. D., predicts complete cooperation from the allopathic profession.

Dr. M.E. Coy, TCOM president, said he was "most pleased" to learn from a recent letter that the newly formed TCOM Alumni Association has gone on record in unanimously endorsing the merger. The letter was signed by the organization's president, T. David Wiman, D. O.





# BILL INTRODUCED IN BOTH HOUSES

Introduced by Lewis, et al  
Referred to Committee on Higher Education

H.B. 445

## A BILL TO BE ENTITLED AN ACT

Relating to the establishment of the Texas College of Osteopathic Medicine as a separate institution under the governance of the Board of Regents of North Texas State University; amending Chapter 105, Texas Education Code, by adding Subchapter E; and declaring an emergency.

### BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

Section 1. Chapter 105, Texas Education Code, is amended by adding Subchapter E to read as follows:

#### "SUBCHAPTER E. TEXAS COLLEGE OF OSTEOPATHIC MEDICINE

"Sec. 105.71. ESTABLISHMENT OF COLLEGE OF OSTEOPATHIC MEDICINE. (a) There is hereby created a college of osteopathic medicine in the city of Fort Worth to be known as the Texas College of Osteopathic Medicine, a separate institution and not a department, school, or branch of North Texas State University, but under the direction, management, and control of the Board of Regents of North Texas State University.

"(b) The board shall have the same powers of direction, management, and control over the college of osteopathic medicine that it exercises over the North Texas State University, but the Board shall act separately and independently on all matters affecting the college of osteopathic medicine as a separate institution.

"Sec. 105.72. LOCATION. The board shall select a site for the college in Tarrant County. The initial site shall be acquired by donation at no cost to the state.

"Sec. 105.73. RULES AND REGULATIONS; COURSES. (a) The board may make rules and regulations for the direction, control, and management of the medical school which are necessary for it to be a medical school of the highest quality.

"(b) The board with the approval of the Coordinating Board, Texas College and University System may prescribe courses leading to the customary degrees and certificates granted by osteopathic medical schools.

"Sec. 105.74. CHIEF EXECUTIVE OFFICER. The chief executive officer of the university shall serve as chief executive officer of the college of osteopathic medicine.

"Sec. 105.75. TEACHING HOSPITAL; FACILITIES. (a) A complete teaching hospital for the medical school shall be furnished at no cost or expense to the state.

"(b) The Board shall make provision for adequate physical facilities for use by the medical school in its teaching and research programs.

"Sec. 105.76. JOINT APPOINTMENTS. The Board of Regents is specifically authorized to make joint appointments in the university and The College of Osteopathic Medicine under its governance; the salary of any such person who receive such joint appointment to be apportioned to the appointing institution on the basis of services rendered.

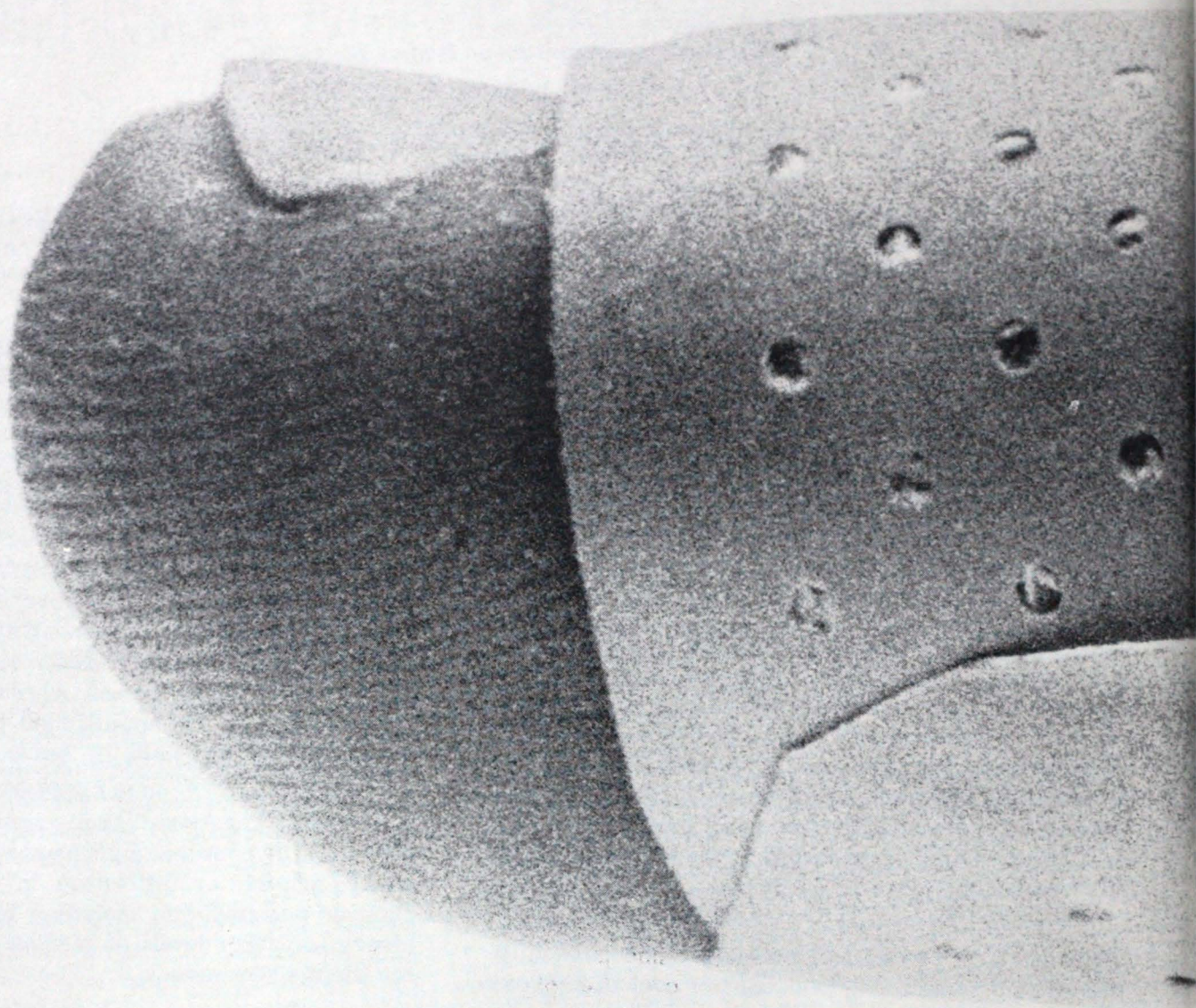
"Sec. 105.77. AGREEMENTS WITH OTHER ENTITIES. The board may execute and carry out affiliation or coordinating agreements with any other entity, school, or institution in Texas to provide clinical, postgraduate, including internship and residency, or other levels of medical educational work for the medical school.

"Sec. 105.78. GIFTS AND GRANTS. The board may accept and administer grants and gifts from the federal government, and foundation, trust fund, corporation, or any individual or organization for the use and benefit of the medical school.

"Sec. 105.79. SUPERVISION BY COORDINATING BOARD. The medical school is subject to the continuing supervision of and to the rules and regulations of the Coordinating Board, Texas College and University System, in accordance with the provisions of Chapter 61 of this code."

Sec. 2. The importance of this legislation and the crowded condition of the calendars in both houses create an emergency and an imperative public necessity that the Constitutional Rule requiring bills to be read on three several days in each house be suspended, and this rule is hereby suspended, and that this Act take effect and be in force from and after its passage, and it is so enacted. ▲





# **\$250,000** **Because the really tough**

Life's little problems are things we all must cope with. Happily, a little love and a bandage are all it takes to patch up a kid's finger. Or a kid's knee.

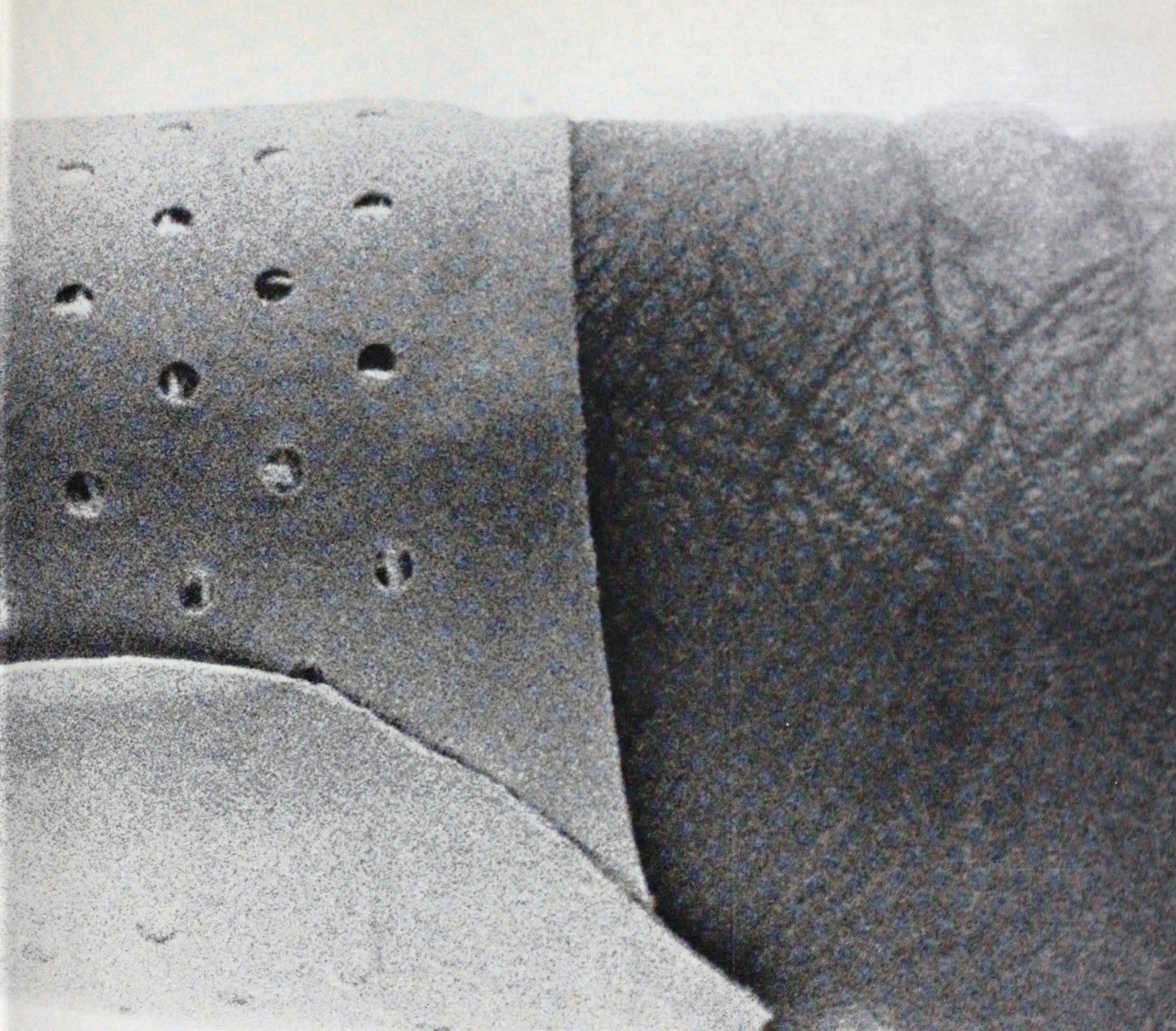
But what if it's a kidney?

At best it's heartbreaking. At the worst it can break you financially as well.

Unless you have Blue Cross and Blue Shield \$250,000 Major Medical coverage, for maximum benefits in case of prolonged sickness or injury.

To offset the high cost . . . of living.





# Major Medical. scrapes are harder to mend.

This plan is open to groups with as few as 10 employees, so call your Blue Cross and Blue Shield representative today.

You'll find him in the Yellow Pages. And you'll find him most helpful.



**Blue Cross**®  
GROUP HOSPITAL SERVICE, INC.  
**Blue Shield**®  
GROUP LIFE & HEALTH INSURANCE COMPANY  
**of Texas**

®Registered Mark Blue Cross Association

®Registered Service Mark of the National Association of Blue Shield Plans



**when pain goes on...  
and on...  
and on—**

the analgesic formula that calms instead of caffeinates

**Phenaphen<sup>®</sup> with**

For the patient with a terminal illness, PAIN past, present, and future can dominate his thoughts until it becomes almost an obsession. The more he is aware of the pain he is now experiencing, the more difficult it is to erase his memory of yesterday's pain, and to allay his fearful anticipation of tomorrow's pain.

