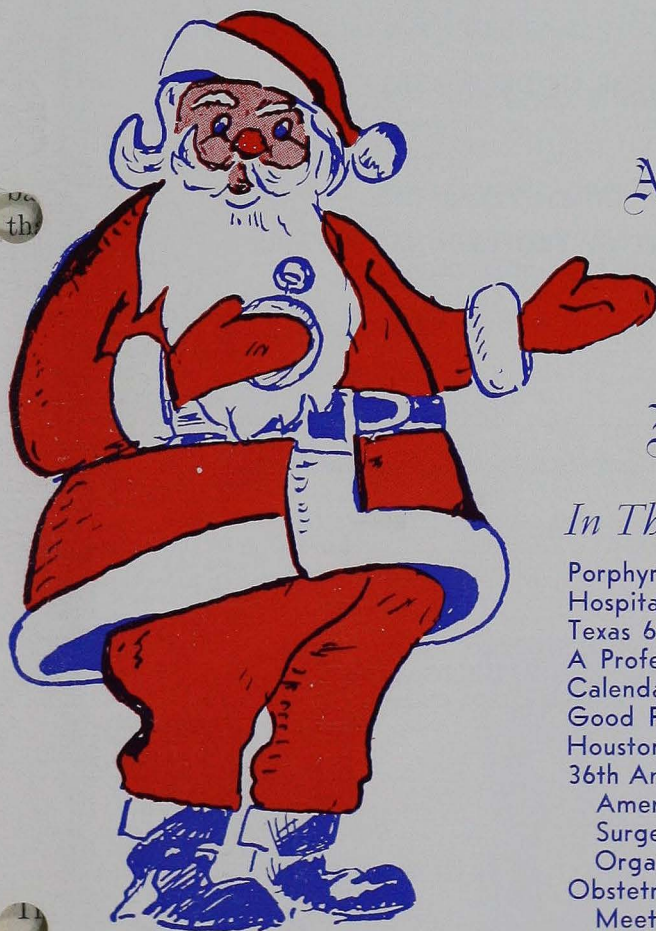


Texas **OSTEOPATHIC PHYSICIANS** *Journal*

VOLUME XX

FORT WORTH, TEXAS, DECEMBER, 1963

Number 8



Wishing You
A Merry Christmas
and
Happy New Year

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Texas Osteopathic Physicians' Journal

OFFICIAL PUBLICATION OF THE
TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS

PUBLICATION OFFICE: 512 BAILEY AVE., FORT WORTH, TEXAS 76107

EDITOR . . . PHIL R. RUSSELL, D. O.

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VOLUME XX

FORT WORTH, TEXAS, DECEMBER, 1963

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Greetings at Holiday Time 1963



TO OUR FRIENDS:

Bright as sparkling sunlight, the Holiday Spirit lights new friendships and rekindles old ones year after year. At this season we pause to remember our friends . . . and to tell them that we are thinking of them. May your Holiday Season be happy—with 1964 full of good health and happiness in everything you do!

THE STAFF OF T.A.O.P. & S.



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Porphyria Hepatica Cutanea Tarda

by GERALD A. SWAYZE, D.O., Mesquite, Texas

Porphyria is an inherited metabolic disease of the porphyrins which is not completely understood. Recent discoveries and studies have thrown some new light on the malady however and this will be reviewed in the summary of this paper.

There are several classifications of Porphyria. In this paper, we shall use the one submitted by Cecil and Loeb in Textbook of Medicine. There are two general groups, (1) the erythropoietic group, and (2) the hepatic group. The hepatic group includes four types: (a) the cutanea tarda type, (b) the intermittent acute form, (c) the combined or mixed type, and (d) latent porphyria.

In this paper we shall be concerned only with the cutanea tarda type and the differential diagnosis thereof.

The incidence of the cutanea tarda type is relatively rare as compared to the other types of porphyria and it is more common in males in the ratio of about 3 to 1. It almost never occurs before puberty and its greatest incidence occurs between the third and fifth decades of life.

In consideration of the etiology of porphyria it has long been considered a congenital defect in porphyrin metabolism and only recently has it been established that it can be induced at any age by the ingestion of certain toxic agents. This will be discussed in the summary of this paper. It is known that the use of barbiturates by the susceptible individual can induce an active case of the disease. Alcoholism may also be a predisposing factor in the etiology of this disease. In porphyria unusually high levels of porphyrin are excreted in the urine and feces. Excessive excretion of these metabolites can also be seen in such states as lead and other heavy metal poisoning, hepatic disease, pernicious

anemia, hemolytic and hypoplastic anemia, leukemia and Hodgkin's disease.

In consideration of the pathological physiology of porphyria hepatica cutanea tarda, it is not clearly understood. Porphyrins of several type are precursors of hemoglobin. At least they combine with each other and iron to form heme which combines with a protein molecule (globin) to form hemoglobin. The defect in this failure to form heme is very involved and to partially understand it would require a lengthy discussion so we shall be satisfied with the above brief outline.

