

Texas OSTEOPATHIC PHYSICIANS Journal

Volume XIII

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Number 5

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EDITORIAL PAGE

Observation leads us to wonder if the osteopathic profession, in its rush to render service to patients, is not overlooking its birthright—the principles expounded by Andrew Taylor Still . . .

"That the human body has the inherent power to resist disease".

"In a structurally and chemically normal body, disease does not exist".

"The body is a unit and must be treated as such".

"Structure governs function, and function affects structure".

A good osteopathic physician must recognize the fact that the treatment of disease, as such, is symptomatic treatment. If the basic cause is taken care of, the human body will resist disease. For an osteopathic physician to neglect the structure of the body is neglect, which in time would destroy the concept of medicine that Andrew Still gave to the world.

We should realize that all of the accomplishments of the osteopathic profession, legislative and otherwise, have been made by those who applied the principles as patterned by Still, whether the treatment be mechanical, chemical or surgical. Indifference to our fundamental concept of health means the eventual destruction of the osteopathic school of medicine, as an independent school.

The Allopathic, Homeopathic and Eclectic schools have adopted many of our principles under "physiotherapy", without knowledge of the basic concept of osteopathy. Physiotherapy, as such, is good to some extent, but it does not replace osteopathic therapy as administered by a doctor of osteopathy.

We find *"There is a law in France recently passed, whereby every doctor now awaiting to qualify must first also qualify as an osteopath". Apparently the authorities in France have recognized the principles of osteopathy, yet we doubt that they have the remotest idea of the concept of Andrew Taylor Still, which is of prime importance to the health of man.

Osteopathic physicians should apply these principles in the care of their patients. Reason from "cause" to "effect" and recognize that a healthy body is more important to civilization than the disease.

*Reference: Dr. Gachet: "Surgeon and Osteopath" By R. S. Ward, M.C.S.P. (Pg. 244, 4th paragraph)

From: Physiotherapy, Jr. of the Chartered Society of Physiotherapy. Tavistock House (S) Tavistock Square, London, W C 1, Euston 1676.
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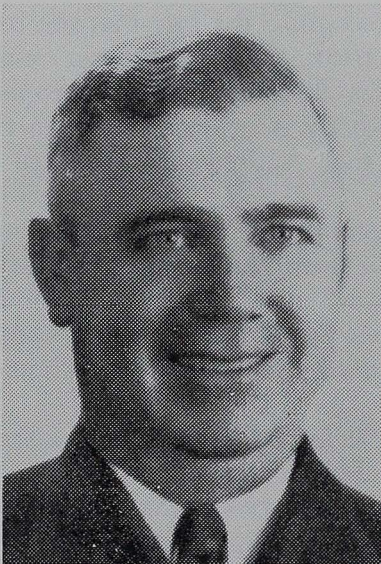
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VOL. XIII

FORT WORTH, TEXAS, SEPTEMBER, 1956

NUMBER 5

The Examination of the Most Common Injuries of the Knee



ROBERT E. MORGAN, D. O.
Dallas, Texas

In discussing knee injuries and the examination of the knee, I believe we should always keep in mind the normal knee, its action and how it is made up. It is a hinge joint with a little rotation, made up of two of the longest bones in the body—the femur and tibia—and the patella, which is the largest sesmoid in the body. Although the fibula is often injured at the same time the knee is, it is not considered a part of the knee joint.

The strength and stability of the knee joint is made possible because of the

strong ligaments binding the bones together and the powerful muscles which control its movements.

A team physician and/or trainer makes a study of all kinds of injuries, especially those which are most likely to happen, when they will happen, what position the player is most likely to be playing, and how long the player will be out with certain injuries. Injuries which do not keep a boy out of one day's practice or out of a game are not considered serious and are not kept on record. 70% to 80% of injuries to the knee occurring in sports are to football players, thereby making the knee injury the greatest hazard of the football player. One out of every six serious injuries to a player is a knee injury.

We know that sprains will be the number one knee injury. We know that the left halfback is more likely to get hurt than any other player. (Game or practice, offense or defense) Under game conditions only the fullback gets more injuries. The ball carrier gets more injuries during the regular game. The blocking back is next (on offense). The most likely persons to get hurt on defense is the boy getting blocked. The player making the tackle is second. These are just a few of the statistics which are compiled by many athletic departments and turned over to the National Athletics Training Association who compile them. By studying these

figures you know when the boy was hurt, how he was hurt, whether in game or practice, offense or defense, the position he was playing, the kind of injury it was, and how many days he will be out of practice, etc.

Knee injuries seem about equal between guards and tackles and the backs. There are more knee injuries to boys being tackled and next comes those who are being blocked.

The knee injury is the most common injury and sprains head the list. About one half of the knee injuries are sprains.

There are several definitions of a sprain. I like to think of a sprain as a partial or complete tearing or a severe stretching of one or more of the ligaments around the joint. Joint contusions are second on the list of knee injuries. According to records kept by Dr. Augustus Thorndike of Harvard Medical School over a fifteen year period the following table was evolved:

"Table 18.—Knee injuries in Harvard College Athletics from Fall 1932 to Spring, 1947.

Ligament sprains	423
Joint contusions	233
Muscle contusions	88
Lacerations and abrasions	20
Infrapatellar bursitis	18
Dislocations (Partial)	16
Superficial contusions	12
Infected abrasions or furuncles	10
Hyperextension	7
Osgood—Schlatters disease	2
Congenital anomaly	1
Miscellaneous	32

Total 864"

Of these 864 knee injuries, 423 were sprains, and are listed as follows:

"Table 19.—Ligaments involved in Knee Sprains among Harvard College Athletes from Fall 1932 to Spring 1947.

Medial collateral ligament	249
Lateral collateral ligament	66
Crucial ligament	24
Medial collateral ligament and medial meniscus	27

Medial collateral ligament and lateral meniscus	1
Tibiofibular ligament, superior	5
Patellar ligament	3
Unspecified	1

Total 423"

We have tried to outline the injuries the football player receives to the knee, what makes up the most common injury and when and how he gets the injury. Of course it helps the examining doctor if he can see exactly how the boy's knee was hurt. A team physician and/or trainer learns to follow a football game from an injury standpoint and is therefore able to see many injuries at the time they happen, thereby seeing whether it was a twist of the knee, a straight contusion or a sprain before he gets to the player. Most of the examinations of serious knee injuries are made on the field.

First you look for gross abnormalities (fractures or dislocations), next you check the motion of the joint, then check for tenderness over the tendons and muscle structure. You must make a decision as to whether a boy stays in the game or is removed. If there is any doubt whatever the boy should be removed from the game to give time for a more complete examination and never sent back until you are thoroughly convinced that it will not do any further damage. Just because a boy can walk or run a little is no sign a boy should return to the game.

If a player is injured seriously enough to be taken from the game we then begin to recheck and examine the knee. The patient is placed on the table for examination, comparing his injured knee with his good knee for obvious deformities. At this first examination if carried on at once there will be no swelling of the knee. If the injury is several days old and if there is a contusion, there will be quite a bit of swelling.

In palpating the knee you determine the motion and the range of motion,

see if there is complete flexion and extension. See how much pain or spasm there is on movement of the knee. If there is not complete extension quite often there is a displaced meniscus. You can often place the palm of the hand on the patella, compressing the patella down to the femoral articular area, crepitus will be noticed on passive extension and flexion when degenerative changes are present.