Surely the last thing this patient needs is an analgesic containing caffeine to stimulate the senses and heighten pain awareness. A far more logical choice is Phenaphen with Codeine. The sensible formula provides  $\frac{1}{4}$  grain of phenobarbital to take the nervous "edge" off, so the rest of the formula can help control the pain more effectively. Don't you agree, Doctor, that psychic distress is an important factor in most of your terminal and long-term convalescent patients?





# Codeine

Phenaphen with Codeine No. 2, 3, or 4 contains: Phenobarbital ( $\frac{1}{4}$  gr.), 16.2 mg. (warning: may be habit forming); Aspirin ( $2\frac{1}{2}$  gr.), 162.0 mg.; Phenacetin (3 gr.), 194.0 mg.; Codeine phosphate,  $\frac{1}{4}$  gr. (No. 2),  $\frac{1}{2}$  gr. (No. 3) or 1 gr. (No. 4) (warning: may be habit forming).

**Indications:** Provides relief in severe grades of pain, on low codeine dosage, with minimal possibility of side effects. Its use frequently makes unnecessary the use of addicting narcotics.

**Contraindications:** Hypersensitivity to any of the components.

**Precautions:** As with all phenacetin-containing products, excessive or prolonged use should be avoided. **Side effects:** Side effects are uncommon, although nausea, constipation and drowsiness may occur. **Dosage:** Phenaphen No. 2 and No. 3—1 or 2 capsules every 3 to 4 hours as needed; Phenaphen No. 4—1 capsule every 3 to 4 hours as needed. For further details see product literature.



Phenaphen with Codeine is now classified in Schedule III, Controlled Substances Act of 1970. Available on written or oral prescription and may be refilled 5 times within 6 months, unless restricted by state law.

A. H. Robins Company, Richmond, Va. **A-H-ROBINS**



Before prescribing, see complete prescribing information in SK&F literature or *PDR*. The following is a brief summary.

**Indications:** Edema associated with congestive heart failure, cirrhosis of the liver, the nephrotic syndrome; steroid-induced and idiopathic edema; edema resistant to other diuretic therapy. Also, mild to moderate hypertension.

**Contraindications:** Pre-existing elevated serum potassium. Hypersensitivity to either component. Continued use in progressive renal or hepatic dysfunction or developing hyperkalemia.

**Warnings:** Do not use dietary potassium supplements or potassium salts unless hypokalemia develops or dietary potassium intake is markedly impaired. Enteric-coated potassium salts may cause small bowel stenosis with or without ulceration. Hyperkalemia ( $>5.4$  mEq/L) has been reported in 4% of patients under 60 years, in 12% of patients over 60 years, and in less than 8% of patients overall. Rarely, cases have been associated with cardiac irregularities. Accordingly, **check serum potassium during therapy, particularly in patients with suspected or confirmed renal insufficiency (e.g., elderly or diabetics).** If hyperkalemia develops, **substitute a thiazide alone.** If spironolactone is used concomitantly with 'Dyazide', **check serum potassium frequently**—both can cause potassium retention and sometimes hyperkalemia. Two deaths have been reported in patients on such combined therapy (in one, recommended dosage was exceeded; in the other, serum electrolytes were not properly monitored). Observe patients on 'Dyazide' regularly for possible blood dyscrasias, liver damage or other idiosyncratic reactions. Blood dyscrasias have been reported in patients receiving Dyrenium (triamterene, SK&F). Rarely, leukopenia, thrombocytopenia, agranulocytosis, and aplastic anemia have been reported with the thiazides. Watch for signs of impending coma in acutely ill cirrhotics. Thiazides are reported to cross the placental barrier and appear in breast milk. This may result in fetal or neonatal hyperbilirubinemia, thrombocytopenia, altered carbohydrate metabolism and possibly other adverse reactions that have occurred in the adult. When used during pregnancy or in women who might bear children, weigh potential benefits against possible hazards to fetus.

**Precautions:** Do periodic serum electrolyte and BUN determinations. Do periodic hematologic studies in cirrhotics with splenomegaly. Antihypertensive effects may be enhanced in postsympathectomy patients. The following may occur: hyperuricemia and gout, reversible nitrogen retention, decreasing alkali reserve with possible metabolic acidosis, hyperglycemia and glycosuria (diabetic insulin requirements may be altered), digitalis intoxication (in hypokalemia). Use cautiously in surgical patients. Concomitant use with antihypertensive agents may result in an additive hypotensive effect.

**Adverse Reactions:** Muscle cramps, weakness, dizziness, headache, dry mouth; anaphylaxis; rash, urticaria, photosensitivity, purpura, other dermatological conditions; nausea and vomiting (may indicate electrolyte imbalance), diarrhea, constipation, other gastrointestinal disturbances. Rarely, necrotizing vasculitis, paresthesias, icterus, pancreatitis, and xanthopsia have occurred with thiazides alone.

**Supplied:** Bottles of 100 capsules; in Single Unit Packages of 100 (intended for institutional use only).

## KEEP THE HYPERTENSIVE PATIENT ON THERAPY KEEP THERAPY SIMPLE WITH

# DYAZIDE<sup>®</sup>

Each capsule contains 50 mg. of Dyrenium<sup>®</sup> (brand of triamterene) and 25 mg. of hydrochlorothiazide.

Neither inconvenient potassium supplements nor special K<sup>+</sup> rich diets needed as a rule.

Just 'Dyazide' once or twice daily for maintenance.



Two prime reasons patients drop out of hypertensive therapy are (1) the patient failed to understand directions, and (2) the regimen was overly complicated. Dosage is simple with 'Dyazide', easily understood, once or twice daily, depending on response. There's no need to complicate the regimen with potassium supplements or unwieldy potassium-rich diets.

## TO KEEP BLOOD PRESSURE DOWN AND KEEP POTASSIUM LEVELS UP

SK&F Co., Carolina, P.R. 00630  
Subsidiary of SmithKline Corporation



# Texas Ticker Tape

## TWO D.O.s OPEN PRACTICE IN CASTROVILLE

In December Dr. Dan Kellum (KC '73) who has been practicing in San Antonio, opened a practice in Castroville. He was joined in January by Dr. James M. Fleming (KCOM '71). Dr. Fleming is a member of TOMA and AOA. Dr. Kellum's TOMA membership application has been approved by his District, which paves the way for his being taken into TOMA membership at the next meeting of the Board of Trustees. He is also a member of AOA.

## GROUND BROKEN FOR PREVENTIVE MEDICINE FACILITY

Ground breaking ceremonies for the new Institute of Research and Preventive Medicine Park, located in Colleyville, were held February 1, according to Dr. V. L. Jennings, president.

Other officers of the institute include Dr. Stevan Cordas, vice president, and John McNary, secretary-treasurer. Directors include Dr. Wayne English, Dr. A. L. Karbach and Dr. N. A. Pruzzo. William H. Maxwell is executive director.

## TCOM GRADUATE TO PRACTICE IN HOMETOWN

Dr. Paul Livingston of Comanche, one of the first TCOM graduates, plans to open his practice in that city in June at the conclusion of his internship which he is now serving at Stevens Park Osteopathic Hospital in Dallas.

## DOCTOR PROFILES TO BE UPDATED

On July 1 reasonable charge allowances are expected to be revised by the federal fiscal intermediary, Blue Cross-Blue Shield of Texas, to reflect 1974 charge information. In other words, doctor profiles will be updated come July.

## DR. CEGELSKI ADVISOR TO AACOG SUBCOMMITTEE

John J. Cegelski, Jr., upon invitation by the Alamo Area Council of Governments, has accepted the position as advisor to the Health Plan Development Subcommittee of AACOG. The responsibility of the subcommittee is to develop a comprehensive health plan for the AACOG region. It is looking into the health needs and problems of the region and the resources available.

## DR. VAN SCHOICK HEADS HEART FUND CAMPAIGN

Dr. R. D. Van Schoick of Leonard is serving as chairman of the Fannin County chapter of the American Heart Association for the 1975 fund campaign. February was designated Heart Month and Dr. Van Schoick was in charge of coordinating the efforts of community volunteers who distributed educational materials and collected funds to support research, educational and community programs sponsored by the county association.

## NEW MEDICAL CENTER HAS OPEN HOUSE

The Tri-Cities Medical Center, a clinic which will serve the communities of Cedar Hill, Duncanville and De Soto, held an open house January 25. Dr. Donald F. Vedral and Dr. Stephen J. Calabria, owners of the medical facility, hosted a tour of the center.



**The First Amendment to the Constitution of the United States**

**"Congress shall make no law . . . .  
abridging the freedom of speech, or of the press,  
or the right of the people peaceably to assemble,  
and to petition the government for a redress of grievances."**



**LET'S TAKE THE FIRST!**

**by Bobby G. Smith, Chairman  
TOMA Governmental Relations Committee**

In early February your Governmental Relations Committee sent each of you a legislative survey and asked that you complete it and return it to the State Office in order that this Committee might know on whom it could call to contact legislators if and when it was felt a particular piece of legislation would be coming up that would affect our profession particularly.

The response was gratifying, to say the least. Within five days after the request went into the post office, 50 of you had returned the survey, and most of you indicated you *would* be willing to help wherever possible.

Since some of you indicated you did not know who your legislators were, we are herewith printing the complete list of members of the 64th Legislature. We would like to suggest that if you are not acquainted with them, you can get to know them through contact by mail.

Although many of us are not personally acquainted with these lawmakers, we have found that they *do* respond when we write them on almost any subject. And their responses are not by form letter, but indicate they are sincerely interested in our opinions and appreciate having our viewpoints.

As Senator Tati Santiesteban said at our convention in McAllen last year, it is impossible for each individual legislator to read and understand the several

thousand bills that are submitted to both houses during each session of the Legislature, and they depend on their constituents to give them their views on proposed legislation.

This is not lobbying as some people interpret the word, but a form of freedom of speech and communication. The preponderance of opinions our representatives receive may not agree with yours and they may not vote the way you would like them to, but this does not mean they have not *considered* your view if it is communicated in an intelligent, well thought out manner.

May we urge you again, to keep abreast of proposed legislation, If enough of us communicate with our legislators, our combined voice will be heard — and heeded.

In the "Letters" section of this issue is one from Dr. Dan B. Whitehead who reminds us that in the late 1930's Dr. Phil Russell said, "Give me 600 dedicated D.O.s going in the same direction and we can whip the M.D.s, who are so divided, right into the Gulf of Mexico."

Right now we are only fighting the M.D.s when they try to divide *us*, destroy us, or infringe on our practice rights in any manner; but the idea that "600 dedicated D.O.s going in the same direction" can whip just about anything they want to is just as sound today as it was 30 or 40 years ago.



## TEXAS SENATE

WILLIAM P. HOBBY . . . . . Houston  
Lieutenant Governor

DON ADAMS . . . . . Jasper  
Dist. 3 — Anderson, Angelina, Cherokee,  
Hardin, Henderson, Jasper, Kaufman, Nacog-  
doches, Newton, Panola, Rusk, Sabine, San  
Augustine, Shelby, Tyler Counties

A. M. AIKIN, JR. . . . . Paris  
Dist. 1 — Bowie, Camp, Cass, Delta, Fannin,  
Franklin, Grayson, Harrison, Hopkins,  
Lamar, Marion, Morris, Red River, Titus  
Counties

MRS. BETTY ANDUJAR . . . . . Fort Worth  
Dist. 12 — Tarrant County

WILLIAM BRAECKLEIN . . . . . Dallas  
Dist. 16 — Dallas County

CHET BROOKS . . . . . Pasadena  
Dist. 11 — Harris County

RON CLOWER . . . . . Garland  
Dist. 9 — Dallas, Ellis, Limestone, Navarro  
Counties

TOM CREIGHTON . . . . . Mineral Wells  
Dist. 22 — Bosque, Comanche, Cooke,  
Denton, Eastland, Erath, Hill, Hood, Jack,  
Johnson, Montague, Palo Pinto, Parker,  
Somervell, Stephens, Wise, Young Counties

LLOYD DOGGETT . . . . . Austin  
Dist. 14 — Blanco, Burnet, Caldwell, Hays,  
Travis Counties

RAY FARABEE . . . . . Wichita Falls  
Dist. 30 — Archer, Baylor, Briscoe, Callahan,  
Childress, Clay, Cottle, Dickens, Fisher,  
Floyd, Foard, Hale, Hall, Hardeman, Has-  
kell, Howard, Jones, Kent, King, Knox,  
Mitchell, Motley, Nolan, Scurry, Shackel-  
ford, Stonewall, Throckmorton, Wichita,  
Wilbarger Counties

BOB GAMMAGE . . . . . Houston  
Dist. 7 — Fort Bend, Harris Counties

KENT HANCE . . . . . Lubbock  
Dist. 28 — Andrews, Borden, Cochran,  
Crosby, Dawson, Ector, Gaines, Garza,  
Lubbock, Lynn, Martin, Terry, Yoakum  
Counties