The symptoms and physical findings of porphyria hepatica cutanea tarda are diverse. Photosensitivity is a common feature of this disease. Indeed the person with this malady actually avoids sunshine as much as possible since it causes a burning sensation over the entire exposed area of the body, especially the scalp. Trauma also plays an important role in this disease. It is an established fact that trauma to the scalp in an individual with latent porphyria may result in a clinical case of an acute nature with many or all of the symptoms becoming manifest. Bullous vesicles appear in the area of trauma and later in other areas of the skin, principally those areas exposed to the sun and other minor physical traumas, such as hands, arms and legs. Bullae may appear on any part of the body. There may or may not be pruritus associated with the skin lesions. The bullae break or are ruptured by the patient and then erosion of the scalp or skin and pitting and scarring take place. An individual may lose all of the hair on his head and have an ugly pitted eroded infected scalp in its place. Hyperpigmentation of the skin as seen in "Bronze diabetes" and Addison's disease is usually another feature of the

ailment. This is also seen more easily in the areas of the skin which are exposed more to sunlight. Vague or severe abdominal pain usually across the epigostic and or the periumbilical areas may be a prominent feature of this disease. Many patients with undiagnosed porphyria have undergone exploratory abdominal surgery due to the severity of this pain. One case on record reveals the patient to have had 13 laparotomies before porphyria was recognized. Porphyria patients also may develop neurological or psychological symptoms. As a matter of established record, patients have been known to suffer an acute attack of porphyria following an emotional crisis or to have a relapse as a result of psychic trauma. Associated with the disease there may be bulbar symptoms, psychic and autonomic disturbances as well as peripheral neuropathy. There may be muscle weakness and pain or the patient may develop paralysis. There may be dysphagia, hoarseness, regurgitation, or even respiratory paralysis to mention only a few of the variations. Hysteria is common and the patient may even end up in a mental institution classified as a manic-depressive or schizophrenic.

Pregnancy has been known to cause a fatal exacerbation of the disease especially at or following parturition. One woman died as the result of taking ergot to produce an abortion. The ergot instead produced a severe exacerbation of the porphyria.

Another interesting finding in this disease is the common discovery of hepatic and splenic enlargement. Why this occurs is also unknown. It is also of interest to note that the urine of patients with an active case of the disease turns to the color of red wine on exposure to sunlight for about a half an hour.

In the laboratory findings of patients with an active case of porphyria there are several note worthy facts. The urinary coproporphyrins and uroporphyrins are elevated as high as 4000 micrograms percent during an exacerbation and be

essentially normal in a remission. The fecal porphyrins may be low on exacerbation and elevated in a state of remission making the entire laboratory study of porphyrin excretion very confusing. Porphobilinogen is usually absent in cases of the cutanea tarda type except when nervous or abdominal complaints are present, and then it may be present in very large amounts.

Determination of porphyrin levels in the urine and feces is called the Watson-Schuartz test. Liver and bone marrow biopsy are also of value when used with the fluorescence microscopy and ultraviolet light. Freshly voided urine appears normal but if allowed to stand in air and light for several days it will turn part wine color. When viewed with the spectrometer it is clear that most porphyrin are excreted as a pink complex.

The differential diagnosis is made between three of the most likely diseases to cause similar symptoms. These are Addison's disease, post hepatic cirrhosis and hemochromatosis or bronze diabetes. This can be done by running serum electrolyte studies. The Watson Schuartz test and liver function tests. In Addison's disease the serum chloride will be decreased whereas in porphyria they tend to be essentially normal. In hemochromatosis the porphyrin studies will prove negative. And the serum iron and iron binding capacity tests will make the diagnosis certain. Liver biopsy is even more helpful but is quite hazardous in cases of hemochromatosis. The clinical picture is also different. The differential diagnosis between porphyria and post hepatic cirrhosis is a bit more difficult since the porphyrin excretion in both disease may be high although in porphyria one would expect it to be higher. Liver function tests would be the main help in differentiation since when one sees a high alkaline phosphatase and a relatively low serum transaminase one thinks immediately of biliary tract disease.

The treatment of the disease is largely symptomatic. The skin lesions should

be protected from infection. The individual should avoid sunlight as much as possible and wear protective clothing whenever exposure is necessary. The patient should be warned to abstain from the use of alcoholic beverages and the use of barbituates is contraindicated. Several spontaneous remissions are on record following the use of chlorpromazine (thorazine). This is thought to be due to the fact that the anxiety and nervous tension associated with the disease often contributes toward maintaining the patient in an acute phase. Thorazine is thought to be affective in breaking this cycle allowing the patient to go into remission since the disease is generally chronic and characterized by remission and exacerbations. The patient should also be placed on a high protein diet supplemented by vitamins.

It is difficult to say what the prognosis of the cutanea tarda type of porphyria is. It is generally a chronic disease but it

does tend to shorten the life span. Liver failure is generally the cause of death although other complications may intervene to produce the patient's demise.

Presentation of a Case

The patient, a 49 year old, white, female entered Dallas Osteopathic Hospital on January 10, 1963, with a chief complaint of malaise, weakness and jaundice which was not jaundice but rather hyperpigmentation mainly although the patient was somewhat jaundiced as well. The patient first noticed her condition about three years previously when she was told she had hepatitis. The patient also complained of photosensitivity and abdominal pain and stated that her hair was beginning to fall out. The patient also claimed that she had noticed that at times her urine was a dark wine color. The patient also complained of sores breaking out all over which produced scars when they healed. The patient denied a history of alcoholism but stated that her father had died with a similar condition.

Physical examination revealed a slightly malnourished white, female with hyperpigmentation of the skin alternating with areas of scarring. No bullae were noted but the patient claimed each sore started out that way and the itching was so intense that she had to scratch and break them. The skin was definitely jaundiced. The heart and lungs were essentially negative on auscultation. Hepatic enlargement was noted on palpation of the abdomen and the liver was tender to palpation. The rest of the physical examination was essentially noncontributory.