McMurray's sign is valuable in posterior tears of the meniscus. Put your fingers flat around the knee joint line and with the knee in full flexion rotate the tibia internally and externally. While the joint is being extended you will have a clicking like sensation under your fingers, this clicking sensation is from the torn meniscus being moved in and out of place.

The Drawer sign is used quite often in examining for injuries to the cruciate ligament. With the knee flexed to the right angle the tibia is pulled forward and pushed backward, increased anterior mobility denotes rupture of the anterior cruciate ligament. Increased posterior mobility indicates rupture of the posterior cruciate ligament. If both increased anterior and posterior mobility are found both ligaments have been damaged.

You may place a boy on a table bring the knees up to a right angle and you will often have a sagging contour of the tibia. You may also set a boy on the edge of the table placing your hand around the tibia just below the knee and check for these tears. The abduction test is valuable in examining for internal collateral ligament sprains. With the knee in complete extension and with your knee placed against the outside of the patient's knee and the finger of your examining hand placed over the internal collateral ligament you can localize the maximum point of tenderness. If the tenderness is not immediately over the joint line the medial meniscus is not

usually involved. If a boy is not in too much pain, we often place him on the edge of the table with the leg extending outward, placing his foot between the examiner's thighs, place the hands on each side of the knee and examine for mobility of the medial and lateral collateral ligaments. If there is an extensive tear of either of these ligaments you can feel it by the mobility. All ligaments of any injured knee should be carefully palpitated for tenderness.

Upon examination of any injured knee the first day there is very little if any fluid present. In a day or two upon examining the knee for effusion you can place one hand just above the knee pushing the hand down toward the knee putting the other hand on the patella if there is any fluid it can be felt under the patella. Or you can feel the fluid by putting the thumb on one side of the patella with the fingers on the other side pushing backward and forward.

No examination of the knee is complete without X-ray. Any knee which is injured badly enough to cause any concern should always be X-rayed. One should never take a chance with any bony structure when it is so easy to rule out fractures and bone injuries. Always X-ray the injured knee.

I should like to mention, and mention only, that you do have fractures of the knee and fractures of the patella although in my experience of thirty years of athletic work I have never had an athlete with a fractured knee. I have had three or four dislocations of the knee and two dislocations of the patella. The handling of these was strictly orthopedic.

In care of the injured knee the area should be repeatedly examined for progress or any complications which might arise. There are other conditions of the knee such as cysts of the meniscus, patella, and others which you would not expect to find in an injured knee of this type.

Postgraduate Opportunity in Cardiovascular Diseases

The new Fort Worth Osteopathic Hospital has established the facilities and the mechanism for postgraduate training for the profession.

The first venture in this direction is in the field of arterial, venous, angiospastic and cardiac problems. The program has been conducted by Doctors W. Donald Baker of Los Angeles, William T. Barrows of Oakland, Robert K. Schiefer of San Diego, and G. F. Pease of Fort Worth.

Some fifty (50) problem cases have been examined thoroughly at the first three meetings. The examinations are conducted and the findings recorded in a uniform manner devised by the Susan Baker Memorial Cardio Vascular Foundation. This uniform, standardized method of recording, as used, to date, by some thirty of our hospitals, makes possible the use of the data for statistical purposes.

These patients have had problems of venous stasis, segmental arteriosclerosis, endarteritis, and angiospastic disease. Two congenital cardiac cases have been examined. Cases have come from as far as Kansas City, Missouri; Kingman, Kansas; and Gonzales, Texas to avail themselves of this service.

Complete equipment is made available to us, for both right and left side

cardiac catheterization, through Doctor Schiefer.

The surgical clinics have so far included venous strippings, sympathectomies, arteriograms, endarterectomies, and embolectomies.

The most recent clinical session was held August 24, 25 and 26, 1956, which proved to be of great interest. About 45 doctors attended, fifteen from Texas and others from California, Kansas, Oklahoma and Missouri.

November 30 and December 1 and 2 are the dates set for the next clinical conference. Make arrangements to attend and bring problem cases of a cardiovascular nature.

The hospital is in the process of making this a regular event to be held several times a year, and it is possible that by the time of this next meeting, it will have the sanction of the specialty groups, to be recognized as postgraduate training, for which credit may be had toward certification in the specialties.

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Further Thoughts on Osteopathy

by CALVIN R. NELSON, D. O.

In recent years, the younger members of the osteopathic profession have shown a tendency to "feel their oats" when the ink on their licenses was scarcely dry. Their contributions to our professional journals reveal an undercurrent of therapeutic thinking that is not only confused but confusing. These alleged "progressives" seem to have a persecution complex about the degree they hold, apparently because it does not represent their concept of the practice of the healing art.

Articles appearing recently in osteopathic publications and written by the "persecuted progressives" assert that we are limited at the practice level by the few manipulators left in the profession. One writer recently stated that a D.O. who confines his practice to osteopathic diagnosis and structural therapy is not practicing osteopathy, but that a surgeon who does little or no osteopathic manipulation practices osteopathy in a "more inclusive and comprehensive

manner"! By some strange cerebation, a physician in one sphere is more "comprehensive" than his fellow in another, and this, mind you, is said about a field representing only 5% of total practice.

Of late, the "progressive" group has attempted to gain support for its indefensible theory by pointing with pride to the current activities of the Executive Secretary of the Texas Association of Osteopathic Physicians and Surgeons. Dr. Phil Russell is presently concerned with improving public relations on a large scale, but only after 30 years of osteopathic *manipulative* practice. He has learned the true value of the osteopathic concept of the unity of man.

The present day osteopathic graduate has enjoyed a broad and intensive professional education to qualify him as a doctor. Unfortunately he has barely scratched the surface with his therapeutic tools. Time has not permitted him to explore and observe the osteopathic concept in a manner that will give him understanding and confidence in its basic principles. Hence he is unable to apply these principles to the diagnosis and treatment of disease with the sagacity of a more mature physician.

It is far easier to treat symptoms than it is to search for causes of disease and it is frequently more remunerative. In the light of this, our "progressive" group feels it must "advance" to the level of the allopath in the eyes of the public. Why advance backwards?

This burning desire for fictitious equality with the allopathic profession is widespread in some circles. Its origin may be found in the neurasthenoid insecurity of those who are unable to utilize the principles of the osteopathic concept, and thus must rely on the narrower etiological allopathic approach to disease. Many fantastic suggestions have appeared in print attempting to dis-

The next meeting of the Texas State Board of Medical Examiners will be December 6, 7, 8, 1956 in the Hilton Hotel, Fort Worth, Texas for the purpose of giving examinations and considering applications for licenses by reciprocity.

Applications for reciprocity must be complete and on file at least 30 days prior to the December meeting.

Applications for examinations must be complete and on file at least 10 days prior to that date.

guise the osteopathic degree and eventually eliminate it. To change the degree D.O. or to amalgamate with the AMA would eliminate the osteopathic concept in a generation. The result would be catastrophic for even the allopaths who are now clamoring for training in structural diagnosis and therapy. They want to incorporate it into the great "new" specialty — physical medicine. Physical medicine existed for centuries before the etiological allopathic approach of today was even dreamed of.