D. ROY HARRINGTON . . . . . Port Arthur  
Dist. 4 — Chambers, Jefferson, Liberty,  
Orange Counties

O. H. HARRIS . . . . . Dallas  
Dist. 8 — Dallas County

GRANT JONES . . . . . Abilene  
Dist. 24 — Brown, Coleman, Concho, Cory-  
ell, Hamilton, Lampasas, McCulloch, Mc-  
Lennan, Menard, Mills, Runnels, San Saba,  
Taylor Counties

GLENN KOTHMANN . . . . . San Antonio  
Dist. 19 — Bexar County

FRANK LOMBARDINO . . . . . San Antonio  
Dist. 26 — Bexar County

RAUL L. LONGORIA . . . . . Edinburg  
Dist. 27 — Brooks, Cameron, Hidalgo, Jim  
Wells Counties

OSCAR MAUZY . . . . . Dallas  
Dist. 23 — Dallas County

MIKE McKINNON . . . . . Corpus Christi  
Dist. 20 — Bee, Kennedy, Kleberg, Nueces,  
Refugio, San Patricio, Willacy Counties

PEYTON McKNIGHT . . . . . Tyler  
Dist. 2 — Collin, Gregg, Hunt, Rains, Rock-  
wall, Smith, Upshur, Van Zandt, Wood  
Counties

BILL MEIER . . . . . Euless  
Dist. 10 — Tarrant County

WALTER H. MENGDEN, JR. . . . . Houston  
Dist. 13 — Harris County

WILLIAM T. MOORE . . . . . Bryan  
Dist. 5 — Austin, Brazos, Burleson, Colorado,  
Falls, Freestone, Grimes, Houston, Leon,  
Madison, Montgomery, Polk, Robertson,  
San Jacinto, Trinity, Walker, Waller, Wash-  
ington, Wharton Counties

JACK OGG . . . . . Houston  
Dist. 15 — Harris County

WILLIAM PATMAN . . . . . Ganado  
Dist. 18 — Bastrop, Bell, DeWitt, Fayette,  
Goliad, Gonzales, Jackson, Karnes, Lavaca,  
Lee, Milam, Victoria, Williamson Counties

H. TATI SANTIESTEBAN . . . . . El Paso  
Dist. 29 — El Paso, Hudspeth Counties

A. R. SCHWARTZ . . . . . Galveston  
Dist. 17 — Aransas, Brazoria, Calhoun,  
Galveston, Harris, Matagorda Counties

MAX R. SHERMAN . . . . . Amarillo  
Dist. 31 — Armstrong, Bailey, Carson,  
Castro, Collingsworth, Dallam, Deaf Smith,  
Donley, Gray, Hansford, Hartley, Hemphill,  
Hockley, Hutchinson, Lamb, Lipscomb,  
Moore, Ochiltree, Oldham, Parmer, Potter,  
Randall, Roberts, Sherman, Swisher, Wheel-  
er Counties

W. E. SNELSON . . . . . Midland  
Dist. 25 — Bandera, Brewster, Coke, Comal,  
Crane, Crockett, Culberson, Edwards, Gil-  
lespie, Glasscock, Irion, Jeff Davis, Kendall,  
Kerr, Kimble, Kinney, Llano, Loving, Mason,  
Midland, Pecos, Presidio, Reagan, Real,  
Reeves, Schleicher, Sterling, Sutton, Terrell,  
Tom Green, Upton, Uvalde, Val Verde,  
Ward, Winkler Counties

JOHN TRAEGER . . . . . Seguin  
Dist. 21 — Atascosa, Bexar, Dimmit, Duval,  
Frio, Guadalupe, Jim Hogg, LaSalle, Live  
Oak, McMullen, Maverick, Medina, Starr,  
Webb, Wilson, Zapata, Zavala Counties

LINDON WILLIAMS . . . . . Houston  
Dist. 6 — Harris County

## TEXAS HOUSE

BILL CLAYTON . . . . . Springlake  
Speaker

HERMAN ADAMS, JR. . . . . Silsbee  
Dist. 5 — Hardin, Jasper, Jefferson Counties

FRED J. AGNICH . . . . . Dallas  
Dist. 32R — Dallas County

JOE ALLEN . . . . . Baytown  
Dist. 78 — Harris County

DAVE ALLRED . . . . . Wichita Falls  
Dist. 52 — Wichita County

HAMP ATKINSON . . . . . New Boston  
Dist. 1 — Bowie, Red River Counties

KAY BAILEY . . . . . Houston  
Dist. 90 — Harris County

ANDREW Z. BAKER . . . . . Galveston  
Dist. 19, Pl. 2 — Galveston County

GONZALO BARRIENTOS . . . . . Austin  
Dist. 37, Pl. 4 — Travis County

JOHN R. BIGHAM . . . . . Belton  
Dist. 44 — Bell County

RONALD C. BIRD . . . . . San Antonio  
Dist. 57D — Bexar County

ROY BLAKE . . . . . Nacogdoches  
Dist. 4 — Nacogdoches, Panola, Shelby  
Counties

W. J. BLYTHE . . . . . Houston  
Dist. 91 — Harris County

BENNIE BOCK, II . . . . . New Braunfels  
Dist. 38 — Caldwell, Comal, Guadalupe  
Counties

LATHAM BOONE, III . . . . . Navasota  
Dist. 29 — Austin, Burleson, Grimes, Madi-  
son, Waller, Washington Counties

ALBERT BROWN . . . . . San Antonio  
Dist. 57C — Bexar County

JOHN BRYANT . . . . . Dallas  
Dist. 33L — Dallas County

BEN BYNUM . . . . . Amarillo  
Dist. 67 — Potter County

NEIL CALDWELL . . . . . Alvin  
Dist. 20 — Brazoria County

TERRY CANALES . . . . . Premont  
Dist. 58 — Brooks, Duval, Jim Hogg, Jim  
Wells, Starr Counties

BILL CARAWAY . . . . . Houston  
Dist. 100 — Harris County

TOM CARTLIDGE . . . . . Henrietta  
Dist. 53 — Archer, Clay, Wichita, Young  
Counties

DONALD CARTWRIGHT . . . . . San Antonio  
Dist. 57H — Bexar County

PHIL CATES . . . . . Pampa  
Dist. 66 — Armstrong, Briscoe, Childress,  
Collingsworth, Donley, Floyd, Gray, Hall,  
Motley, Wheeler Counties

MELCHOR CHAVEZ . . . . . Harlingen  
Dist. 51 — Cameron, Hidalgo Counties

BILL CLARK . . . . . Tyler  
Dist. 12 — Smith County



- JIM CLARK ..... Pasadena  
Dist. 99 — Harris County
- BILL CLAYTON ..... Springlake  
Dist. 74 — Bailey, Castro, Cochran, Deaf  
Smith, Lamb, Oldham, Parmer Counties
- G. R. CLOSE ..... Perryton  
Dist. 64 — Dallam, Hansford, Hartley,  
Hemphill, Hutchinson, Lipscomb, Moore,  
Ochiltree, Roberts, Sherman Counties
- RONALD COLEMAN ..... El Paso  
Dist. 72, Pl. 3 — El Paso County
- W. G. COODY ..... Weatherford  
Dist. 42 — Parker, Tarrant Counties
- TOM CRADDICK ..... Midland  
Dist. 68 — Glasscock, Midland, Reagan,  
Upton Counties
- BOB DAVIS ..... Dallas  
Dist. 33A — Dallas County
- WILHELMINA DELCO ..... Austin  
Dist. 37, Pl. 1 — Travis County
- WOODY DENSON ..... Houston  
Dist. 81 — Harris County
- LANE DENTON ..... Waco  
Dist. 35, Pl. 1 — McLennan County
- JERRY DONALDSON ..... Gatesville  
Dist. 34 — Bosque, Coryell, Hamilton, Hill  
Counties
- A. L. DRAMBERGER ..... San Antonio  
Dist. 57B — Bexar County
- RONALD EARLE ..... Austin  
Dist. 37, Pl. 3 — Travis County
- JIMMIE C. EDWARDS, III ..... Conroe  
Dist. 18 — Montgomery, Walker Counties
- CHARLES EVANS ..... Arlington  
Dist. 32, Pl. 1 — Tarrant County
- MICHAEL EZZELL ..... Snyder  
Dist. 63 — Borden, Coke, Dawson, Howard,  
Scurry, Sterling Counties
- DAVE FINNEY ..... Fort Worth  
Dist. 32, Pl. 7 — Tarrant County
- BUCK FLORENCE ..... Hughes Springs  
Dist. 2 — Cass, Marion, Morris, Smith,  
Upshur Counties
- MILTON E. FOX ..... Houston  
Dist. 93 — Harris County
- A. C. GARCIA ..... Pharr  
Dist. 59, Pl. 2 — Hidalgo County
- MATT GARCIA ..... San Antonio  
Dist. 57K — Bexar County
- FRANK GASTON ..... Dallas  
Dist. 33M — Dallas County
- RICHARD S. GEIGER ..... Dallas  
Dist. 33G — Dallas County
- SMITH GILLEY ..... Greenville  
Dist. 10 — Hopkins, Hunt, Rains Counties
- BEN Z. GRANT ..... Marshall  
Dist. 3 — Harrison, Rusk Counties
- FORREST GREEN ..... Corsicana  
Dist. 27 — Ellis, Navarro Counties
- R. E. GREEN ..... Houston  
Dist. 95 — Harris County
- L. DeWITT HALE ..... Corpus Christi  
Dist. 48, Pl. 1 — Nueces County
- ANTHONY HALL ..... Houston  
Dist. 85 — Harris County
- W. M. HALL, JR. ..... Laredo  
Dist. 57 — Webb, Zapata Counties
- JOE HANNA ..... Breckenridge  
Dist. 54 — Eastland, Jack, Montague, Palo  
Pinto, Stephens Counties
- ED HARRIS ..... Galveston  
Dist. 19, Pl. 1 — Galveston County
- FRANK HARTUNG ..... Houston  
Dist. 92 — Harris County
- FRED HEAD ..... Troup  
Dist. 14 — Anderson, Freestone, Henderson,  
Smith Counties
- W. S. HEATLY ..... Paducah  
Dist. 101 — Baylor, Cottle, Crosby, Dickens,  
Foard, Garza, Hardeman, Haskell, Kent,  
King, Knox, Shackelford, Stonewall, Throck-  
morton, Wilbarger Counties
- DON HENDERSON ..... Houston  
Dist. 94 — Harris County
- BOB HENDRICKS ..... McKinney  
Dist. 24 — Collin, Rockwall Counties
- JOE L. HERNANDEZ ..... San Antonio  
Dist. 57J — Bexar County
- BILL HILLIARD ..... Fort Worth  
Dist. 32, Pl. 2 — Tarrant County
- JOHN HOESTENBACH ..... Odessa  
Dist. 73 — Ector County
- BILL HOLLOWELL ..... Grand Saline  
Dist. 11 — Kaufman, Van Zandt, Wood  
Counties
- JOE A. HUBENAK ..... Rosenberg  
Dist. 21 — Brazoria, Fort Bend Counties
- SAMUEL W. HUDSON, III ..... Dallas  
Dist. 33C — Dallas County
- RAY HUTCHISON ..... Dallas  
Dist. 33Q — Dallas County
- EDDIE BERNICE JOHNSON ..... Dallas  
Dist. 33O — Dallas County
- GENE JONES ..... Houston  
Dist. 97 — Harris County
- LUTHER JONES ..... El Paso  
Dist. 72, Pl. 4 — El Paso County
- JAMES J. KASTER, JR. ..... El Paso  
Dist. 71 — Culberson, El Paso, Hudspeth,  
Jeff Davis, Presidio Counties
- AL KORIOTH ..... Dallas  
Dist. 33B — Dallas County
- DAN KUBIAK ..... Rockdale  
Dist. 36 — Falls, Milam, Williamson Counties
- JAMES E. LANEY ..... Hale Center  
Dist. 76 — Hale, Lubbock, Swisher Counties
- CAMM LARY, JR. ..... Burnet  
Dist. 43 — Bell, Burnet, Lampasas, Mills  
Counties
- HERMAN LAUHOFF ..... Houston  
Dist. 84 — Harris County
- MICKEY LELAND ..... Houston  
Dist. 88 — Harris County
- GIBSON LEWIS ..... Fort Worth  
Dist. 32, Pl. 4 — Tarrant County
- R. B. McALISTER ..... Lubbock  
Dist. 75, Pl. 2 — Lubbock County
- SUSAN GURLEY McBEE ..... Del Rio  
Dist. 70 — Brewster, Crockett, Edwards,  
Kinney, Maverick, Sutton, Terrell, Val  
Verde, Zavala Counties
- FELIX McDONALD ..... Edinburg  
Dist. 59, Pl. 1 — Hidalgo County
- T. H. McDONALD ..... Mesquite  
Dist. 33I — Dallas County
- FRANK MADLA ..... San Antonio  
Dist. 57A — Bexar County
- ROBERT MALONEY ..... Dallas  
Dist. 33E — Dallas County
- JIMMY MANKINS ..... Kilgore  
Dist. 13 — Gregg County
- ELMER MARTIN ..... Colorado City  
Dist. 61 — Fisher, Jones, Mitchell, Nolan,  
Taylor Counties
- TOM MASSEY ..... San Angelo  
Dist. 60 — Concho, Irion, Tom Green  
Counties
- JIM MATTOX ..... Dallas  
Dist. 33K — Dallas County
- ED MAYES ..... Granbury  
Dist. 33 — Erath, Hood, Johnson, Somer-  
vett Counties
- MRS. CHRIS MILLER ..... Fort Worth  
Dist. 32, Pl. 8 — Tarrant County
- GREG MONTOYA ..... Elsa  
Dist. 49 — Hidalgo, Kenedy, Kleberg, Wil-  
lacy Counties
- PAUL MORENO ..... El Paso  
Dist. 72, Pl. 2 — El Paso County
- BEN MUNSON ..... Denison  
Dist. 22 — Grayson County
- LYNN NABERS ..... Brownwood  
Dist. 55 — Brown, Callahan, Coleman,  
Comanche, McCulloch, Runnels Counties
- JON P. NEWTON ..... Beeville  
Dist. 47 — Atascosa, Bee, Dimmit, LaSalle,  
Live Oak, McMullen, Wilson Counties
- R. C. NICHOLS ..... Houston  
Dist. 98 — Harris County
- JAMES R. NOWLIN ..... San Antonio  
Dist. 57F — Bexar County
- JAMES E. NUGENT ..... Kerrville  
Dist. 56 — Gillespie, Kerr, Kimble, Llano,  
Mason, Menard, Real, San Saba, Schleicher,  
Uvalde Counties
- ROBERT O'KELLEY ..... El Paso  
Dist. 72, Pl. 1 — El Paso County
- LYNDON OLSON, JR. ..... Waco  
Dist. 35, Pl. 2 — McLennan County
- CARL PARKER ..... Port Arthur  
Dist. 7, Pl. 3 — Jefferson County
- WALT PARKER ..... Denton  
Dist. 25 — Denton County
- JOE PENTONY ..... Houston  
Dist. 80 — Harris County
- WAYNE PEVETO ..... Orange  
Dist. 8 — Jefferson, Orange Counties
- TONY POLUMBO ..... Houston  
Dist. 96 — Harris County
- PIKE POWERS ..... Beaumont  
Dist. 7, Pl. 2 — Jefferson County
- BILL PRESNAL ..... Bryan  
Dist. 28 — Brazos, Robertson Counties
- GEORGE L. PRESTON ..... Paris  
Dist. 9 — Camp, Delta, Franklin, Lamar, Red  
River, Titus Counties
- PAUL B. RAGSDALE ..... Dallas  
Dist. 33N — Dallas County
- DON RAINS ..... San Marcos  
Dist. 45 — Bandera, Bexar, Blanco, Frio,  
Hays, Kendall, Medina Counties