X-rays of the abdomen showed some enlargement of the spleen as well as the liver. Otherwise, x-ray studies were noncontributory.

Laboratory test results are as follows. The Kahn test was non-reactive. The urine analysis revealed a + albumin and was positive for urobilinogen. The red count, white count, hemotocrit and differential counts were all essentially nor-

NOTICE OF EXAMINATION

The next meeting of the Texas State Board of Medical Examiners when examinations will be given and reciprocity applications considered is scheduled for June 22, 23, 24, 1964, at the Hotel Texas, Fort Worth, Texas.

Completed examination applications for graduates from United States medical schools must be filed with the Board thirty days prior to the meeting date.

Completed examination applications for graduate of foreign medical schools must be filed sixty days prior to the meeting date.

Completed reciprocity applications must be filed sixty days prior to the meeting date to be given consideration.

TEXAS STATE BOARD OF MEDICAL EXAMINERS
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mal. The total protein was 7.15 mg. percent. Albumin was 3.62 mg. percent and globulin 3.53 mg. percent with an A/G. ratio of 1:0:1. Fasting blood sugar was 137 mg. percent the alkaline phosphatase was 22 badanski units and the transaminase was 91 units. B.U.N. was 10.3 mg. percent. Direct bilerubin was 8.0 mg. percent with a total serum bilereubin of 12.0 mg. percent. Serum chlorides was 102 meg. per liter. Serum potassium was 4.6 meg. per liter. Sodium was 139 meg. per liter. The L.E. cell prep was negative. The serum iron was 451 micrograms percent. The Watson-Schuartz test revealed the following values: Porphobilinogen test was negative. Urinary uroporphyrins were 859 meg. per 24 hours. The normal is 0-20 meg per 24 hours. Coproporphyrins were 716 meg per 24 hours. The normal is 19-95 meg. per 24 hours. Protoporphyrins were 1578 meg. per 24 hours. The normal is 0-15 meg. per 24 hours. The patients temperature, pulse and respiration remained essentially normal during her stay at the hospital. The patient was given supportive therapy and after 12 days of bed rest was transferred by her physician to Southwestern Medical School for a complete workup of a "gratis" basis since the patients financial resources were generally depleted.

Summary

This was certainly not a typical case

of porphyria. Indeed she may have had either of three diseases. Hemochromatosis is suggested by a high serum iron level. The clinical picture suggested porphyria. Certainly she had porphyrinuria. Post hepatic cirrhosis is suggested by the high alkaline phosphatase and relatively low serum transaminase. The fact that the patient's father died of a similar ailment is a point in favor of a diagnosis of porphyria. Taking all into consideration this writer still favors a diagnosis of porphyria.

Recent studies in Turkey after an outbreak of around 3000 cases of porphyria hepatica cutanea tarda revealed that it can be produced by the ingestion of toxic substances such as hexachlorobenzene. In this study it was found that wheat which had been treated with hexachlorobenzene, a fungicide, and had been prepared for planting was accidentally used for food. The greatest incidence of this series was in the 4-14 age groups. The clinical picture in the majority of cases was unmistakably that of porphyria hepatica cutanea tarda.

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Hospital Of The Month



Wolfe-Duphorne Hospital
(An Osteopathic Institution)

108 South Pinkerton St.
Athens, Texas

The Texas Osteopathic Physicians' Journal is proud to salute the WOLFE-DUPHORNE HOSPITAL as the Hospital of the Month.

This institution was founded by Drs. Dan A. Wolfe and A. Duphorne in June of 1936. Dr. Wolfe had opened his office in Athens in August of 1935. The hospital at the time of its founding consisted of six adult beds.

The present structure was completed in 1941 and at that time had ten adult beds, four bassinets, a major surgery, delivery room, nursery, diagnostic x-ray, laboratory, service and office areas, as well as clinic space for two doctors.

In 1959, an addition to the structure was completed which added three private rooms to bring the adult bed capacity to thirteen. The addition also added a new doctor's office suite.

The hospital is licensed by the Texas State Department of Health, and is a registered hospital with the American Osteopathic Association. The hospital is a member of the Texas Osteopathic Hospital Association and the American Osteopathic Hospital Association. The present staff consists of Drs. Wolfe, Duphorne, and Clyde A. Gallehugh. Dr. Brady K. Fleming of Tyler, Texas is the surgical consultant.

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Texas 65 A Success

H. Lewis Rietz, president of the Texas 65 Health Insurance Association, announced Thursday that 50,046 Texans, 65 years of age and over, acquired broad health insurance protection under the Texas 65 program during its initial enrollment period in October.

In announcing the final enrollment figures, Rietz stated, "this outstanding record of initial enrollment during October points up the need for, and justification of the over-65 program. The public support and appreciation of benefits offered, the unselfish cooperation of insurance agents, professional groups, and the generous support of the news media in Texas combined to achieve this gratifying record of enrollment."

Sixty-one insurance companies are participating to make the program possible in accordance with special legislation enacted this year and signed by Governor Connally.

No further open enrollment periods have been scheduled at this time, but they will be held at infrequent intervals in the future, Rietz stated.

He reminded Texans turning 65 after October 31 that they may enroll in the plan within 31 days following their 65th birthday. Those who were 65 and over during October must wait until the next open enrollment period to purchase Texas 65.