For many years there has been a clamor for the introduction of "science" into the osteopathic profession. Over 20 years ago, long before Rosenberg et al, the center of motion of the human sacrum was determined by the mathematical calculations of a group of osteopathic physicians. Such a determination is a complex scientific measurement. For the past 5 years, Denslow, Korr and associates of Kirksville have scientifically

demonstrated the existence of facilitated spinal segmental reflexes. Burns of California scientifically measured the effects of certain facilitated spinal segments on heart rate more than 20 years ago. Rosenberg has simply repeated calculations using a method no more established or "accepted" than those previously used. But Rosenberg was not handicapped by an unrespected degree, and so his calculations were "respectable". (Who is Rosenberg?)

Osteopathy continues to grow steadily but slowly because too many men entering practice approach problems allopathically. This is understandable in an era of chemotherapy and antibiotics when tales of "miracle cures" fill the texts and journals. The "untoward reactions" and "side effects" from an insulted body chemistry will be catalogued in the finer print where the neophyte does not read so closely. Many older men in practice are doing likewise, because a

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structural approach requires considerably greater skill which is difficult to acquire. They know the results of structural therapy are better, but why exert yourself when a pill or a shot will mask the symptoms? "Detail man" medicine has its followers in our group too!

Only one affiliated organization stands between the current tide and extinction of the osteopathic concept—The Academy of Applied Osteopathy. This stalwart group, composed of those the "progressives" call "10 fingered men", is the last stronghold of true osteopathy.

It might serve a purpose if Academy membership were prerequisite to hospital staff membership as is local, district and state association membership. Some of the osteopathic concept might rub off here and there by accident.

In their undergraduate years, students express a moderate amount of interest in the Junior Academy activities, but what happens after graduation? Acad-

emy membership is only about 10% of the total number of D.O.s. In Texas, 9% of A.O.A. members are Academy members, while in Canada, over 70% of A.O.A. members belong to the Academy. California, Michigan and Missouri, the three states with the largest numbers of A.O.A. members, boast 6, 8, and 11% respectively. What happens to the interest of the eager student? Do present teaching methods in the clinical years dampen his ardor for the concept on which his profession is based?

The Academy believes osteopathy to be as complete a school of medicine as exists today or as may conceivably exist in the future providing it continues to develop its potentials relating to health and disease.

No osteopathic physician, regardless of his field, practices osteopathy unless he thinks in terms of structural physiology, and applies it specifically in every case where it will be beneficial. This is the stage at which the "progressives" back away. They are unable to apply an osteopathic approach to practice or an acceptable osteopathic manipulative treatment to a patient, so they contend that manipulation would be of no value.

It would be interesting to hear our internal critics evaluate osteopathic manipulation in say—the management of arthritis, and tell us how or when to apply it? What is their thinking about the relationship of postural patterns to systemic disease? The physiologists, who are acceptable PhD's, are interested.

These are pertinent factors that make osteopathic physicians DIFFERENT from ordinary allopaths and give a reason for the existence of the osteopathic school of medicine.

If every D.O. in the United States would faithfully and conscientiously treat manipulatively, just one more patient every day as indicated, our profession would soon have a greater recognition than any acceptance the American Medical Association could possibly bestow.

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OBSTETRICS



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Texas Doctor Enrolled in Graduate Course at California Osteopathic College

Dr. James E. Galliher, of Dallas, Texas, completed a course in Basic Science at the College of Osteopathic Physicians and Surgeons Graduate School, 1721 Griffin Avenue, Los Angeles, California, on August 31.

Dr. Galliher is one of twenty-three doctors from throughout the United States who enrolled in classes which began August 6.

According to Dr. Richard R. Stuart, Dean, COP&S Graduate School, the course is offered to osteopathic physicians who are working toward certification for specialization in a particular field of medicine. Special classifications offered in the Basic Science course at COP&S include General Surgery, Internal Medicine, Gynecology and Obstetrics, Urology and Pediatrics.

Dr. Galliher enrolled in Pediatrics. He was graduated from the Philadelphia College of Osteopathy in 1953.

THE TEXAS STATE BOARD
OF EXAMINERS
IN
THE BASIC SCIENCES
407 PERRY-BROOKS BUILDING
AUSTIN, TEXAS

NOTICE OF EXAMINATION:

The next examination of the Texas State Board of Examiners in the Basic Sciences has been set for October 19th and 20th, 1956.

The examinations will be given in Austin and in Houston, and details as to time and place may be obtained by writing to Mrs. Pearl A. Barrera, Chief Clerk, at the above address.

All arrangements should be completed one week before examination time, and those interested should act immediately.

Very truly yours,
Henry B. Hardt, Ph.D.
President

Accepts Post in Internal Medicine

Dr. William B. Reed of Toledo, Ohio, who recently completed a residency in the division of practice of osteopathic medicine at the Kirksville Osteopathic Hospital, has accepted the post of instructor in internal medicine on the faculty and staff, and has assumed his new duties at the Kirksville College of Osteopathy and Surgery.

Dr. Reed was graduated from the Kirksville College in 1954 and served an internship at KOH. His preosteopathic work was done at Toledo University where he was graduated with the degree of bachelor of science. He served in the U. S. Army in Europe in World War II.

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Judges Named in OAH Essay Contest

Judges have been selected for the essay contest being sponsored among osteopathic college students by Ottawa Arthritis Hospital and Diagnostic Clinic, Ottawa, Ill.

Edwin C. Andrews, D. O., director of the hospital, listed them as:

—Raymond P. Keesecker, D. O., editor of American Osteopathic Association publications, Chicago.

—Harold E. Clybourne, D. O., chairman of the department of orthopedics at Doctors hospital, Columbus, Ohio.

—Richard A. Schaub, D. O., president of the American Osteopathic Society for the Study and Control of Rheumatic Diseases, Pasadena, Calif.

Purpose of the contest is to stimulate study and investigation of arthritis among students who will be seniors next fall at the six U. S. osteopathic colleges.

Two scholarships totalling \$150 will be awarded at each college, with \$100 going to first prize winner and \$50 to second.

General title of the essays will be "Management of Arthritis and Rheumatoid Disorders from an Osteopathic Viewpoint."

Final drafts of the essays must be submitted to college deans by Dec. 31, 1956.

Appointed to Residency In Pathology

Dr. William G. Castle of Gary, Indiana, began a three-year residency in the department of pathology at the Kirksville Osteopathic Hospital and Clinic July 23.

Doctor Castle received his B.S. degree from Iowa Wesleyan College in 1949, and was graduated from the Kirksville College of Osteopathy and Surgery in 1955.

Auxiliary Announces Scholarship Winner of Medical Foundation Award for 1956-57

Dr. Robert D. McCullough, Tulsa, Oklahoma, chairman of the Medical Foundation Trust Fund, Inc., announced that the winner of the first scholarship award to be made by the Medical Foundation Trust Fund, is Mr. Ralph C. Merwin, Port Arthur, Texas.

Mr. Merwin has completed two years of study at the Kirksville College of Osteopathy and Surgery, having received a scholarship for each of the two years from the A.A.O.A. His high scholastic record and professional promise were factors in his winning. Mr. Merwin has been sponsored, and became first interested in the osteopathic profession through Dr. A. L. Garrison of Port Arthur.

Mrs. Jerry O. Carr, Fort Worth, president of the Auxiliary to the Texas Osteopathic Physicians and Surgeons, acted as ex officio member of the committee to select the award winner. The committee appointed by Mrs. Carr was composed of: Mrs. R. O. Brennan, Houston; Mrs. J. N. Stewart, Dallas; and Mrs. Robert Beyer, Fort Worth.