BEN T. REYES ..... Houston  
Dist. 87 — Harris County

RICHARD F. REYNOLDS ..... Richardson  
Dist. 33P — Dallas County

ABRAHAM RIBAK ..... San Antonio  
Dist. 57G — Bexar County

CALVIN RUCKER ..... Cedar Hill  
Dist. 33H — Dallas County

JOE SALEM ..... Corpus Christi  
Dist. 48, Pl. 3 — Nueces County

TOM SCHIEFFER ..... Fort Worth  
Dist. 32, Pl. 5 — Tarrant County

CHRIS V. SEMOS ..... Dallas  
Dist. 33F — Dallas County

W. C. SHERMAN ..... Fort Worth  
Dist. 32, Pl. 3 — Tarrant County

E. L. SHORT ..... Tahoka  
Dist. 77 — Andrews, Gaines, Hockley, Lynn,  
Martin, Terry, Yoakum Counties

ROBERT D. SIMPSON ..... Amarillo  
Dist. 65 — Carson, Potter, Randall Counties

RICHARD C. SLACK ..... Pecos  
Dist. 69 — Crane, Ector, Loving, Pecos,  
Reeves, Ward, Winkler Counties

C. L. SLAY ..... Beaumont  
Dist. 7, Pl. 1 — Jefferson County

CARLYLE SMITH ..... Grand Prairie  
Dist. 33J — Dallas County

JOE SPURLOCK, II ..... Fort Worth  
Dist. 32, Pl. 6 — Tarrant County

DAVID STUBBEMAN ..... Abilene  
Dist. 62 — Taylor County

BILL SULLIVANT ..... Gainesville  
Dist. 23 — Cooke, Fannin, Grayson, Wise  
Counties

G. J. SUTTON ..... San Antonio  
Dist. 57E — Bexar County

PERRY A. TANNER, JR. .... Livingston  
Dist. 16 — Liberty, Polk, San Jacinto,  
Trinity, Tyler Counties

ELMER TARBOX ..... Lubbock  
Dist. 75, Pl. 1 — Lubbock County

ARTHUR TEMPLE ..... Diboll  
Dist. 6 — Angelina, Newton, Sabine, San  
Augustine Counties

SENFRONIA THOMPSON ..... Houston  
Dist. 89 — Harris County

RUBEN TORRES ..... Port Isabel  
Dist. 50 — Cameron County

CARLOS F. TRUAN ..... Corpus Christi  
Dist. 48, Pl. 2 — Nueces County

D. R. UHER ..... Bay City  
Dist. 31 — Brazoria, Matagorda, Wharton  
Counties

R. L. VALE ..... San Antonio  
Dist. 57I — Bexar County

KENNETH VAUGHAN ..... Garland  
Dist. 33D — Dallas County

LARRY A. VICK ..... Houston  
Dist. 83 — Harris County

TIM VON DOHLEN ..... Goliad  
Dist. 39 — DeWitt, Goliad, Jackson, Karnes,  
Lavaca, Refugio Counties

CRAIG A. WASHINGTON ..... Houston  
Dist. 86 — Harris County

RON WATERS ..... Houston  
Dist. 79 — Harris County

ED R. WATSON ..... Deer Park  
Dist. 17 — Chambers, Galveston, Harris  
Counties

SARAH WEDDINGTON ..... Austin  
Dist. 37, Pl. 2 — Travis County

EMMETT H. WHITEHEAD ..... Rusk  
Dist. 15 — Cherokee, Houston, Leon, Lime-  
stone Counties

JOHN WHITMIRE ..... Houston  
Dist. 82 — Harris County

LEROY J. WIETING ..... Portland  
Dist. 41 — Aransas, Nueces, San Patricio  
Counties

DOYLE WILLIS ..... Fort Worth  
Dist. 32, Pl. 9 — Tarrant County

JOHN WILSON ..... LaGrange  
Dist. 30 — Bastrop, Colorado, Fayette,  
Gonzales, Lee Counties

JOE WYATT, JR. .... Bloomington  
Dist. 40 — Calhoun, Victoria Counties

## CONGRESS PASSES HEALTH LEGISLATION

Regional Medical and Comprehensive Health Planning programs will be replaced by a Health Systems Agency function through Public Law 93-641, signed into law by President Ford in early January.

The law was the only major health bill to pass the 93rd Congress.

The health law sets up a National Council on Health Planning and Development in the Department of Health, Education and Welfare; a nationwide system of regional Health Systems Agencies and state level functions for planning, developing, coordinating and facilities construction.

The bill, authorizing more than \$1 billion over two years, allows an 18-month transition to absorb RMPs and CHPs into HSAs. It also authorizes \$390 million over the next three years for Hill-Burton allotments and project grants.

Essentially, the bill recognizes three problems: cost escalation, equal access to health care and more equitable distribution of health care personnel and the erratic quality of service. Through the legislation, Congress gave the implication that they felt current health care services are not coordinated and are often in competition. Goal of the new legislation is to impact upon the problems and to increase accept-

ability and effectiveness of health care programs.

The Governor must designate health service areas by the first of May. These areas are to be operational by October. If the Governor takes no action, HEW will designate them.

Population and the availability of resources to provide health care are the criteria upon which HSA boundaries are to be drawn.

HEW must designate a Health System Agency for each health service area within 18 months. A state agency will detail functions and procedures to be followed by the agencies.

The new law replaces the Comprehensive Health Planning and Services law in steps. HEW intends to fund current Regional Medical Program activities through calendar year 1975.

HEW conducted a series of regional meetings for officials of existing planning programs in January, one of which was attended by RMPT staff.

The Health Legislation Policy Committee, funded by RMPT, is formulating recommendations for the Governor and the Legislature as to how the bill should be implemented in Texas. As reported last issue, TOMA is participating as a member of this committee.



# One Booth to Sell -- and our exhibit area will be filled!

With a little help from our friends, 57 of the 58 exhibit spaces planned for our 76th Annual Convention have been reserved. Several letters are out in answer to inquiries from other firms who are interested in exhibiting; so that last booth will go to the first one who asks for it.

A number of members have encouraged suppliers to exhibit, and a number of booth reservations have been received through their efforts.

We appreciate it!

And the exhibitors will appreciate TOMA and its members if each of you take the time to visit them and let them know how much their support of our convention means. We want them back next year!

Abbott Laboratories  
American Medical International  
Auxiliary to TOMA  
Ayerst Laboratories  
Boehringer Ingelheim Ltd.  
Bristol Laboratories  
Ciba Rx Company  
Comatic Laboratories  
Control—O—Fax  
Cornish Medical Products Co.  
William H. Dean & Associates  
Dow Pharmaceuticals  
Eaton Laboratories  
Fisons Corporation  
Geigy Laboratories  
Hill Laboratories  
Hoechst-Rousell Pharmaceuticals  
International Medical Electronics  
Ives Laboratories, Inc.  
Landry Pharmaceuticals  
Lederle Laboratories  
Marcen Laboratories  
Marion Laboratories  
Masterpiece Jewelers  
Mead Johnson  
Measured Meals Enterprise  
Metro—Med, Inc.  
Millex Southern, Inc.  
Miller Pharmacal Company, Inc.  
National Whirlpool Corp.  
Ortho Pharmaceutical Corp.

Parke, Davis & Company  
Professional Counseling Inc.  
Professional Mutual Insurance  
Reed & Carnick  
Riker Laboratories  
A. H. Robins  
Roche Laboratories  
Sandoz Pharmaceutical  
Smith Kline & French Laboratories  
E. R. Squibb & Sons, Inc.  
State Department of Health  
Stuart Pharmaceuticals  
Syntex Laboratories  
TCOM  
Texas Pharmacal Company  
Tri—Cast  
S. J. Tutag  
Upjohn Company  
U. S. V. Pharmaceutical  
Vita Mix Corporation  
Webcon Pharmaceuticals  
Wesley Pharmacal Company  
Western Research Laboratories  
Wood Printing Company  
Wyeth Laboratories  
X—Ray Sales & Services

## GRANTORS

Eli Lilly and Company — \$250.00  
Merck Sharp & Dohme — \$500.00

Before prescribing, please consult complete product information, a summary of which follows:

**Indications:** Symptomatic relief of hypersecretion, hypermotility and anxiety and tension states associated with organic or functional gastrointestinal disorders; and as adjunctive therapy in the management of peptic ulcer, gastritis, duodenitis, irritable bowel syndrome, spastic colitis, and mild ulcerative colitis.

**Contraindications:** Patients with glaucoma; prostatic hypertrophy and benign bladder neck obstruction; known hypersensitivity to chlordiazepoxide hydrochloride and/or clidinium bromide.

**Warnings:** Caution patients about possible combined effects with alcohol and other CNS depressants. As with all CNS-acting drugs, caution patients against hazardous occupations requiring complete mental alertness (e.g., operating machinery, driving). Though physical and psychological dependence have rarely been reported on recommended doses, use caution in administering Librium (chlordiazepoxide hydrochloride) to known addiction-prone individuals or those who might increase dosage; withdrawal symptoms (including convulsions), following discontinuation of the drug and similar to those seen with barbiturates, have been reported. Use of any drug in pregnancy, lactation, or in women of childbearing age requires that its potential benefits be weighed against its possible hazards. As with all anticholinergic drugs, an inhibiting effect on lactation may occur.