Texas is the fourth state to offer a 65 program. New York enrolled 107,000 during its initial enrollment period. Massachusetts enrolled 49,897 and Connecticut 21,850 during their first enrollment periods.

WARNING (from the Editor)

In most instances, insurance companies will receive collect wires confirming coverage for their policy holders. **THIS DOES NOT APPLY TO THE TEXAS 65 PLAN.**

Texas 65 is a non-profit association financed by 61 insurance companies for the purpose of providing low cost coverage for the aged. The Texas 65 Health Insurance Association has a very small margin for administrative costs. For this reason they are unable to accept collect calls or wires from any hospital. Also, the 65 plans in both New York and Massachusetts indicated that the lapse ratio was only one-half of one per cent.

They requested the medical profession (M.D.) to agree to accept these patients upon presentation of their membership card, without the extra expense of confirming each admission. We have taken the position that we are not in agreement with failure to confirm these memberships, but that we and our hospitals will stand the expense of the telephone call or wire if they will confirm the standing of a member. This, they have agreed to do. Therefore the Editor feels this warning should be issued to you so that when you accept these cases without confirmation, you do it at your own risk.

We heartily recommend that you confirm each Texas 65 admission to your hospital, at your own expense. Texas 65 offices are located in the Southland Life Bldg., Dallas, Texas. Mailing address is P.O. Box 655, Dallas.

DO YOU KNOW THAT . . . The 1934 group of 21 hospitals known as "The Associated Hospitals of Osteopathy" was the precursor of the present A.O.H.A. with its 214 member hospitals with 12,750 beds (a 1000% growth in 30 years.) Sixty per-cent are proprietary hospitals, established by free enterprise, usually in areas where osteopathic facilities would otherwise not have existed. This year 956 beds are being added at a cost of \$35,000,000.

A Professional Responsibility

by GEORGE W. NORTHUP, D.O.

A recent survey conducted by the American Social Health Association and co-sponsored by the American Medical Association, the American Osteopathic Association and the National Medical Association revealed that "there can no longer be any question that infectious syphilis is now the largest and most serious communicable disease problem in the United States."

This study and others reveal sobering facts. Physicians the Nation over are not living up to their responsibilities as servants of the public health. It is estimated that of all the cases of infectious syphilis in the country, physicians have only reported about 11.3 per cent of the cases they have treated. Even more serious than this, contacts for these cases are left undiscovered and continue as focal points for the spread of the disease.

A joint statement issued by the Association of State and Territorial Health Officers, the American Venereal Disease Association, and the American Social Health Association urges the reinstatement of serological tests for syphilis on routine hospital admissions; expanded courses on V.D. diagnosis and treatment for physicians, interns, and nurses; and a crash program to develop an immunizing agent for syphilis.

Whether required by law or not, every osteopathic physician is responsible to the public health to see to it that every

case of venereal disease he diagnoses is thoroughly investigated. Contacts, where possible, should be reached and treated. In searching for contacts, it should be remembered that in recent years homosexuality has been a rapidly increasing source of the disease.

The improved treatment available since the advent of the antibiotics is recognized. But, as has been repeatedly pointed out, "drugs alone have never eliminated a disease." In fact, in spite of the improved treatment, the instance of infectious syphilis has increased 448 per cent since the low point reached in 1957. In other words, there are four and one-half times as many cases in 1963 as there were in 1957. These are startling figures. Add to them these two findings: fifty-four and seven-tenths per cent of infectious syphilis in 1962 and fifty-five per cent of gonorrhea occurred in people under 24 years of age. There is no room for complacency or apathy on the part of the practicing physician.

State societies, county societies and hospital staffs should conduct educational programs concerning the diagnosis, treatment and reporting techniques for "the largest and most serious communicable disease problem in the United States."

It is a major professional responsibility. It must not be denied.

FOR SALE: Modern 10 room brick clinic (3 yrs. old) located in the fastest growing town in Texas — in Dallas suburbs. Owned by two doctors with an established practice in the same town for eight years, both doctors leaving for residencies. Asking \$12,000 and buyer assumes \$19,000 mortgage. Office equipment and 100 MA X-ray machine for sale if desired. Grossed \$50,000 last year. Box 214, c/o Journal, 512 Bailey Ave., Fort Worth 7, Texas.

Dr. Rollin E. Becker To Participate In Academy Program, Feb. 1-2



Dr. Rollin E. Becker, President of the Sutherland Cranial Teaching Foundation, will conduct several teaching sessions at the forthcoming Seminar, sponsored by the Texas Academy of Applied Osteopathy, to be held February 1-2, 1964 in the Villa Capri Motel, Austin, Texas.

Dr. Becker has served the osteopathic profession in many capacities since his graduation from K.C.O.S. in 1934, but the Dallas physician is best known for his activities in the Osteopathic Cranial Association, having served as President from 1950-51, and his activities with the Sutherland Cranial Teaching Foundation. For many years, he has taught various courses sponsored by the Foundation and prior to assuming the Presidency, served as trustee and treasurer. He is a member of the American Osteopathic Association, the Texas Association of Osteopathic Physicians & Surgeons, District #5 Society of the TAOP&S, Academy of Applied Osteopathy, Texas Academy of Applied Osteopathy and Cranial Academy.

Dr. Becker will present four lectures — "Sensory Perception and Palpation Diagnosis," "Whiplash Injuries and Craniospinal Mechanics," "The Midline Sinuses," and "The Practice of a Complete Osteopathy," and together with Dr. Harold I. Magoun, Sr. of Denver,

Colorado, will present the teaching sessions.