Dr. McCullough explained that the Medical Foundation Trust Fund Scholarship will be an annual scholarship presented to the Auxiliary to the Texas Osteopathic Association for a Texas student in an osteopathic college. The Medical Foundation Trust Fund, Inc., Dr. McCullough continued, is dedicated to the purposes of research, education and the furtherances of the best interests of the osteopathic profession.

Births

Dr. and Mrs. Tom W. Whittle, Fort Worth, Texas, are a most delighted pair with their brand new son and heir, Richard Thomas, born August 4, 1956, Weighing 6 pounds 9½ ounces.

Dr. and Mrs. Myron S. Magen, Dallas, Texas, a boy, Ned Alan, born July 23. Weight 5 lbs. 15½ oz.

Dr. and Mrs. Robert G. Haman, Irving, Texas, a girl, Rebecca Sue, born July 12, Weight 7 lbs. 14 oz.

Dr. and Mrs. James C. Williamson, Seagoville, Texas, a boy, James Collop, born July 27. Weight 7 lbs. 2 oz.

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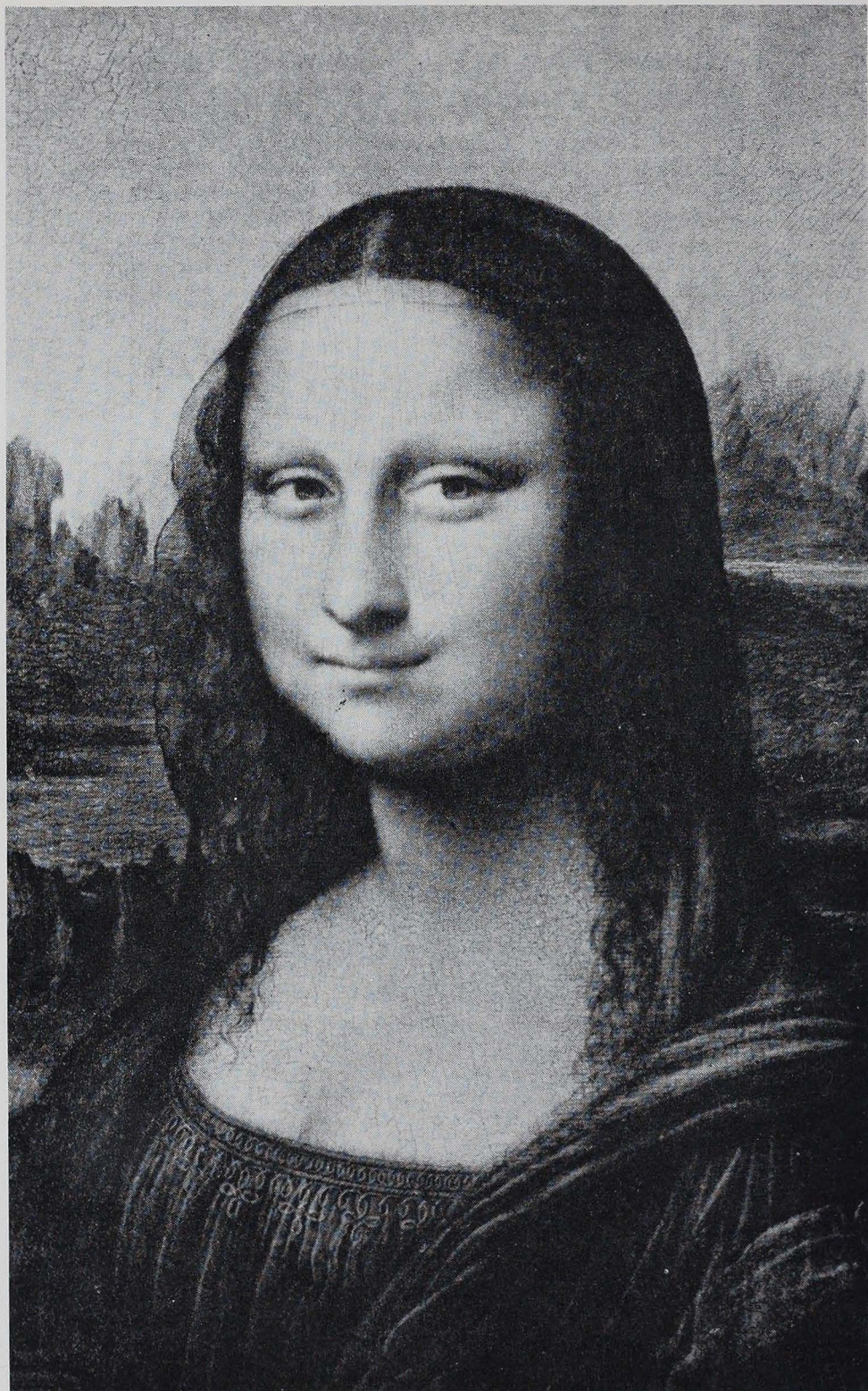
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Washington News Letter

Medical Education Aid—In approving S. 849 (Public Law 835, signed July 30, 1956), which authorizes a three-year program of Federal grants of \$30 million for each year for construction of *research* facilities for institutions of the sciences related to health, expressly including osteopathy, President Eisenhower, while characterizing the legislation as an important step forward, deplored the fact that it failed to provide assistance, as recommended by the Administration, for construction of *teaching* facilities for schools of medicine, osteopathy, public health and dentistry. In a statement issued to the press on August 6, 1956, Marion B. Folsom, Secretary of Health, Education, and welfare, said:

"The recommendation for construction grants for medical training facilities was not enacted. This vital legislation would increase the supply of badly needed research scientists and physicians. We will continue to press for legislation to include teaching as well as research facilities in the law passed this year, increase the amount of the grants, and lengthen the program."

At the direction of the Committee, the staff of the House Interstate and Foreign Commerce Committee, on August 14, 1956, sent letters to more than fifty organizations, including the American Osteopathic Association and the American Association of Osteopathic Colleges, to determine the areas of

available information to enable the Committee staff "to gather during the recess all possible information bearing on the subject of Federal aid to medical education and to report to the Committee early next Congress preliminary to further hearings on the subject." The letters submitted a topical outline with the notation "the term 'medical education' includes medicine, dentistry, osteopathy, and public health."

President's Committee on Education Beyond the High School—The four subcommittees into which the President's Committee is divided are meeting throughout the summer and will report their tentative findings to the whole Committee at a meeting on October 5, 1956, in Washington, D. C.

On August 31, 1956, five leading educators were invited by the Committee Chairman to conduct "workshops" in five regions of the country to prepare for regional conferences to be held next Spring as follows: Mr. Robert C. Anderson, Acting Director, Southern Regional Education Board, Atlanta, Georgia; Dr. B. L. Dodds, Dean, College of Education, University of Illinois, Urbana, Illinois; Dr. Harold L. Enarson, Director, Western Interstate Commission for Higher Education, Boulder, Colorado; Mrs. Charles Kerby-Miller, Dean, Radcliffe College, Cambridge, Massachusetts; and Dr. Carroll V. Newsom, Executive Vice Chancellor, New York University, New York City.