**Precautions:** In elderly and debilitated, limit dosage to smallest effective amount to preclude development of ataxia, oversedation or confusion (not more than two capsules per day initially; increase gradually as needed and tolerated). Though generally not recommended, if combination therapy with other psychotropics seems indicated, carefully consider individual pharmacologic effects, particularly in use of potentiating drugs such as MAO inhibitors and phenothiazines. Observe usual precautions in presence of impaired renal or hepatic function. Paradoxical reactions (e.g., excitement, stimulation and acute rage) have been reported in psychiatric patients. Employ usual precautions in treatment of anxiety states with evidence of impending depression; suicidal tendencies may be present and protective measures necessary. Variable effects on blood coagulation have been reported very rarely in patients receiving the drug and oral anticoagulants; causal relationship has not been established clinically.

**Adverse Reactions:** No side effects or manifestations not seen with either compound alone have been reported with Librax. When chlordiazepoxide hydrochloride is used alone, drowsiness, ataxia and confusion may occur, especially in the elderly and debilitated. These are reversible in most instances by proper dosage adjustment, but are also occasionally observed at the lower dosage ranges. In a few instances syncope has been reported. Also encountered are isolated instances of skin eruptions, edema, minor menstrual irregularities, nausea and constipation, extrapyramidal symptoms, increased and decreased libido—all infrequent and generally controlled with dosage reduction; changes in EEG patterns (low-voltage fast activity) may appear during and after treatment; blood dyscrasias (including agranulocytosis), jaundice and hepatic dysfunction have been reported occasionally with chlordiazepoxide hydrochloride, making periodic blood counts and liver function tests advisable during protracted therapy. Adverse effects reported with Librax are typical of anticholinergic agents, i.e., dryness of mouth, blurring of vision, urinary hesitancy and constipation. Constipation has occurred most often when Librax therapy is combined with other spasmolytics and/or low residue diets.



Roche Laboratories  
Division of Hoffmann-La Roche Inc.  
Nutley, New Jersey 07110



# ANNOUNCING A NEW EDUCATIONAL OPPORTUNITY FOR OSTEOPATHIC PHYSICIANS

## THE ROCHE OSTEOPATHIC HOME STUDY PROGRAM

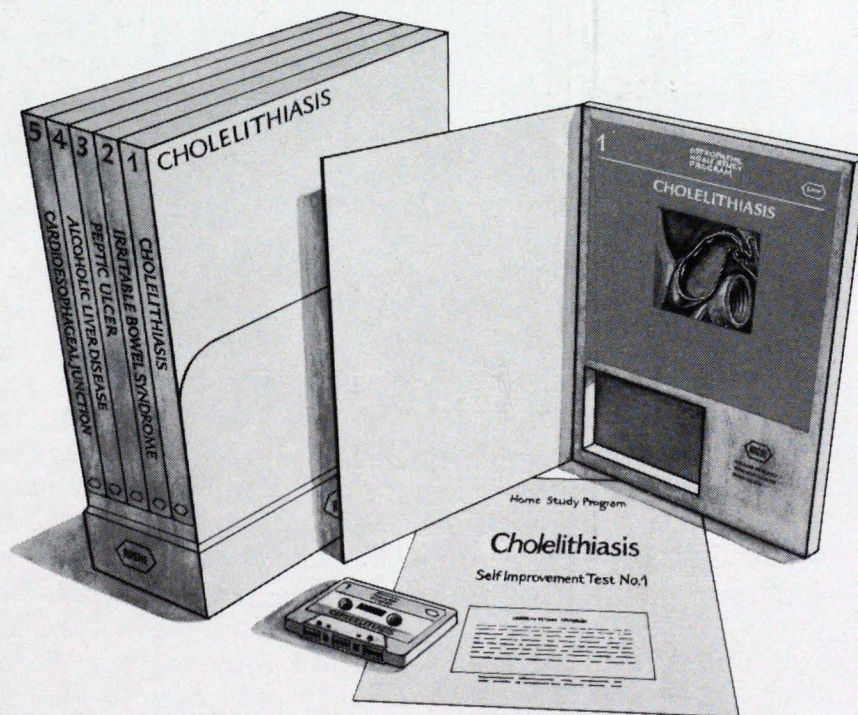
Introduced at the 1974 annual meeting of the American Osteopathic Association, the Roche Osteopathic Home Study Program reaffirms Roche Laboratories' continuing commitment to postgraduate learning programs in gastroenterology. It was coordinated by Dr. George T. Caleel, Professor of Medicine and Dean of Clinical Education at the Chicago College of Osteopathic Medicine and a leading figure in the American College of Osteopathic Internists.

Dr. Caleel is moderator of the five component programs, each comprising several elements: (1) an audiotaped discussion of one of the following topics—Program I. Cholelithiasis; Program II. Irritable Bowel Syndrome; Program III. Peptic Ulcer; Program IV. Alcoholic Liver Disease; and Program V. Cardioesophageal Junction. (2) a monograph on the specific

topic with information pertaining to the case histories presented on the tapes. (3) a self-assessment quiz.

On completion of the test, the physician may then send it to the American College of Osteopathic Internists, where it will be reviewed and returned for his self-evaluation relative to his peer group, in accordance with a quartile peer grading system. At the end of the entire program, the assessment data will be fully evaluated and become the basis for a Clinical Seminar to be sponsored by Roche and the ACOI at the 1975 AOA annual meeting.

**How you can participate**—Physicians interested in taking advantage of this opportunity may do so by informing their Roche representative or writing to Roche Laboratories, Division of Hoffmann-La Roche Inc., Nutley, N.J. 07110.



A professional service of Roche Laboratories...  
another commitment to continuing education in the field of gastroenterology.

Antianxiety/Anticholinergic

# Librax<sup>®</sup>

Each capsule contains 5 mg chlordiazepoxide HCl  
and 2.5 mg clidinium Br.



Please see summary of product  
information on preceding page.



# Proposed or Pending Legislation from Austin and Washington Studied Daily by TOMA

There is a difference between legislative action and political action, and you must remember that the IRS and state and federal statutes may apply to one and not the other.

In the field of legislative action, TOMA, its officers, its committees and its State Office expend a great deal of effort in perusing daily legislative reports out of Washington and Austin—searching for legislation and agency actions that affect your practice of medicine.

The Texas Legislative Service mails a daily package to the chairman of the Governmental Relations Committee and to the State Office. It contains a large stack of documents that includes the bills that have been introduced relating to health and the practice of medicine, attorney general opinions requested and rendered, listings of the meetings of all state supported agencies, college boards and commissions, resolutions introduced in either house of the state legislature, bills passed, bills signed by the governor, and other activities in the state capital year-round.

From Washington, TOMA State Office receives and supplies copies to the appropriate committeemen and officers, *Medicine and Health*, a publication covering executive agencies, regulations published in the Federal Register and personnel changes in the various Washington bureaus and offices.

A new service is now arriving called *Health Legislation*, which began publication January 29, dredges up an almost frightening body of information on bills that are hitting the legislative hopper in Washington.

*PSRO Letter* brings in what is happening across the country and in Washington relating to Professional Standards Review. *OSTEO-grams* of the AOA Washington office and *AOHA News* from Washington, as well as newsletters from several congressmen, are scanned to pick out more important bits of information for your use and response.

To illustrate the complexity of analyzing what goes on is the following capitol comment from the editors of *Health Legislation*, a publication of McGraw-Hill:

"With this first issue of *Washington Report on Health Legislation*, McGraw-Hill's Washington Health Letters group introduces a new service to the health professions. As pages 11 through 16 show, an enormous amount of health-related bills have been introduced from the moment that Congress convened January 14. The preponderance come from the 435-member House of Representatives.

"Relatively few of the proposals will be given serious consideration in the form of committee hearings and so-called committee "markup" of floor-bound bills. It is our intention to list all of the health-related bills, even those which have little or no chance of action, so that subscribers may see what proposals are being put forth and what home state Senators and Congressmen are introducing.

"It would be counter-productive, to say the least, to summarize or analyze many of these "for show" bills. We plan to pick out for special emphasis those that are destined for hearings and possible committee action. In some cases, these selected bills won't be examined immediately. We will wait until the printed bill is available since we prefer to work from the measures themselves rather than from the sponsors' sometimes deceptive summaries.

"As Congress gets underway, "sleeper" bills occasionally will pop to the surface for hearings and possible action. We will pull these out of the stack for further emphasis. Then, as hearings are held and bills are voted out of committee, we will report on the changing form the legislation takes. As bills go to the floor and emerge from House-Senate conferences we will follow the shape they take, these being the most meaningful reports.

"For those readers who want complete details instructions for ordering free copies of bills are found at the bottom of page 16. Our intention is to provide a useful and necessary service. Subscriber comment will be invaluable as we proceed." —*The Editors*.





## Putting out the fires of arthritic pain

Rheumatoid arthritis can sometimes spread like wildfire, with joint after joint going up inflamed: "The usual onset is manifested by spotty joint involvement but an acute onset of symmetrical polyarthritis may be noted."<sup>10</sup>

If aspirin fails, consider Butazolidin alka. Giving one capsule four times a day often provides prompt, pain-relieving, anti-inflammatory action to help restore joint mobility. The results you can get within a week can be maintained on as little as one or two capsules daily.

Serious side effects can occur. Select patients carefully (particularly the elderly) and follow them closely in line with the drug's precautions, warnings, contraindications and adverse reactions. For full details, please read the prescribing information. It's summarized on the back of this page.

### **Butazolidin® alka**

Each capsule contains:  
100 mg. phenylbutazone USP  
100 mg. dried aluminum hydroxide USP  
150 mg. magnesium trisilicate USP

If it doesn't work in a week, forget it.



**Fire fighter  
for arthritic  
flare-ups.**

**Butazolidin® alka**

Each capsule contains:  
100 mg. phenylbutazone USP  
100 mg. dried aluminum hydroxide gel USP  
150 mg. magnesium trisilicate USP

**If it doesn't work in a week, forget it.**  
Ragan, C.: The Clinical Picture of Rheumatoid Arthritis, in Arthritis, ed. 8, edited by J. L. Hollander and D. J. McCarty, Jr., Philadelphia, Lea & Febiger, 1972, chap. 21, p. 335.

**Geigy**

**Important Note:** This drug is not a simple analgesic. Do not administer casually. Carefully evaluate patients before starting treatment and keep them under close supervision. Obtain a detailed history, and complete physical and laboratory examination (complete hemogram, urinalysis, etc.) before prescribing and at frequent intervals thereafter. Carefully select patients, avoiding those responsive to routine measures, contraindicated patients or those who cannot be observed frequently. Warn patients not to exceed recommended dosage. Short-term relief of severe symptoms with the smallest possible dosage is the goal of therapy. Dosage should be taken with meals or a full glass of milk. Substitute alka capsules for tablets if dyspeptic symptoms occur. Patients should discontinue the drug and report immediately any sign of: fever, sore throat, oral lesions (symptoms of blood dyscrasia); dyspepsia, epigastric pain, symptoms of anemia, black or tarry stools or other evidence of intestinal ulceration or hemorrhage, skin reactions, significant weight gain or edema. A one-week trial period is adequate. Discontinue in the absence of a favorable response. Restrict treatment periods to one week in patients over sixty. **Indications:** Rheumatoid arthritis, osteoarthritis, bursitis, acute gouty arthritis and rheumatoid spondylitis.

**Contraindications:** Children 14 years or less; senile patients; history or symptoms of G.I. inflammation or ulceration including severe, recurrent or persistent dyspepsia; history or presence of drug allergy; blood dyscrasias; renal, hepatic or cardiac dysfunction; hypertension; thyroid disease; systemic edema; stomatitis and salivary gland enlargement due to the drug; polymyalgia rheumatica and temporal arteritis; patients receiving other potent chemotherapeutic agents, or long-term anticoagulant therapy.

**Warnings:** Age, weight, dosage, duration of therapy, existence of concomitant diseases, and concurrent potent chemotherapy affect incidence of toxic reactions. Carefully instruct and observe the individual patient, especially the aged (forty years and over) who have increased susceptibility to the toxicity of the drug. Use the effective dosage. Weigh initially unpre-

dictable benefits against potential risk of severe, even fatal, reactions. The disease condition itself is unaltered by the drug. Use with caution in first trimester of pregnancy and in nursing mothers. Drug may appear in cord blood and breast milk. Serious, even fatal, blood dyscrasias, including aplastic anemia, may occur suddenly despite regular hemograms, and may become manifest days or weeks after cessation of drug. Any significant change in total white count, relative decrease in granulocytes, appearance of immature forms, or fall in hematocrit should signal immediate cessation of therapy and complete hematologic investigation. Unexplained bleeding involving CNS, adrenals, and G.I. tract has occurred. The drug may potentiate action of insulin, sulfonyleurea, and sulfonamide-type agents. Carefully observe patients taking these agents. Nontoxic and toxic goiters and myxedema have been reported (the drug reduces iodine uptake by the thyroid). Blurred vision can be a significant toxic symptom worthy of a complete ophthalmological examination. Swelling of ankles or face in patients under sixty may be prevented by reducing dosage. If edema occurs in patients over sixty, discontinue drug.