The location for the Seminar and the consistently excellent programs make the Academy Seminars a very popular educational meeting. Anyone wishing to attend should contact Dr. Catherine K. Carlton, Secretary, 815 West Magnolia, Fort Worth, Texas.

DEATHS

MRS. DORIS DECKER, daughter of Howard R. Coats, died November 13, 1963 in Oklahoma Osteopathic Hospital, Tulsa, Oklahoma, following a short illness. Services were held November 15 at Burks-Walker-Tippit Funeral Home, Tyler, Texas, with burial in Rose Hill Cemetery.

* * * *

MRS. JEANNE PHILLIMON BRAGG, mother of Dr. Charles H. Bragg, died November 16, 1963 in Hurst General Hospital, Hurst, Texas. Services were held in Big Sandy, Texas on Sunday, November 17, and in Beaumont, Texas on Monday, November 18. She was buried in Beaumont.

* * * *

MRS. CHARLOTTE THOMPSON, wife of Morris Thompson, President of K.C.O.S., died Saturday, November 30 in the Kirksville Osteopathic Hospital, following an acute illness of only four days. Funeral Services were held December 2 at Davis & Davis Chapel, Kirksville, Missouri. Burial was in Maple Hills Cemetery.

Calendar of Events

January 23-26, 1964—AMERICAN OSTEOPATHIC ASSOCIATION BOARD OF TRUSTEES, Midyear Meeting. A.O.A. Cenral Office, Chicago. Executive Director, True B. Eveleth, D.O., 212 East Ohio St., Chicago 11, Illinois.

February 1-2, 1964—TEXAS ACADEMY OF APPLIED OSTEOPATHY, Annual Seminar, Villa Capri Motel, Austin, Texas. Secretary, Catherine K. Carlton, D.O., 815 West Magnolia, Fort Worth, Texas.

February 17-19—AMERICAN COLLEGE OF OSTEOPATHIC OSTETRICIANS & GYNCOLOGISTS ANNUAL MEETING. Hilton-Statler Hotel, Detroit, Mich. Secy. Arthur A. Speir, D.O., Box 66, Merrill, Mich.

February 21-23—TEXAS SOCIETY OF OSTEOPATHIC SURGEONS, Annual Meeting, Commodore Perry Hotel, Austin, Texas. Secretary, Thomas M. Bailey, D.O., 1001 Santa Fe, Corpus Christi, Texas.

March 13-15—AMERICAN COLLEGE OF OSTEOPATHIC INTERNISTS, EASTERN STUEY CONFERENCE, Marriott Motor Hotel, Philadelphia. Executive Secy., Ralph J. Tomei, D.O., 3533 Ryan Ave., Philadelphia 36, Pa.

March 19-22—TWELFTH ANNUAL CHILD HEALTH CLINIC AND GENERAL PRACTITIONERS PEDIATRIC SEMINAR, Hotel Texas, Fort Worth. Virginia Ellis, D.O., 1001 Montgomery St., Fort Worth 7, Texas.

April 27-29—NATIONAL OSTEOPATHIC CHILD HEALTH CONFERENCE, ANNUAL MEETING. Exhibition Hall of Municipal Auditorium, Kansas City, Mo. Executive Secy. San J. Sulkowski, D.O., 409 Scarrit Arcade, 819 Walnut St., Kansas City 6, Mo.

April 30-May 2—ANNUAL CONVENTION, TEXAS ASSOCIATION OF OS-

TEOPATHIC PHYSICIANS & SURGEONS, Adolphus Hotel, Dallas, Texas. Executive Secretary, P. R. Russell, D.O., 512 Bailey Avenue, Fort Worth, 7, Texas.

June 4-July 8—WESTERN STATES OSTEOPATHIC SOCIETY OF PROCTOLOGY, ANNUAL CONVENTION, EUROPEAN TOUR OF HOSPITALS AND CLINICS. Secretary, Marcus S. Gerlach, D.O., 2015 State St., Santa Barbara, Calif.

June 22-24—AMERICAN OSTEOPATHIC ACADEMY OF SCLEROTHERAPY, ANNUAL MEETING, Commodore Hotel, New York City. Program Chairman, D.D. Olsen, D.O., 308 Iowa Theatre Bldg., Cedar Rapids, Iowa.

Please make a special effort to attend some of these meetings in 1964.

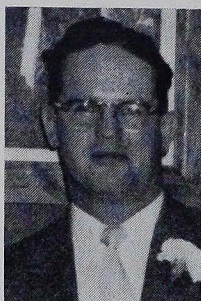
TUR-BI-KAL

for nasal congestion

- mild
- long lasting relief
- for adults, children, infants



HONORED



T. T. Mc GRATH, D.O.

Dr. T. T. McGrath, 1001 Montgomery St., Fort Worth, Texas, was elected to the office of Second Vice President of the American Osteopathic Academy of Orthopedics, which met for postgraduate and business sessions, October 27-30, in St. Louis, Missouri, in conjunction with the College of Surgeons meeting.

from THE PHARR PRESS, Pharr, Texas

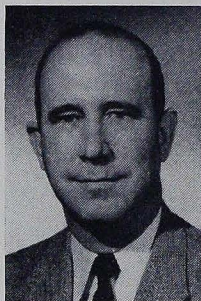
Osteopaths Form Organization

The Osteopathic Physicians and Surgeons of District 14 met for a business and organizational meeting at the home of Dr. and Mrs. George A. Aupperle, northwest of Mission, in the evening of October 21. This is the newest of the districts of the Texas Association of Osteopathic Physicians and Surgeons, comprised of the four Valley counties of Starr, Hidalgo, Willacy, and Cameron.