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FORT WORTH, TEXAS

Green Pastures and Fire Waters

I ain't got no pajamas
And I ain't got no shoes.
I just come on up here
With a belly full of booze.
Two good men to help me
Get up them windin stairs.
There wasn't no preacher
And there wasn't no prayers.

Oh, I got here with the Vodka blues
And the Lord turned me over to Dr.
Crews.

He said to Willis and he said to T. D.:
"You know how it is. Salvation's free
But he's goin to Hell in spite of me."
The doctors were calm and they acted
nice,

And they said, "It's true that we charge
a price,"

And the Good Lord said, "Well, boys
it's a shame

But he ain't got a nickel to his low-
down name.

I guess I better tell you in case you don't
know it,

But I made him myself and I made him
a poet.

I don't know why but people are bound
To keep a few of them fellows around,"

Dr. Willis said, "So I hear tell
They're overstocked with poets in Hell.
So I'll do my best to get him well."
He laid me down on a bed white and
clean

And give me a shot of "Thorazine."
The Devil come and the Devil was mad.
He said, "Dr. Crews I wanted him bad.
I wanted to hang him high on my hooks
And burn him up with his God Damn
Books!"

And the Doctor replied, "I'll tell you
some news

You don't take the patients from Dr.
Crews,

So go stoke your furnace and blow out
your flues!"

And the Devil left singin his low-down
blues.

Now I am better but the doctor's purse
Is mighty weak and I'm makin it worse

While the undertaker waits with an
empty hearse.

The food here is good and the service
swell.

I like it better than a big hotel.

Now, Doctor Crews, I'm gonna make
good

And pay my bills like a good boy should.

Give Verlin Witt two big hugs

And my I.O.U. for all of them drugs.

Tell Aaron, too, that he darn well knows
He can have my blood to poison crows.

Tell all them nurses that before I die
I'll buy 'em diamonds as big as a pie.

Tell Old Arno to be good now

And I'll buy him an atomic cow.

And tell them cooks that I loves them
too

Better than pie or Irish stew.

When we all start for Heaven, let's go
in advance

Ridin and singin in an ambulance.

I thank you all and I want you to know
I'll think of you wherever I go.

When I leave here down them there
stairs,

Please fetch me my hat and send me
your prayers.

House Group to Study Medical Education

CHICAGO—(AOA)—A large scale
Congressional investigation of America's
medical manpower and the capacity of
training institutions to produce doctors
in sufficient supply for country's require-
ments were recently initiated.

A letter is to be sent from House
Commerce Committee directed to med-
ical and dental deans, national profes-
sional societies, philanthropic founda-
tions supporting training of doctors and
voluntary associations active in this field.
They will be requested to supply back-
ground information on many subtopics
under general headings of student en-
rollment problems, numerical adequacy
of graduates and financing of profes-
sional training, WRMS said.

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Named to Surgery Post In Port Arthur

Dr. N. G. Palmarozzi of the department of general surgery of the Kirksville Osteopathic Hospital and Clinic has announced his resignation to accept the post of surgeon-in-chief at Doctor's Hospital in Port Arthur, Texas.

The resignation will become effective September 15. Doctor Palmarozzi said that for some time he had had the new post under consideration and that because of obligations to the hospital here and plans of the hospital in Port Arthur, it was necessary for him to make the announcement now. He added that in accepting the new post he would be leaving with the highest regard for Kirksville and his alma mater.

Doctor Palmarozzi was graduated from the Kirksville College of Osteopathy and Surgery in 1947. He served an internship at Art Centre Osteopathic Hospital in Detroit, Michigan and practiced in the state of West Virginia before returning to KOH for a residency in general surgery from 1949 to 1952. Upon completion of the residency, he accepted a post in the department.

Doctor Palmarozzi's home was in the Bronx, New York, and he completed his pre-osteopathic work at Mount St. Mary's College in Emmetsburg, Maryland.

He married Marguerite Gertrude (Judy) Ransom, daughter of Mr. and Mrs. Matthew G. Ransom of Kirksville. They have four children, John Matthew, Nicholas Gerald, Jr., Connie Jane and Susan Ellen.

Miss Fitzgerald Joins P&PS Staff as Assistant to the Director

CHICAGO — (AOA) — Kathleen FitzGerald, a native of Chicago, recently joined the Central Office Staff of the American Osteopathic Association as Assistant to the Director of Public and Professional Service, Dr. D. D. Darland.

Miss FitzGerald received her B.A. degree in political science and history from De Paul University in Chicago. Her previous experience includes tours of duty with the U. S. Department of State and the Economic Cooperation Administration, Foreign Service Division, throughout Western Europe. She has recently returned to Chicago from a world tour with particular emphasis on the Far East.

Miss FitzGerald's duties with the Division of P&PS will be on special assignments from the Director on public relations projects, handling convention coverage and other promotional material, and working with women's and teacher's organizations.

A more comprehensive article on Miss FitzGerald will appear in a forthcoming issue of *Forum*.

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DALLAS 4, TEXAS

Accepts KCOS Position In Surgery

Dr. Addison Hombs of Troy, Missouri has accepted appointment to the post of head of the department of general surgery at the Kirksville College of Osteopathy and Surgery. President Morris Thompson has announced.

Doctor Hombs, whose home was in St. Louis, was graduated from the osteopathic college here in 1942. He engaged in general practice in Ethel, Missouri, in 1942-43, and during the years 1943 through 1945, he served in the medical department of the United States Maritime Service. Following military service, he served a preceptorship in general surgery with Dr. Emmett Binkert of Carson City, Michigan.

In 1950, Doctor Hombs began surgical practice in Lansing, Michigan. He served as chief of staff of McLaughlin Osteopathic in 1951-52, and was chairman of the department of surgery there from 1952 through 1954. From 1954 to the present, he has been chairman of the department of surgery of the osteopathic staff of Lincoln County Memorial Hospital

at Troy, Missouri. Also during this time, he has served as a member of the consulting staff of Audrain and Calloway county hospitals.

Doctor Hombs is a member of the American College of Osteopathic Surgeons and is certified in general surgery by the American Osteopathic Board of Surgery.

He is a member of the board of trustees of the Lincoln County Youth Camps, chairman of the district health and safety committee of the St. Louis area of the Boy Scouts of America, and water safety chairman of the Lincoln county chapter of the American Red Cross.

He is a Scottish Rite Mason, a Rotarian, life member of the National Rifle Association, a member of Sigma Sigma Chi, Alpha Phi Omega and the Presbyterian Church.

Doctor Hombs is married to Barbara Maxwell Hombs, daughter of Mr. and Mrs. C. E. Maxwell, formerly of Kirksville and now of Kansas City. They have two children, Tom, 14, and Heidi, 11.

Dr. Hombs assumed his new position at the Kirksville Osteopathic Hospital and Clinic on September 1.

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How Perfect Is Man?

Science and scientists have oft-times given man as the most perfect of machines, but are they right? Not according to Mark Twain, who better describes them as follows:

"Man can't sleep out of doors without freezing to death or getting rheumatism; he can't keep his nose under water for over a minute without being drowned. He is the poorest, clumsiest of all the creatures that inhabit the earth.

He has to be coddled, swathed and bandaged to be able to live at all. He is a rickety sort of thing any way you take him—a regular museum of inferiorities.

He is always undergoing repairs. A machine as unreliable as he is would have no market.