**Precautions:** The following should be accomplished at regular intervals: Careful detailed history for disease being treated and detection of earliest signs of adverse reactions; complete physical examination including check of patient's weight; complete weekly (especially for the aged) or an every two week blood check; pertinent laboratory studies. Caution patients about participating in activity requiring alertness and coordination, as driving a car, etc. Cases of leukemia have been reported in patients with a history of short- and long-term therapy. The majority of these patients were over forty. Remember that arthritic-type pains can be the presenting symptom of leukemia.

**Adverse Reactions:** This is a potent drug; its misuse can lead to serious results. Review detailed information before beginning therapy. Ulcerative esophagitis, acute and reactivated gastric and duodenal ulcer with perforation and hemorrhage, ulceration and perforation of large bowel, occult G.I. bleeding with anemia, gastritis, epigastric pain, hematemesis, dys-

pepsia, nausea, vomiting and diarrhea, abdominal distention, agranulocytosis, aplastic anemia, hemolytic anemia, anemia due to blood loss including occult G.I. bleeding, thrombocytopenia, pancytopenia, leukemia, leukopenia, bone marrow depression, sodium and chloride retention, water retention and edema, plasma dilution, respiratory alkalosis, metabolic acidosis, fatal and nonfatal hepatitis (cholestasis may or may not be prominent), petechiae, purpura without thrombocytopenia, toxic pruritus, erythema nodosum, erythema multiforme, Stevens-Johnson syndrome, Lyell's syndrome (toxic necrotizing epidermolysis), exfoliative dermatitis, serum sickness, hypersensitivity angitis (polyarteritis), anaphylactic shock, urticaria, arthralgia, fever, rashes (all allergic reactions require prompt and permanent withdrawal of the drug), proteinuria, hematuria, oliguria, anuria, renal failure with azotemia, glomerulonephritis, acute tubular necrosis, nephrotic syndrome, bilateral renal cortical necrosis, renal stones, ureteral obstruction with uric acid crystals due to uricosuric action of drug, impaired renal function, cardiac decompensation, hypertension, pericarditis, diffuse interstitial myocarditis with muscle necrosis, perivascular granulomata, aggravation of temporal arteritis in patients with polymyalgia rheumatica, optic neuritis, blurred vision, retinal hemorrhage, toxic amblyopia, retinal detachment, hearing loss, hyperglycemia, thyroid hyperplasia, toxic goiter, association of hyperthyroidism and hypothyroidism (causal relationship not established), agitation, confusional states, lethargy; CNS reactions associated with overdosage, including convulsions, euphoria, psychosis, depression, headaches, hallucinations, giddiness, vertigo, coma, hyperventilation, insomnia; ulcerative stomatitis, salivary gland enlargement.

(B)98-146-070-J (10/71)

For complete details, including dosage, please see full prescribing information.

GEIGY Pharmaceuticals  
Division of CIBA-GEIGY Corporation  
Ardsley, New York 10502

BU 10259



# *Texas Bill Follows Federal*

## *Statute Allowing Honorariums*

The people of Texas barely pay a legal minimum wage to the men and women who serve in the State Legislature. A recent interpretation of a law passed in 1973 precludes them from accepting honorariums.

H. B. 591 has been introduced in the House to set limits on honorariums. The bill is fashioned after a Federal statute, and it limits any one honorarium to \$300.00 and the total for a calendar year to \$3,000.

Introduced by Henderson, et al.

H. B. 591

Referred to Committee on Criminal Jurisprudence

### A BILL TO BE ENTITLED

#### 1 AN ACT

2 relating to regulation of acceptance of certain honorariums by  
3 members of the legislature; prescribing penalties; amending Chapter  
4 421, Acts of the 63rd Legislature, Regular Session, 1973 (Article  
5 6252—9b, Vernon's Texas Civil Statutes); and declaring an  
6 emergency.

7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

8 Section 1. Chapter 421, Acts of the 63rd Legislature,  
9 Regular Session, 1973 (Article 6252—9B, Vernon's Texas Civil  
10 Statutes), is amended by adding a Section 7A to read as follows:

11 "Section 7A. MEMBERS OF THE LEGISLATURE: HONORARIUMS.

12 (a) A member of the legislature commits an offense if he or she:

13 "(1) accepts or agrees to accept an honorarium of more  
14 than \$300, excluding amounts accepted for actual travel and  
15 subsistence expenses, for any appearance, speech, or written  
16 article; or

17 "(2) accepts honorariums not prohibited by Subdivision (1)  
18 of this subsection aggregating more than \$3,000 in any calendar  
19 year.

20 "(b) A financial statement filed by a member of the  
21 legislature as required by Section 3(a) of this Act shall include,  
22 in addition to the information required by Section 4 of this Act,  
23 a list of honorariums accepted during the reporting period, stating  
24 for each the date accepted, the amount, the name of the grantor,

Page 2

1 and a description of the service for which the honorarium was  
2 accepted.

3 "(c) An offense under Subsection (a) of this section is  
4 a Class A misdemeanor."

5 Sec. 2. The importance of this legislation and the crowded  
6 condition of the calendars in both houses create an emergency and  
7 an imperative public necessity that the constitutional rule  
8 requiring bills to be read on three several days in each house  
9 be suspended, and this rule is hereby suspended, and that this  
10 Act take effect and be in force from and after its passage, and  
11 it is so enacted.



# PROFESSIONAL LIABILITY INSURANCE

for

Texas Osteopathic Physicians,  
Clinics and Hospitals

**WHO?** GUARANTY NATIONAL INSURANCE COMPANY  
(Rated "A" In Best's)

Home Office - Denver, Colorado

**WHAT?** Complete Professional Liability Protection

- \*Basic Professional Coverage
- \*Professional Umbrella (Individual or Corp)
- \*Personal Umbrella
- \*Office Liability
- \*Personal Injury

**WHY?** "...to provide you with the  
Best possible coverage..."

**WHERE?**

Available Through...  
Your Local Agent...  
...Have Him Contact...



- > MYRON F. STEVES & CO.  
Excess and Surplus Lines Agent
- > 1404 FANNIN BANK BUILDING
- > HOUSTON, TEXAS 77025
- > (713) 748-1511
- > Cable: Myste, Telex 762-274

...for details and rates





# A7OMA News

## Special convention activities being planned for ladies

In 1841 John Neely Bryan was the first settler to build a cabin on a barren piece of land now known as Downtown Dallas.

Today, ten miles north, on a barren piece of land five acres larger than Downtown Dallas, is a new settlement—the Olla Podrida. The settlers here are a gutsy group of people. For the most part, they're craftsmen who work with their hands—painting, wood carving, sculpting, weaving, baking. They work in an old barn where you'll see a brick street lined with wooden shops and stained glass windows.

At least the ladies who attend TOMA's 76th Annual Convention will have the opportunity to see all this, according to plans being made by Auxiliary convention chairwoman, Mrs. M. L. Coleman.

Thursday afternoon has been set aside for a tour of this most unusual settlement—a marketplace for artists, craftsmen and collectors. Special buses will pick up the ladies at the Sheraton-Dallas at 2:00 p.m. and bring them back to the hotel in plenty of time to get ready for the evening "Champagne with the Exhibitors".



Olla Podrida means "all in the pot," and according to their brochures, it is definitely a place that lives up to its name. They say, "A step inside is a step into a different



world. Open space, skylights, and healthy green plants blend with hugh weathered timbers from Waco, iron grillwork, bars and cell doors from the old Abilene jail.

"The Olla Podrida contains dozens of individual shops—only slightly less unique than the individuals who keep them. They're artists and craftsmen who specialize—who take pride in what they create and sell."

This is just one of the activities being planned for the ladies who attend the convention. A complete program for them will appear in the April issue of this *Journal*.



## KC Alumni Membership Rights Restored by Court Order

Alumni of the Kansas City College of Osteopathic Medicine are once again members of the non-profit corporation which is KCCOM.

In a declaratory judgment, the Kansas City Circuit Court also enjoined KCCOM from acting under bylaws adopted July 17, 1972, which eliminated membership in the corporation and made the Board of Trustees of the college a self-perpetuating Board.

The Court observed that regardless of the contentions of the defendant college that, as a practical matter, the members of the not-for-profit corporation in question have little, if any, actual power or voice in the affairs of the corporation; and that they become members of the corporation without being required to make financial contributions. The Board acted contrary to corporate law in denying membership to alumni of the college, the court said in effect.

The Court ruled that the cost of the legal action was taxed against the defendant college.

Text of the Court decision by Judge Julian M. Levitt is contained in the January/February issue of the Missouri Association of Osteopathic Physicians and Surgeons' journal, *Cooperation*.

### DALLAS, TEXAS

Now accepting leases for

### ATTRACTIVE NEW PROFESSIONAL BUILDING

Strategically located in prospering north Dallas near Richardson on Coit Road between LBJ Freeway and Central Expressway. Across Coit Road from developing \$150 million Park Central complex.

**WILL BUILD TO SUIT TENANT**

Contact

**Ronald Regis Stegman, D.O.**

Coit-Central Building—Suite 119

12011 Coit Road

Dallas, Texas 75230

214-233-9222 or 214-369-2233



greener fields?

## make • your • move

### OPPORTUNITIES FOR OSTEOPATHIC PHYSICIANS IN TEXAS

**DALLAS**—Will build to suit tenant. Leases being accepted in new professional building in north Dallas near Richardson, across from developing \$150 million Park Central Complex. Contact Ronald Regis Stegman, D.O., 214-233-9222 or 214-369-2233 or Coit-Central Bldg. Suite 119, 12011 Coit Road, Dallas, Texas 75230.

**RIO GRANDE VALLEY**—Now that you have seen McAllen and some of the surrounding areas, (and Reynosa) I hope some of you became interested in this part of Texas to look at it again. And although this is an "economically depressed area" you can also get a maid for \$20 a week; one that speaks English for \$25. Contact Joe Suderman, D.O., 710 South Cage, Pharr 78577. 512-787-4271

**MESQUITE**—3000 square feet in beautiful new green Texas marble clinic building in Mesquite, Texas. Close to three well-equipped hospitals (two open staff, joint M.D.—D.O. hospitals) excellent for GPs or Dentists. Contact G. A. Swayze, D.O., Phone 214-285-5440.

**EAST TEXAS** — Some of the world's best fishing and a lot of nice people await D.O.s who wish to locate in East Texas. Surrounding Pineland is 12,000 population, and a 60-bed nursing home. In Newton, there is 14,000 population in the county and a modern 47-bed hospital. Two M.D.s in Newton friendly to D.O.s. Pineland needs you today. Write Clint L. Hines, Drawer E, Newton, Texas 75966; or call collect 713-379-8177.

**TROUP**—Young G.P. badly needed to take over established practice in small town in East Texas. One D.O. already there. Good opportunity. Can see 20 to 30 patients the first day of practice. Hospital privileges available in nearby osteopathic hospital. Contact: Carl F. List, D.O., 705 West Duval Street, Troup, 75780; Phone 214-842-3366.

**ANSON**—Brand new clinic has space for two young G.P.s. Accredited joint staff 45-bed hospital. Located 22 miles north of Abilene; 2,800 town population; 20,000 in county. Contact Wendell Barber, Administrator, Anson General Hospital, Anson, Texas 79501. Phone: 915-823-3231.

**HOUSTON**—G.P. needed to assist with medical clinic, within walking distance of hospital. Six months rent free. Emergency room coverage if desired. Excellent practice site in area where doctor is badly needed. Call collect: Don Wenglar, Administrator, Gulfway General Hospital; 713-644-2241.

**HOUSTON**—Excellent salary. Liberal fringe benefits. Pension and profit sharing. GP and opportunity to get Board Certified in Proctology. Contact Lester Tavel, D.O., 3430 Reville, Houston 77017. Phone 713-644-3812.

(For information call or write Mr. Tex Roberts, Executive Director, TOMA Locations Committee, 512 Bailey, Fort Worth, Texas 76107, 817-336-0549.)

**WINTERS**—Needs two family physicians willing to do some surgery. New 25-bed hospital, office space and financial assistance available. Population 3,000 plus with 15,000 drawing area. Contact J. Shook, R.N., Adm., North Runnels Hospital, Winters 79567. Phone 915-754-5097.

**INTERN** now in AOA internship at Doctor's Hospital in Columbus, Ohio seeking association with active general practitioner in central or southeast Texas. Contact James A. McLaughlin, D.O., 79 West Starr, Columbus, Ohio 43201. Phone: 614-299-5715.