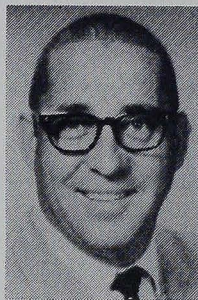
Five doctors were in attendance, George A. Aupperle, D.O. of Mission; Ralph Moore, D.O. of McAllen; Joe Suderman, D.O. of Pharr; Mabel Martin, D.O. of Weslaco; and George Diver, D.O. of Elsa.

A constitution was drawn up for the organization and future professional meetings were planned. Dr. George Diver presented a clinical paper on "Rectal Symptomatology."

Texas Physicians Elected To A.C.O.S. Membership



M. G. HOLCOMB, D.O.



BRADY K. FLEMING, D.O.

Doctors Mickie G. Holcomb and Brady K. Fleming were elected to membership in the American College of Osteopathic Surgeons, at the group's annual meeting, October 27-30, in St. Louis, Missouri.

Dr. Holcomb owns and operates the Tigua General Hospital, 7722 North Loop Dr., El Paso. Dr. Fleming is associated with Doctors Hospital in Tyler.

QUESTION: Have you ever seen an unhappy D.O. who was supporting his profession's *next* generation?

* * * *

THE NEW ORLEANS CONVENTION (AOA) hit an all-time high in enthusiasm. It was the largest in attendance since the "old days" of the "twenties" when practically no one stayed home.

November, 1963

To Our Divisional Secretaries:

Farewell! The time has come to accept other duties, some similar and some different from those at the AOA office.

It has been *an exciting year* for me watching decisions emerge from the scrambled puzzles posed by our acceptance as a recognized force in American medicine. Most problems were of our own making—these were the hardest to solve. A few still remain, all soluble.

It has been *a privileged year* for me. I have had a rare insight into the thinking process of this profession. I have watched emotional reactions span the gamut from frenzy to courtesy, from despair to confidence. We do a lot of splashing before we start swimming, but given direction we eventually follow the leader.

It has been *an inspiring year* for me. From the low ebb of an exhausting merger I have watched the tide return steadily until we now stand proud to have recorded "our finest year." Every statistic for 1963 eclipses previous figures: largest conventions, busiest specialty groups, most applicants to colleges, expanded research programs, increased legislative recognitions, unexpected Federal support, and on and on. All this did not "just happen." It was the product of dedication, resolve, and common sense.

To you secretaries I doff my hat. You are the district managers responsive to our challenges. We alert you to the next play, and you relay the word to your players. This year has marked a new high in cooperation and communication. When my successor asks your help, I know you will respond as heartily as you have done for me.

Thank you and Godspeed in the coming year.

RICHARD E. EBY, D.O.

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to help
soften
stools

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dosage: 1 tablet daily.
supplied: In decorative
"reminder" jar
of 60 tablets.

Each tablet contains:

Vitamin A Acetate	5,000 U.S.P. Units	Niacinamide	18 mg.
Vitamin B ₁ (as Thiamine Mononitrate)	1.3 mg.	Calcium (from Calcium Carbonate)	230 mg.
Vitamin B ₂ (Riboflavin)	1.8 mg.	Elemental Iron (as Ferrous Fumarate)	10 mg.
Vitamin B ₆ (Pyridoxine Hydrochloride)	0.5 mg.	AEROSOL® OT Surfactant	
Vitamin C (Ascorbic Acid)	75 mg.	Diocetyl Sodium Sulfosuccinate NF	100 mg.



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Caffeine	30 mg.
Salicylamide	150 mg.
Chlorothen Citrate	25 mg.

Effective in controlling tetracycline-sensitive bacterial infection and providing symptomatic relief in allergic diseases of the upper respiratory tract. Possible side effects are drowsiness, slight gastric distress, overgrowth of nonsusceptible organisms, tooth discoloration. The last named may occur only if the drug is given during tooth formation (late pregnancy, the neonatal period, early childhood). Average Adult Dosage: 2 Tablets four times daily.

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in

Good Public Relations

(EDITOR'S NOTE: *The Editor is publishing the following two newspaper articles to prove that the only procedure by which a doctor can promote good public relations is through his individual actions. Otherwise, it becomes advertising. The Fort Worth story carried in addition to the article, four x-ray pictures and a picture of the woman walking, the entire story taking up one-fourth of a page. The Grand Prairie article included a picture of Dr. Smith and Mrs. Emmadean Berry, program chairman for the Soroptomist Club.*)
From FT. WORTH STAR TELEGRAM, November 12, 1963

Woman Learning To Walk Again

Metal 'Hinges' Replace Knee Joints

BY BLAIR JUSTICE
Star-Telegram Science Writer

"I just know I am going to walk again."

Mrs. Eva Skinner, 55, is a determined woman. She has undergone surgery here in which hinge-like devices were put in both her knees, and she is determined she is going to walk—without crutches.

It has been seven years since Mrs. Skinner has taken steps without crutches. She now can take up to five steps a day unaided.