The lower animals appear to us to get their teeth without pain or inconvenience; a man's come through after months of cruel torture, at a time when he is least able to bear it. As soon as he gets them they must be pulled out again.

The second set will last for a while, but he will never get a set that he can depend on until the dentist makes one.

Man starts in as a child, and lives on disease to the end, as a regular diet.

He has mumps, scarlet fever, whooping cough, tonsilitis, and diphtheria, as a matter of course.

Afterwards, as he goes along, his life continues to be threatened at every turn by colds, coughs, asthma, bronchitis, quinsy, consumption, yellow fever, blindness, influenza, carbuncles, pneumonia, softening of the brain and a thousand other maladies of one sort or another.

He is just a basketful of pestilent corruption provided for the support and entertainment of microbes. Look

at the workmanship of him in some particulars.

What's the appendix for? It has no value. Its sole purpose is to lie in wait for a stray seed and breed trouble.

What is his beard for? It is just a nuisance. All nations persecute it with a razor. Nature, however always keeps him supplied with it, instead of putting it on his head.

A man wants to keep his hair. It is a graceful ornament, a comfort, the best protection against the weather, and he prizes it above emeralds and rubies, and half the time nature puts it on so it won't stay.

Man isn't even handsome, and as for style, look at the Bengal tiger—that ideal of grace, physical perfection and majesty.

Think of the lion, the leopard, then think of man, that poor thing.

The animal of the wig, the ear trumpet, the glass eye, the porcelain teeth, the wooden leg, the silver windpipe, a creature that is mended all from top to bottom."

—Buckeye Osteopathic Physician

CCO Awarded Mental Health Grant of \$15,000; Two Others Renewed

CHICAGO—(AOA)—A U. S. Public Health Service grant of \$15,000 for mental health training was recently awarded to the Chicago College of Osteopathy, Dr. Richard N. MacBain, president recently announced.

The grant becomes effective immediately and will enable the Southside institution to proceed with expansion of its mental health clinics and child guidance programs.

The U.S.P.H.S. also notified CCO that its long standing teaching grants of \$25,000 each for cancer and cardiovascular diseases were renewed.

Nine KCOS Students Awarded Scholarships

Nine students at the Kirksville College of Osteopathy and Surgery were awarded scholarships prior to the close of school in the spring. Heber H. Cleveland, senior from Portland, Maine, was awarded a scholarship provided by Dr. J. Francis Brown of Amarillo, Texas, a 1929 graduate of the KCOS. It is awarded on the basis of evaluation of the student in all areas of accomplishment and professional promise. Royce Eugene Skaggs of Eakly, Oklahoma, sophomore, is the recipient of the H. C. Montague Memorial Scholarship Award, presented by the Eastern District of the Oklahoma Osteopathic Association to an Oklahoma resident attending one of the osteopathic colleges who is completing his freshman year, and is made for the three remaining years. Motivation, personality and professional promise are considered, as well as grade point average. Fred B. Thomas of Mosul, Iraq, a June graduate, was selected as a College Rotary Fellow by the 196th Rotary District. He is among a group of 22 Missouri students who were selected by a committee on the basis of scholarship, ability, character and need.

Winners of the Walter and Carrie B. Stewart Scholarships included Michael E. Sahlaney, Houtzdale, Pa., and Kenneth E. Murray, Montford, Wisc., juniors; William L. Walker, LaPlata, Mo., and Stephen J. Pugh, Everett, Wash., seniors; and Eugene B. Purmell, Hopewell, N. J. and Lewis M. Brickler, Danielsville, Pa., June graduates. The six received \$350 each, the equivalent of one semester's tuition, which is provided by a fund set up by Drs. Walter and Carrie B. Stewart, who were graduated from the American School of Osteopathy in 1906 and 1905 respectively. These awards are given to members of the three upper classes by vote of the fac-

ulty and are based on high scholastic standing, moral character, student activities and professional promise.

Bumper Crop of Health Bills Signed Into Law

CHICAGO—(AOA)—“In the past month President Eisenhower signed national health bills which, from standpoint of numbers and dollars authorization, constitute a Congressional achievement unique in the history of this Republic.” This fact was reported in the August 6th issue of the *Washington Report on the Medical Sciences*.

The Chief Executive expressed regret that his proposals for Federal reinsurance of prepaid insurance health plans and government subsidies to stimulate medical school construction were not enacted and sent to him for approval. The most recent major bill signed by Eisenhower was S.3430 which authorizes establishment of National Library of Medicine. Earlier he approved:

S.J.Res.183, authorizing funds required to hold the Eleventh World Health Assembly in U. S. in 1958.

S.849, inaugurating a \$90 million, 3-year program of Federal financial aid for expansion and improvement of medical research laboratories in public and private nonprofit institutions.

HR 7290, permitting Reserve nurses and women medical specialists to be members of Army and Air National Guard units.

HR 7225, amending Social Security Act to extend coverage to dentists, doctors of osteopathy, lawyers and other self-employed professionals previously excluded, except MD's; provide disability insurance benefits at age 50 and lower to 62 the retirement age for women.

S.3958, introducing traineeships, placing new emphasis upon mental health projects and demonstrations and giving 2-year extension for Hill-Burton hospital expansion, for which \$150 million annually in Federal funds is authorized.

Insurance Law Journal Article Discusses Osteopathy

CHICAGO—(AOA)—The August 1956 issue of the *Insurance Law Journal* published an article prepared by Milton McKay, AOA General Counsel, entitled "Doctors of Osteopathy and Osteopathic Hospitals." This article reviews in detail the education, training and practice of doctors of Osteopathy and their legal status as physicians under state law.

It points out the broad scope of services furnished by hospitals staffed by doctors of osteopathy and recommends that insurance companies adopt in their insurance policies a uniform definition of the terms "physician" and "hospital" to include respectively doctors of osteopathy and osteopathic hospitals.

It further recommends that insurance companies recognize doctors of osteopathy and osteopathic hospitals in all states and submits that only such a solution will solve the problems now encountered by insurance companies in attempting to distinguish between unlimited and limited practice rights states.

Copies of this article will be available shortly from the General Counsel's office in limited quantities to doctors or hospitals encountering problems with insurance companies. It will also be reprinted in its entirety in a forthcoming issue of *Forum*.

Dr. Koogler Resigning From KCOS to Reenter Private Practice

Dr. Paul R. Koogler, chief surgeon in general surgery at the Kirksville Osteopathic Hospital and Clinic, has announced his resignation from the faculty and staff of the Kirksville College of Osteopathy and Surgery. Dr. Koogler tendered his resignation at the meeting of the Board of Trustees of the College held May 31 and June 1. It is to become effective as soon as college officials find it possible.

In making the announcement, Dr. Koogler said that increasingly for the past several months he has considered reentering private practice, which he gave up in 1946 to accept the post with the KCOS. He said that he and his family had enjoyed their years in Kirksville, and he had appreciated the opportunity to serve the oldest of the osteopathic colleges, and in leaving he had only the best wishes for the community and the future of his alma mater. Dr. Koogler has made no definite plans for the immediate future, other than returning to general practice, and the locality of such a practice is not known at this time.

October Health Features Hard-Hitting Articles

CHICAGO—(AOA)—The October issue of *HEALTH* will feature articles on subjects ranging from "peace pill" to suicide, each written by an expert within his field.