**FORT WORTH SUBURB**—Due to illness, must sell new ten-room clinic in a desirable, prosperous, Fort Worth suburb. Convenient to Fort Worth Osteopathic Hospital, and TCOM. General and Industrial medicine. Building 2,327 sq. ft., reasonably financed. A bargain! Contact A. H. Clinch, D.O., 120 W. Watauga Rd., Saginaw, 76079.

**INTERN** desires association in an active general practice in North Central Texas area. Will be available about August 1. Contact: W. W. Hedges, D.O., 1321 Provincetown Lane, Richardson 75080. Phone 214-231-5959.

**QUITMAN**—Wood County Central Hospital seeking one or two physicians; GPs or GP and surgery. Will assist in building office and clinic. Contact Stanley Parks, Administrator, Drawer A, Quitman 75783. Phone 214-763-4306 or 214-763-2226.



### DISCLAIMER

The following information is some we have picked up from tax guides. We offer it as guidelines only, since we are not versed in tax laws. The tips printed below are to give you some ideas on what convention expenses may be deductible and how to be sure you keep proper records to hand to your tax man next year.

\* \* \*

Since the TOMA Annual Convention is designed to help the doctor improve his skills and bring him up-to-date on what is new in medicine, he can deduct most of the cost of attending as a business expense — BUT he must be able to prove the purpose of the trip, if called upon to do so, and prove that he actually attended the sessions. As was the case last year, TOMA will provide cards for members to sign for each session; then if the need for proof arises, photocopies can be supplied you.

Be sure to keep your program, and it's a good idea to use it as a check list of the sessions you attended, in case you neglected to sign in or turn in your card at the registration desk.

Pay all your convention expenses with a business check, including registration fees, transportation and hotel bills—and keep your receipted bills.

Extracurricular activities, such as sightseeing on your own, living it up a little, et cetera, are fine, but don't try to deduct the cost of them. It could mean trouble — with a capital "T".

One of the tax guides we have says you can entertain business associates, "before, between, or after convention business meetings" and the cost is deductible. However, being professional people, better check on just what is meant here by "business associates".

The tax rule to which this applies

is whether the entertainment is "associated with" a qualified, bona fide, substantial business meeting." If you can prove that it is, possibly you can not only deduct the cost of entertaining your "business associate", but also that of your wife and his. You cannot deduct your wife's convention expenses, but you may be able to deduct some of her entertainment costs, as above.

Apparently if you attend the convention primarily for business reasons, you can deduct the full cost of any fees, your travel, meals and hotel room—plus business entertainment.

We understand that if you pay your wife's Auxiliary dues with a business check, it is "business related" and is deductible. And if she attends the convention and Auxiliary meetings in an official capacity (such as being an officer, committee chairman, official delegate to the ATOMA House, et cetera) her actual expenses may be deducted.

As our disclaimer states at the beginning of this item, DON'T TAKE OUR WORD FOR IT!. We are simply giving you some suggestions and reminders that you can enjoy a convention, as well as learning from it, without it costing a bundle!

In recognition of his 25 years of service to District VII of TOMA, Dr. Waldemar D. Schaefer was presented a commemorative plaque by District President Dr. Robert L. Peters at a recent meeting.

Last year's House of Delegates meeting was the 20th at which Dr. Schaefer officially represented District VII. He has been elected to serve in that capacity again this year. According to records in the State Office, no member has ever served as a delegate 21 years.

Dr. Schaefer is a 1948 Kirksville graduate and is a Fellow in the American College of General Practitioners in Osteopathic Medicine and Surgery. He is secretary-treasurer of his District.



5003 Ross Avenue • Dallas, Texas 75206 • Telephone (214) 824-3071

## DALLAS OSTEOPATHIC HOSPITAL

### Internal Medicine and Nuclear Medicine

C. D. Brashier, D.O.  
L. T. Cannon, D.O.  
J. R. McLean, D.O.

### Radiology

R. N. Dott, D.O.  
Frank J. Bradley, D.O.

### General Surgery

E. G. Beckstrom, D.O.  
W. R. Russell, D.O.  
Charles H. Bragg, D.O.

### Obstetrics and Gynecologic Surgery

R. L. Fischer, D.O.



### CONSULTANT STAFF

#### Pathology

G. E. Miller, D.O.

#### Medical and Surgical Anesthesiology

H. H. Beckstrom, D.O.  
S. S. Kababjian, D.O.  
Paul A. Stern, D.O.

### Proctology and Urology

K. S. Wooliscroft, D.O.

### Orthopedics

T. R. Turner, D.O.  
J. A. Yeoham, D.O.  
M. L. Glickfeld, D.O.

### Ophthalmology and Otorhinolaryngology

R. M. Cornell, D.O.

### Ophthalmology

Hubert M. Scadron, D.O.

### Otorhinolaryngology

Martin E. O'Brien, D.O.



## Proposed Amendent to TOMA Bylaws

The following amendment to TOMA's bylaws will be proposed to the House of Delegates at its April 30 meeting by the TOMA Constitution, Bylaws and Documents Committee; Dr. David F. Norris, chairman:

Article II, Section 5—Sustaining Membership. Sustaining members shall be regular members of the Association whose dispositions and

circumstances enable additional financial support of the Association's program of service as stated in Article III, Section 3. Sustaining membership shall be granted by the Board of Trustees. Sustaining members shall have all the privileges of regular membership. A sustaining member may become a regular member by notifying the Executive Director of his desire to do so. ▲

### DALWORTH

Medical Laboratories, Inc.

*Accuracy/Service/Economy*

1410 W. Rosedale  
Fort Worth, Texas 76104  
Phone 817-336-0376

### THOMAS O'SHEA & ASSOCIATES CONSULTANT

Surgical & Clinical Pathologists

J. Thomas O'Shea, D.O.  
Myron G. Skinner, D.O.  
Russell Bowman, Ph.D.  
216 Silverleaf Drive  
Fort Worth, Texas 76112  
817-451-0743

### PSYCHIATRIST or PHYSICIAN

Interested in unique psychiatric therapeutic opportunity as program chief to lead mental health team in adolescent, geriatric, behavior modification, forensic or general psychiatry program.

*Requires motivation and ability to assume responsibility, exercise authority, plan and direct innovative programs.*

Beautiful small town living near metropolitan areas, many colleges.

Housing available.

Texas license required.

Psychiatrist — \$27,500 - \$30,000

Physician — \$24,000 - \$27,500

### IMMEDIATE OPENINGS

Call collect or write:

Robert B. Sheldon, M.D.

Superintendent

Rusk State Hospital

P.O. Box 318

Rusk, Texas 75785

Phone 214-683-5481

*Equal Employment Opportunity/  
Affirmative Action Employer*

## The Health Care Crisis

The health care crisis supposedly stemming from inadequate medical facilities, overworked physicians, high cost health insurance, and Americans dropping like flies from catastrophic illnesses is just so much baloney. Facts in the December issue of *Economics Review* show less than one per cent of all hospital admissions are of a catastrophic nature. Less than nine per cent of all hospital admissions in 1974 cost over \$2,000, and less than one and a half per cent had expenses over \$5,000. Most heavy hospital expenses were incurred by Medicare and psychiatric patients. Most Americans are adequately covered by health insurance. Physician's fees showed the lowest increase of all factors in the nation's economy last year. ▲

[Reprinted from the January 1975 issue of the Arizona Osteopathic Digest, published by the Arizona Osteopathic Medical Association, Phoenix, Arizona]

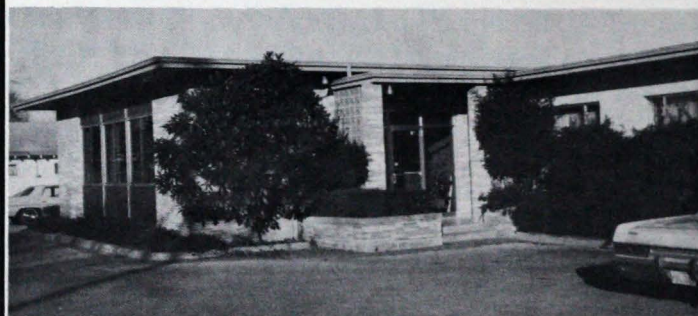
The question, "Who ought to be boss?" is like asking "Who ought to be tenor in the quartet?"

Obviously the man who can sing tenor.

Henry Ford

## FOR SALE DOCTORS' CLINIC

in Northeast Texas'  
Fastest Growing Community



*Includes four doctor's suites,  
lab and pharmacy*

*Near new 4-story hospital*

Write or Call for Free Brochure and Particulars

KEN HALE AND ASSOCIATES

Realtors and Insurers

4005 Wesley

Greenville, Texas 75401

Phone 214-455-2813



# LETTERS

February 7, 1975

Bobby G. Smith, D.O.

Dear Dr. Smith:

I want to express my regrets that I was unable to attend your association's Institute on Governmental Operations at the Lakeway Inn last month. The Senate does not meet on Fridays this early in the session, thus allowing us to be in our home districts Friday through Sunday.

Your purpose was a fine one and an important one; and I hope your meeting was a great success. Hopefully I will be able to participate next time.

Please don't hesitate to contact me if I may ever be of assistance to you.

(Senator) Ron Clower

~~~

Bobby G. Smith, D.O.

Government Relations Committee

Dear Dr. Smith:

I received your letter and read it with interest. I shall quote Dr. Phil Russell's statement at a meeting of the trustees of our Association in the late nineteen thirties. He said, "give me six hundred dedicated D.O.s going in the same direction and we can whip the M.D.s, who are so divided, right into the Gulf of Mexico". We were at that time fighting desperately for survival against the proud and arrogant labor union of the AMA and TAMA. In such adversity lay our strength. We had the freedom under our system of government to prove ourselves capable and worthy. This was done through action and deeds through our patients, in placing them before our own selfish desires.

In this complicated world of ours with advanced technology and the constant bombardment of the news

media, I think it is so easy to lose our way in setting our goals and charting our course.

I submit "the ole time religion" in the following manner:

Allegiance to:

1. God
2. the United States of America
3. our families
4. our patients
5. our Association

I believe that we are the servants of the patients that we serve. It is our duty and obligation to see that they receive the best care possible no matter who renders the service, either M.D. or D.O. We should select the most competent or we are betraying our trust for which we owe our very existence. You may be sure that I will do everything possible to promote our profession if it is in the interest of all the patients who do or may seek our services.

I believe sincerely in more than one party system in our government, and I also believe in a more than one party system in medicine.

Medicine organized and ruled so rigidly under the AMA failed due to too many self interest groups at the helm. I hope and pray that we do not fall into the same trap.

In adversity we have strength; in success lies power, and abuse of power, which sow the seeds of failure.

Dan B. Whitehead, D.O.

~~~

Bobby G. Smith, D.O.

Governmental Relations Committee

Dear Bobby Gene:

I wish to offer you my congratulations for a successful meeting you had several weeks ago in Austin, Texas. I am sure that in years to come we will all look back at the first such meeting.

As you know, it is that time of the year again in which your annual report is needed. I would appreciate a report from you on the many good things you are doing in Governmental Relations.