The osteopathic orthopedist who did Mrs. Skinner's surgery estimated that probably no more than 50 or 60 operations of this type have been done in the United States.

"It is just out of the experimental stage after being introduced and developed in Europe," the doctor explained.

Mrs. Skinner was a candidate for the operation because she had lost stability and control in the joints of both knees. The knees turned inward and her lower legs would swing out to each side.

Her doctor here thinks that some infectious type of arthritis had destroyed the joints in her knees.

"My legs are straighter now than they have been in as long as I can remember," said Mrs. Skinner in her room at Fireside Lodge, 4800 White Settlement, where she is recovering from the surgery and practicing her walking.

Mrs. Skinner lives in Minneapolis

and came to Fort Worth after learning that the orthopedic surgeon here might be able to help her.

"I met a former patient of his who had undergone some kind of knee operation. The only trouble was she didn't have his address. I finally wrote the postmaster in Fort Worth and asked him to look up the address and forward my letter on."

Mrs. Skinner underwent surgery on her left knee Sept. 18 at Fort Worth Osteopathic Hospital. An artificial joint was inserted in her right knee Oct. 1.

The prothesis or appliance that went into her knees is made of a metal called vitalium. The doctor here said the body does not react to such a metal when it is inserted for reconstructing a joint.

The metal device has a shaft, about six inches long, that goes in the hollow portion of the bone (the femur) extending up from the knee and a shaft that goes in the bone (the tibia) that extends down. In the central part of the device there is a bolt that acts as an axis or axle.

Mrs. Skinner said aching in her legs began in 1947. The trouble got worse and she underwent surgery in North Dakota, her home state, in 1953 and 1955. In 1956 she began walking only with the aid of crutches.

"I haven't been able to go much of anywhere since then," she said. "Even to go for a ride with someone was a big effort. There are only three steps from

the ground to my apartment in Minneapolis, but it was always an effort to go up and down."

In a few months, both Mrs. Skinner and her doctor believe she'll be walking up and down those steps. She is expected to return to Minneapolis this week.

FROM THE NEWS TEXAN, October 23, 1963

Dr. Bobby Smith Speaks To Soroptimist Members

Dr. Bobby Smith, a member of the staff of Mid-Cities Hospital, advised members of the local Soroptimist Club "not to get caught in the trap of trying to keep up with the Joneses" when he addressed them Thursday.

Pointing out that "hermits are not happy persons," Dr. Smith told the group that association with others influences to a great extent what a person does.

"We wear the styles of clothing we wear because others are wearing that style," he said. "People work til they injure their health sometimes just in order to stay up with others around them" he told the group.

He declared, "We should ask ourselves the question, 'Why is it so important to have these things?'"

He advised members to determine the things which are most important in life and to make them their pursuit.

Dr. Smith was introduced by Mrs. Emmadean Berry, program chairman. A short business meeting was conducted by the president, Mrs. Irene Paxton, following the program.

DO YOU KNOW THAT . . . Dr. Joseph Peach, 2nd President of KCCOS, is recovering nicely from his recent heart attack. In his leaving the active college scene, we of a grateful profession wish him Godspeed.

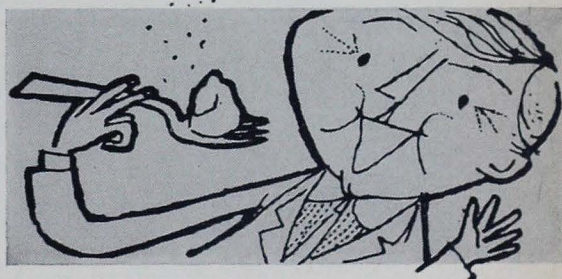
December, 1963



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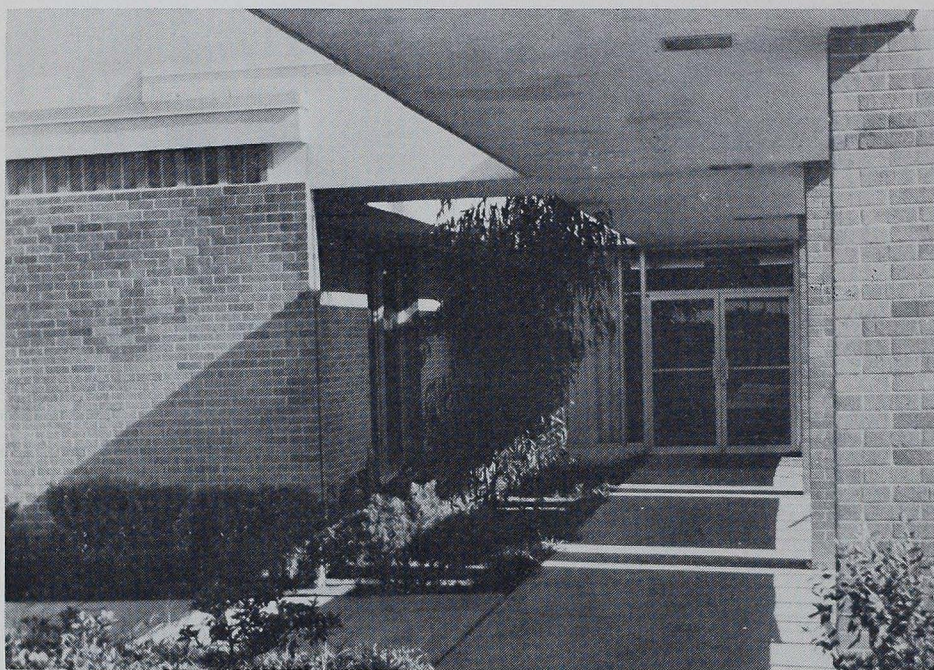
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Houston Osteopathic Hospital Moves To Expanded Quarters



This view shows an entrance to the sprawling, modern-designed one storied Gulfway General Hospital of Houston, located on a 5-acre tract and providing up to 100-bed capacity with plentiful space for future expansion. The facility has been acquired by the Houston Osteopathic Hospital, Inc., for \$1,000,000.