Ralph I. McRae, D.O., Dallas, takes "A Second Look at the Tranquilizing Drugs," pointing out the dangers involved in indiscriminate use of the "peace pills" that are selling at the rate of \$100,000 a year. Dr. McRae is the immediate past president of the American College of Neuropsychiatrists.

George W. Northup, D.O., Livingston, N. J., analyzes the amazing past, the present status, and future needs of the Food and Drug Administration in "The FDA—50 Years of Protecting You."

Robert P. Chapman, Davenport, Ia., executive secretary of the American Osteopathic Hospital Association, tours Detroit's Art Center Hospital with its superintendent, Earl J. Lewis, as he points out the requirements and responsibilities of the hospital administrator.

Cecil Harris, D.O., Philadelphia, looks into "The Riddle of Suicide," which he views as a public health problem since self-slaughter accounts for more deaths annually than does polio.

New York Times Hits Shortage of Doctors

CHICAGO—(AOA) — Adequate medical care in the Armed Forces is fast becoming one of the most serious problems faced by the Pentagon.

The gravity of the situation, according to THE NEW YORK TIMES, has become even more obvious with the large resignation rates of regular armed forces medical officers and the failure of Department of Defense and Congress to take any corrective action.

The byline story by Hanson W. Baldwin pointed out that service morale has been affected adversely by the shortage of well-trained doctors and the marked reduction in medical care given to service dependents.

In the Navy alone, 1,000 medical officers were lost because of the reduced ratio of doctors to troop strength in the years 1953 and 1954.

As a result, doctors have had to be eliminated on small ships and have been replaced by hospital corpsmen, who are without medical degrees. The cuts may force further eliminations of doctors from destroyers and amphibious craft.

Since July 1, 1953, out of a total Regular Army medical officer strength of 1,727, a total of 443 have resigned and fifty-nine have retired, while there were only 157 new appointments.

A letter from a physician with a long and personal experience with the armed forces was published by the Times to further illustrate the newspaper's viewpoint.

In part it read . . . "The fundamental responsibility of the medical departments seem to have become obscured by less important things, including money, tidiness of tables of organization, what the American Medical Association will think and do, individual prejudices, aspirations of the individual departments, political expediency . . ."

September, 1956

Claude B. Root Named Physician of Year

Dr. Claude B. Root, 76, who has tried to retire on several occasions, but each time the community wouldn't let him, was accorded this honor in a special ceremony by the American College of General Practitioners in Osteopathic Medicine and Surgery.

Abstracts

LOUIS GUSTAVE MANCUSO D. O.

"The significance of paper electrophoresis of serum lipids in the investigation of liver diseases" (Die Bedeutung des papierelektrophoretischen lipidogrammes für die Beurteilung von Leberkrankheiten, Franken und Klein. Deutsche Medizinische Wochenschrift.

In Stuttgart Germany at Bad Cannstatt Hospital paper electrophoresis of the serum protein pattern in 30 cases were studied. The filter paper strips were divided and stained selectively to show the position and proportion of the protein fractions and of the lipoproteins respectively. The results were rather remarkable and enlightening in so far as all types of liver disease that was studied in the thirty cases except the chronic hepatitis revealed that the lipoprotein fraction in the position of the alpha 1 globulin was either absent or decreased. In the patients with chronic hepatitis the alpha -1 fraction was increased to a slight degree. It was concluded by the authors that this particular examination is of no aid in the differential diagnosis of obstructive jaundice, hepatic carcinoma, cirrhosis or acute hepatitis but that it was of some aid in the diagnosis of chronic hepatitis. Possibly further investigation along this line with the establishment of various patterns might prove to be beneficial.

AUXILIARY NEWS

Auxiliary District One

Sunday afternoon, August 12, the Auxiliary to district one Association of Osteopathic Physicians and Surgeons held its quarterly meeting in Room 203, Herring Hotel, after dinner with the doctors in the XIT Room.

Mrs. Glenn R. Robinson, of Happy, president, presided. The matter of programs was discussed, after which the president appointed Mrs. E. W. Cain program chairman. A study of Osteopathy is to be stressed at each meeting. Mrs. Raymond Mann was appointed as chairman of the Finance Committee, and Mrs. Harold Gorrie, chairman of the Courtesy Committee. The matter of next year's Osteopathic Child Health Clinic was discussed, and following a discussion by the doctors, the committee was chosen: Dr. and Mrs. Robert Clayton, and Dr. and Mrs. Donald L. Eakin, of Amarillo; and Dr. and Mrs. John L. Witt and Dr. and Mrs. Calvin I. Vardaman, of Groom.

Dr. Witt, President of Texas Association of Osteopathic Physicians and Surgeons, made his first official visit as President, and talked to the Auxiliary of present problems and accomplishments of the Osteopathic profession. He paid tribute to the leadership of Dr. Phil Russell, in speaking of the beautiful new home office building in Fort Worth. The possibility of legislation ahead and the part the Auxiliary can play; the recognition the Osteopathic profession is gaining on the state and national levels, and his request that each doctor and Auxiliary member take an interested and active part in District and State organizations were subjects of discussion, all well and interestingly done.

Present were Mesdames L. V. Cradit, E. H. Mann, Glenn R. Scott, Harold M.

Gorrie, D. L. Eakin, E. W. Cain, Raymond E. Mann, Robert Clayton and J. H. Chandler, of Amarillo; John V. London, Calvin Vardaman and John L. Witt, of Groom; Alfred H. Redwine of Darrouzett, and Glenn Robinson, of Happy. Miss Michele Gorrie of Amarillo was a guest.

Dr. and Mrs. L. J. Viçk invited the Auxiliary and the Doctors to a showing of pictures taken on their recent European trip, in their back yard on Wednesday evening, August 15. The next regular Auxiliary meeting will be held the second Sunday in November.

FLORA CHANDLER, *Reporter*

Auxiliary District Five

The Dallas Osteopathic Hospital Guild had a tea in honor of the 1956-57 intern's wives, Wednesday, July 11, at the home of Mrs. Harvey D. Swords. The committee, consisting of Mrs. Swords, Mrs. Robert N. Collop and Mrs. Robert Moore, planned a lovely party in a pink and blue theme.

Since our last report we have added several new members to our family:

Dr. and Mrs. Myron S. Magen, a boy, Ned Alan, born July 23. Weight 5 lbs. 15½ oz.

Dr. and Mrs. Robert G. Haman, a girl, Rebecca Sue, born July 12. Weight 7 lbs. 14 oz.

Dr. and Mrs. James Williamson, a boy, James Collop, born July 27. Weight 7 lbs. 2 oz.

Among vacation seekers were Dr. and Mrs. Robert Moore who recently returned from Corpus Christi.

MRS. ARTHUR KRATZ
Publicity Chairman

NEWS OF THE DISTRICTS

DISTRICT ONE

Dr. and Mrs. Jack Cain, daughter, Patsy, and Mrs. Cain's mother spent their vacation in California. Report a good trip.

Dr. and Mrs. John Chandler recently had as their guest their granddaughter from Roswell, New Mexico.

Our sympathy is extended to Dr. Jim Longhagen in the death of his mother in Nebraska.

Joe Bob Brown, son of Dr. and Mrs. J. Francis Brown has entered his second year at Westminster's College in Fulton, Missouri.

Jackie Cain has returned to Oklahoma University. He is the son of Dr. and Mrs. E. W. Cain.