John J. Cegelski, Jr., D.O.

~~~~~

Dear Sir:

I am writing concerning the *Journal* which is published by your organization. I am a former Texas resident, and a recent graduate of Kirksville College of Osteopathic Medicine. I am currently doing an internship in Cleveland, and plan to return to Texas later this year to establish my practice there. I would like to continue to receive the *Journal* at the above address so that I may keep up with news concerning Texas physicians.

Thank you for your assistance in this matter.

Gary Neisler, D.O.

27110 Chardon Rd., No. 104

Cleveland, Ohio 44143

## THE X-RAY SALES & SERVICE CO.

**X-Ray Equipment & Supplies**  
**Burdick EKG -- Intensive Care**  
**Physiotherapy equipment**  
**Cuinier G-5 percussive apparatus**  
**Spinalator Tables**

2530 Mansfield Highway  
 Fort Worth, Texas 76119

P. O. Box 15344  
 817-535-3251

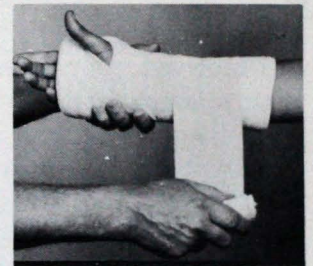
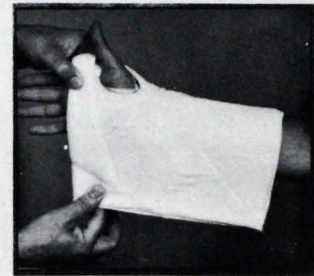
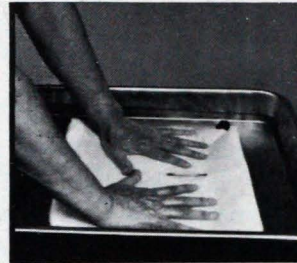


# The Time Savers

Introducing . . .

## THE NEW PRE-PADDED, ONE PIECE CASTING AND SPLINTING SYSTEM

- \* *No stockinet necessary*
- \* *No messy, dripping plaster*
- \* *No cast saw necessary*
- \* *No "windowing"*
- \* *One to three minute application*
- \* *Easy removal and refitting*
- \* *Less patient discomfort*
- \* *Versatile*



**Orthopedic Casting Laboratory**  
offers a complete line of plaster casts and splints  
with accessory products

DISTRIBUTED BY:

**TRI-CAST, INC.**

815 North Elm  
Denton, Texas 76201  
817-383-3114

*Texas Osteopathic Physicians Journal*

March 1975



# We're doing something

## DISTRICT III

by H. George Grainger, D.O.

A goodly gathering of District III husbands et al attended the Clinical Pathologic Conference from the files of Stevens Park Hospital in January. Held in Tyler's Petroleum Club, Drs. Anthony Bascone and Glen R. Monte came from Dallas to present an enlightening program. Attendance was aided by CME credit largesse.

\* \* \*

Dr. Ross McKinney (who will drop everything to attend any meeting within 300 miles) incidentally was able to pick up an extra CME credit by viewing the TOMA sponsored TV program an hour beforehand at Doctors Memorial Hospital. This is, we bet, a record milewise—for the TOMA audiovisual CME, to date. It would be good all around if the fellows from Mineola, Mount Pleasant and other points east would emulate the good doctor.

\* \* \*

Dr. Neal Pock is in the news: Item I: He was married February 16 to Jacqueline Walette, TCOM '79, if we're not mistaken. Item II: He's building a building with room for himself, a couple of dentists, and a drugstore, according to last accounts. We will keep you all in touch with developments on both items.

\* \* \*

Note to the Local Profession: Program Chairman Ogilvie is working up another big CME program for March 15. It'll be at the same place, same time, 7:30.

To those who've been inquiring where the luxurious Tyler Petroleum Club is, it is on the top floor of the Citizens First National Bank Build-

ing, downtown Tyler, on the Square. Bring your wives, et al, and let them enjoy the neon-lighted sights of Beautiful Tyler After Dark. ▲

## DISTRICT XIII

by R. D. Van Schoick, D.O.

We had a real nice turnout at the February meeting at the Country Club at Sherman. Dr. Charles R. Biggs, a Fort Worth neurologist, was Dr. Galewaler's guest speaker.

\* \* \*

The annual postgraduate course at the Statler-Hilton in Dallas was attended by six of our eleven members. I felt that this was a creditable showing.

\* \* \*

Your reporter is proud to have a granddaughter being accepted for the Presidential Classroom for Young Americans to be held in Washington, D. C. February 22 through 29. Laura Ann Grimes is a senior in high school.

\* \* \*

Dr. Pat and Mrs. Martin were host and hostess for the February meeting of the District held in Commerce at the University Inn. Pat brought as his program a procedure on rape in emergency rooms as carried out at the John Kennedy Hospital in New Jersey.

\* \* \*

Dr. Booher is our new District president for 1975-76 and Dr. Galewaler is President-elect. This reporter continues in that position, as well as that of secretary-treasurer.

Delegates elected are Dr. Pat Martin and Dr. R. D. Van Schoick. Alternates will be Dr. Roy Mathews and Dr. Lynn Fite. ▲

## DISTRICT II

by George M. Esselman, D.O.

The meeting of TOMA District II was held at the Ridglea Country Club on January 21, with Dr. D. K. Paxston, president, presiding. The educational program was presented by Dr. William P. Neal on the topic, "Disaster Medicine in the Community."

\* \* \*

Four new applicants for TOMA District II membership were presented and approved unanimously: Drs. Anesia V. Garmon, Stanley R. Briney, Jay G. Beckwith, and Charles B. Wright.

\* \* \*

Delegates to the TOMA House were presented by Dr. W. R. Jenkins, and the slate was approved unanimously. The delegates are: Drs. Bill Puryear, C. E. Dickey, L. G. Ballard, T. W. Whittle, J. T. O'Shea, W. R. Jenkins, F. D. Giles and Arthur Wiley. ▲

### FOR LEASE OFFICE SPACE

Northside area -- Share office with  
Dentist -- 1700 Square feet --  
Ample parking

#### CONTACT:

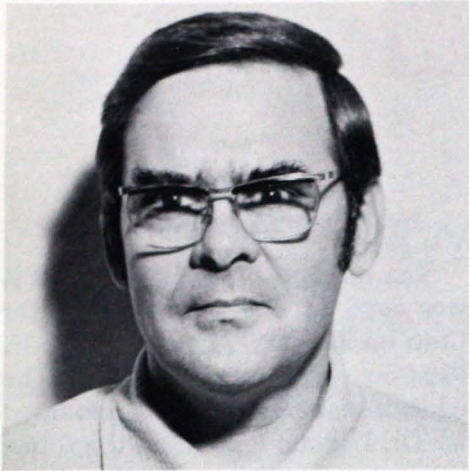
Mr. Joe M. Avila  
2302 Ellis Avenue  
Fort Worth, Texas 76106  
Phone: 817-625-2727

### GEORGE E. MILLER, D.O. PATHOLOGIST

P. O. BOX 64682  
1721 N. GARRETT  
DALLAS, TEXAS 75206



## Dr. Harakal Named TCOM Department Head



John H. Harakal, D.O., of Richardson has assumed the position of chairman of the Department of Osteopathic Philosophy, Principle and Practice at Texas College of Osteopathic Medicine, announced Edward T. Newell, D.O., vice president for academic affairs.

Dr. Harakal follows Catherine Carlton, D.O., who has served as

chairman of the department since TCOM opened in 1970.

Dr. Newell said the change in chairmanship occurred because the position has been changed from part-time to half-time with plans to increase it to full-time in the future.



"We are grateful to Dr. Carlton for the time and dedication she has given the college. We certainly hope

she will continue to teach osteopathic philosophy, principle and practice because she is a recognized expert in the field," Dr. Newell said.

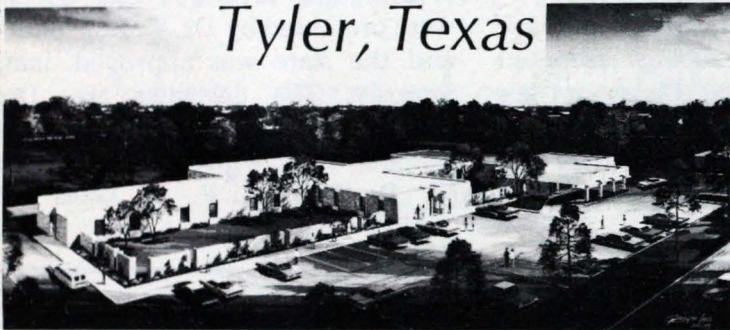
A practicing physician in Dallas, Dr. Harakal received his D.O. degree from KCOM in 1957 and served an internship at Kirksville Osteopathic Hospital in 1957-58.

A native of Sharon, Pennsylvania, he has served on the staffs of East Town Osteopathic Hospital and Dallas Osteopathic Hospital.

He was named a Fellow of the American Academy of Osteopathy in 1973.

Dr. Harakal holds membership in the AOA, TOMA, Cranial Academy, Sutherland Cranial Teaching Foundation, American Academy of Osteopathy (AAO), Texas AAO and the International Academy of Preventive Medicine.

## Doctors - Memorial Hospital Tyler, Texas



1400 Southwest Loop 323

214-597-3771

54 BEDS

Mr. Olie Clem, Administrator

*Open Staff  
Osteopathic Hospital  
in Beautiful East Texas*

### STAFF:

Ben Beall, D.O.  
William H. Clark, D.O.  
R. E. Cordes, D.O.  
H. G. Grainger, D.O.  
S. E. Jones, D.O.  
E. C. Kinzie, D.O.  
R. A. Lester, D.O.  
C. F. List, D.O.  
L. D. Lynch, D.O.  
Carter McCorkle, D.O.

D. F. Norris, D.O.  
Charles Ogilvie, D.O.  
Neal A. Pock, D.O.  
Kerry Rasberry, D.O.  
K. E. Ross, D.O.  
L. N. Sanders, D.O.  
Allen D. Schmitt, D.O.  
Norman Truitt, D.O.  
M. H. Weaver, D.O.  
Calvin D. Cannon, D.D.S.

## INCOME TAX !!!

1975

H.R.-10?? OR P.A.??

The Employee Retirement Income Act of 1974 contains many important Liberalizations for you, as a self-employed professional or as an employee of a Professional Association.

For Information on the 1974 Act, without obligation, write or call

**W.D.** William H.  
Dean and Associates  
ESTATE ANALYSTS

Suite 245 - University Plaza Building

Fort Worth, Texas 76107

817-335-3214

State-wide references furnished on request!



## In Memoriam

### Inez McAnally, D.O.

Inez W. McAnally, D.O., 95, died February 11 in Kerrville and is being honored with a memorial fund in her name at the Texas College of Osteopathic Medicine.

William A. Griffith, D.O. of Fort Worth has established the memorial fund.

The mother of L. N. McAnally, D.O. of Fort Worth, Dr. McAnally was a 1906 graduate of the American School of Osteopathy, now Kirksville College of Osteopathic Medicine. She also attended Austin College in Sherman.

Born in 1880, she practiced medicine in Greenville and Mathis.

Dr. McAnally was named to Who's Who of Texas and once served as vice president of the Texas Osteopathic Medical Association.



*Dr. McAnally is pictured (left) with Dr. Andrew Taylor Still during a classroom demonstration by Dr. Still at Kirksville in 1906. We are grateful to Dr. L. N. McAnally for the loan of the sepia, matte-finish photo, which is a photographic technique not particularly adaptable to modern day reproduction methods.*

## IN SYMPATHY

### MRS. NANNIE BELL SMITH

The mother of Dr. Bobby G. Smith died February 16 in a hospital in Athens, Alabama after an illness.

At the time of her death, Mrs. Nannie Bell Smith was a resident of Huntsville, Alabama. She had lived in that vicinity since her birth in 1899. Dr. Smith was born in Capshaw, Alabama.

Two other sons and three daughters survive her.

### MRS. JOSEPH W. RHOADES

Mrs. Helen Frances Rhoades, wife of Dr. Joseph W. Rhoades, died at the family home in Fort Worth January 21 after a lengthy illness.

Services were held January 24 at the Holy Family Catholic Church.

In addition to Dr. Rhoades, she is survived by two daughters, Mrs. Sharon Wilkerson of Houston and Mrs. Marilyn Dunlap of Kansas City, and one son, Joe Rhoades of Fort Worth.

## Tennis, Anyone?



Although there has been no official Board or House action on it, TOMA has a new affiliate called the Texas Osteopathic Tennis Association.

No official meeting has been called—and may not be, but all TOMA tennis players are invited to participate in the first annual TOMA Tennis Tournament to be held in Dallas during the Annual Convention—on both Thursday and Friday afternoons.

Dr. Frank W. Thompson is in charge of the tournament and asks that all interested in participating register with him by April 7.

For further information contact Dr. Thompson at 307 Dallas West Shopping Center, Dallas 75212.

## PROFESSIONAL LIABILITY INSURANCE

*Serving the Profession Nation-Wide Since 1925*

**EXCLUSIVELY ENDORSED BY THE A.O.A. IN 1934**

Experienced claims handling protects the doctor's professional reputation; broad policy provisions backed by millions in assets protect his financial position—present and future.

**THE NETTLESHIP COMPANY**

1200 Wilshire Boulevard

Los Angeles, Calif. 90017

**Southwestern Clinic of  
Bone and Joint Diseases** | 524 BEDFORD ROAD  
BEDFORD, TEXAS 76021  
282-9363 METRO 268-1179

**T. T. McGrath, D.O., F.A.C.O.S.**

**C. Gardner, D.O.**

Practice limited to orthopedic and traumatic surgery,  
including total joint replacements



TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

512 Bailey Avenue  
Fort Worth, Texas 76107

Address Correction Requested

BULK RATE  
U. S. POSTAGE

PAID  
FORT WORTH, TEXAS  
Permit No. 1646

# INSURE IN YOUR OWN COMPANY

For your professional liability insurance  
join with other members of the  
Osteopathic Medical Profession



## PROFESSIONAL MUTUAL INSURANCE COMPANY

7 East Gregory

Kansas City, Missouri 64114

816-523-1835

Financed and Operated by  
OSTEOPATHIC PHYSICIANS

COMPETITIVE PREMIUMS

SERVICE ORIENTED

SERVING THE OSTEOPATHIC PROFESSION EXCLUSIVELY SINCE 1959