George Bob Vick spent his vacation with his folks, Dr. and Mrs. Lester J. Vick.

Drs. Earle H. Mann and Glenn R. Scott plan to attend the A. E. O. S. convention in Detroit.

Dr. Dwight Cox is back in his office at Hedley after being in a car accident.

Dr. and Mrs. Gordon Stewart of Clarendon report a fine vacation.

Dr. Paul Price, Jr., of Dumas reports fishing good at Lake City, Colorado.

Dr. John L. Witt of Groom, president of the T.A.O.P.S., is busy visiting the districts.

We are surely happy to have had the following doctors to locate in our community the last year. Drs. Maurice D. Mann, Donald L. Eakin, Robert Clayton, Raymond E. Mann, Raymond E. Beck.

Still have lots of good locations in the Panhandle.

FRANCIS BROWN, D.O.
Secretary-Treasurer

DISTRICT TWO

Vacations are over so most of our time is being spent—"OH" and "AWE-ING" at and with our New Hospital. Just think of being able to get patients in the hospital—when calling for a bed. Everyone has been co-operating splendidly, of course the few deserve the credit for everything that has been done, due to not allowing anyone else to help.

When everything and everyone gets settled down to normal, we're still going to have the best group and the best hospital in Texas. Let's cooperate.

A cardio-vascular clinic in our new hospital was termed a great success and we hope to have regular sessions but more about that later.

A new member of our district is Dr. Melvin E. Johnson, having interned and served a three year residency in Internal Medicine at Kansas City College. He will be associated with the Camp Bowie Osteopathic Clinic as their internal medicine partner. Good luck and welcome, Dr. Johnson.

DISTRICT THREE

This month we sent 38 requests for news and have had 8 replies. Similar to the usual surveys for information, though. Not at all unusual.

Dr. H. G. Grainger reports that the beginning of the school term brings him added responsibilities, since he has two children, Jill, a freshman, and Dick, a senior, in the University of Texas. Furthermore, Dick has been selected to be escort to the Queen during the forthcoming Rose Festival in Tyler.

Dr. and Mrs. J. W. McCorkle announce the arrival of a son, Warren

Scot, on August 15. This is their second child.

Dr. and Mrs. B. W. Jones have had visitors recently from Jackson, Minnesota.

Mr. and Mrs. Forrest Tow spent a week of their vacation at Mineola. Mrs. Tow is Dr. Jones' sister. The Mineola General Hospital has undergone a slight remodeling job, resulting in a new business office. More efficiency and better collections, Dr. Jones reports.

Jerry Smith, son of Dr. and Mrs. Wayne Smith, has returned to Kirksville to begin his second year at K.C.O.S. Dr. Smith reports everything quiet at present in Jacksonville, but he and Pearl are preparing for a large turnout at the meeting of district 3 there September 30.

Dr. and Mrs. H. R. Coats recently made a tour of a week's duration in Louisiana collecting antique clocks.

Dr. C. H. Bragg of Big Sandy has returned from New Orleans, where he spent several weeks at Oschner Clinic and Foundation Hospital studying Bronchoscopy and observing surgery. He reports a full house at the Big Sandy Hospital, and says he needs more beds—has 25 at present.

Drs. Sue and Mike Fisher have just moved into a new and bigger house in Ore City, where Dr. Sue has her office. This will cut down on her working hours (she thinks). They have also just returned from Abilene where they visited relatives.

Dr. and Mrs. Hamilton attended the National Encampment of the V.F.W. in Dallas the week of August 12.

Dr. List reports that he delivered two sets of twins during the past six weeks. He has been elected president of the Rotary Club of Troup, and recently entertained the Rahms for an evening of Model T talk and just plain gossiping.

Dr. John Kennedy made a hole-in-one at the Greggton golf course.

Dr. Palmore Currey spent August 19,

20, and 21 in Austin where he participated in giving the State Board Examinations to applicants for Vocational Nurse license. He reports that 352 applicants took the examinations. He and Mrs. Currey returned home via San Antonio and Monterrey, Mexico.

Plans have almost been completed for the September 30 meeting of district 3 in Jacksonville, and it looks as though it will be an outstanding one. Make your plans early to attend this meeting.

DISTRICT FIVE

Dr. Jim Martin, swimming as anchor man on a four man relay swimming team in a Garland swimming competition Friday, August 17, was responsible for his team's winning the race. His opponent was already half the length of the pool when Jim's turn came and he out distanced him in a very dramatic burst of speed. Local comments "Gee, look at that Doc go." What local residents didn't know was that Dr. Jim at one time held the New York City amateur swimming championship, and also swam on the U. of Texas swimming team. He has also been asked to swim in the Labor Day races.

DISTRICT SEVEN

Dr. Joseph Love and his family returned from their trip to Europe the end of August. He is back hard at work again this week.

Dr. John Latini and his family are on a vacation in Florida. Dr. Latini passed the Florida examinations this summer and he is thinking of practicing in Florida.

KATHERINE G. PATERSON, D.O.

DISTRICT ELEVEN

District Eleven is happy to have Dr. William Hall back and doing well

following his recent surgery at the Stevens Park Hospital in Dallas.

Dr. Edwin Peters, Mr. Fred O'Neal and Mr. Shirley of the Medical Foundation Investment Corporation presented information concerning the corporation to all members present. The meeting was held in the Fiesta Room of the Del Camino Restaurant on Wednesday, August 1 and was very informative.

Dr. M. A. Calabrese and family journeyed to Erie, Pa., on their vacation in mid-July.

Dr. L. H. Lyon, Jr. and family went to Long Beach on vacation the first two weeks in August and returned via Las Vegas and the Grand Canyon.

Dr. R. Noren spent her vacation at Boquilla Lake in Chihuahua, Mexico, where she says the fishing is tops.

LEROY H. LYON, JR., D.O.
Secretary District Eleven

KCOS Receives Mental Health Training Grant

A federal grant of \$15,000 for the extension of Mental Health Training has been awarded the College. The award was announced in a communication to Dr. Fleda M. Brigham, chairman of the department of neuropsychiatry, who will be the coordinator of the training program, from Dr. Seymour D. Vestermark, chief of the Training and Standards Branch of the National Institute of Mental Health of the United States Public Health Service. The grant became effective July 1.

The Mental Health Grant will enable the college under the direction of Dr. Brigham to develop plans for the extension of the program of mental health training into freshman orientation, further integration of the teaching of psychiatric problems with other clinical subjects, expansion of Mental Health Clinics and further development of the child guidance program.

September, 1956

Begins Residency in EENT

Dr. Frank R. Livingstone of St. Louis assumed his new duties July 1 at the Kirksville Osteopathic Hospital and Clinic where he is a resident in the department of eye, ear, nose and throat.

Dr. Livingstone was graduated from the Kirksville College of Osteopathy and Surgery in 1951 and served an internship at Normandy Osteopathic Hospital in St. Louis. After engaging in practice in St. Louis County for a year, he joined the Northside Osteopathic Clinic in Jennings. Following special work with Dr. C. L. Atteberry, chairman of the department of EENT at KOH and work with Dr. J. C. Baker in that department at Fort Worth, Texas Osteopathic Hospital, he served on the staff of the EENT department at Normandy Osteopathic Hospital.

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easily removed. Insert tip, squeeze tube to expel fluid which is retained and container is discarded.

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