Expanding to meet long-growing demands on its services for Harris County and the Texas Gulf Coast, the Houston Osteopathic Hospital, Inc., a non-profit institution has bought the Gulfway General Hospital, 6160 Holmes Road, Houston, for \$1,000,000, and took over its operation as of Dec. 1.

Within the vicinity of the fast-unfolding Manned Spacecraft Center, the Gulfway hospital's modern designed one-storied multi-winged complex provides up to 100-bed capacity on a five-acre tract close to the huge Gulfgate Shopping City.

The name of Gulfway General Hospital will be retained, R. A. Smith, presi-

dent and administrator of the osteopathic institution, announced.

Purchase was made from Gulfway General Hospital, Inc., the owner-operator corporation, headed by Herbert A. Meisler, president, with W. A. Pool of Pasadena as administrator.

Built in 1961 in an area short of hospital facilities, the hospital with land and equipment is stated to have represented \$1,500,000 investment.

Dr. Lloyd D. Hammond, vice president and chief of the 38-member professional staff of Houston Osteopathic, said the modern, well-equipped hospital not only meets long-time expansion

needs but provides space for anticipated future expansion.

As a well-rounded general hospital, he said, it will provide general medical care as well as obstetric, pediatric, surgical, out-patient, emergency, X-ray, laboratory and pharmaceutical service for patients, and will be available "for all races, colors and creeds."

He stressed that "no individual, doctor or group will share in income from the hospital's operation — all income must go for operation, maintenance and expansion of the hospital in the serving of humanity."

Dr. David Jaffe, building and grounds Hospital has served the community vitally, but for years has needed more facilities to meet growing needs. Administrative skill has permitted it to keep down cost to the patient and to "keep in the black, free and unincumbered by debt." The \$1,000,000 Gulfway purchase involves \$650,000 in 20-year-plan notes. Down payment includes a note on the old debt-free location for which sale is under negotiation, Dr. Jaffe said.

Administrator Smith said gifts will be welcome to amortize the new property and for further expansion.

W. S. Gribble, Jr., led the group that pioneered in building the Houston Osteopathic Hospital and opened it Jan. 17, 1946. The hospital reports it has assisted 4,408 babies into the world, admitted 21,457 patients, handled 9,826 emergency cases and, in the last 10 years, conducted 19,375 X-ray cases and 162, 370 laboratory tests.

By coincidence, one of the co-founders, Dr. Reginald Platt, who presided at opening of the Houston Osteopathic Hospital, was one of the last patients to leave the old quarters and first to enter its new premises. En route recently to a staff meeting, Doctor Platt was gravely injured in a car crash and finished the trip to the hospital in an ambulance.

Gulfway provides such features as stainless steel kitchen, bedside oxygen outlets, patient communication system,

emergency power plant, piped air suction and other innovations in a nursery equipped for premature deliveries, separate ambulance entrance, separate corridors for staff and public, plentiful free parking, attractive architecture and decor designed "to reflect the warmth of personal care combined with efficiency of a modern hospital," Administrator Smith said.

A gift shop adjoining the spacious lobby will be operated by the hospital ladies' volunteer auxiliary.

The hospital will be governed by its professional staff and an executive committee. The committee: Mr. Smith, president and administrator; Dr. Lloyd D. Hammond, chief of staff and vice president; Franklin J. Sheard, secretary; Dr. H. M. Grice, treasurer; Dr. Esther M. Roehr, public relations; Dr. David Jaffe, building and grounds; Thomas V. King, president-elect; and Lester M. Ricks, past president.

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COMPLETE HOSPITAL AND CLINICAL SERVICE

An Osteopathic Institution

36th Annual Clinical Assembly Of American College Of Osteopathic Surgeons And Participating Organizations

Texas was well represented at the 36th Annual Clinical Assembly of the American College of Osteopathic Surgeons and Participating Organizations, held at the Chase Park Plaza Hotel, St.

Louis, Missouri, October 27-30, 1963.

The program was very interesting and well attended by 1,191 persons made up of the following classifications:

A.C.O.S. Members	176
A.C.O.S. Candidates	61
A.O.C.A. (Anesthesiologists)	90
A.O.H.A. (Hosp. Asso.)	69
A.C.O.H.A. (Hosp. Administrators)	36
A.O.C.R. (Radiologists)	72
A.O.A.O. (Orthopedics)	38
M.A.O.P.S. (Missouri Association)	97
Guests	74
Residents and Interns	19
Speakers	31
Ladies	267
Exhibitors	161
Total	1,191

Your Executive Secretary was extremely interested in many discussions that he had with physicians from other sections of the country regarding Texas and its practice opportunities. In addition to this, he was able to attend the House of Delegates meeting of the

Missouri Association of Osteopathic Physicians and Surgeons, where he was introduced and spoke to this House of Delegates for some 10 minutes.

There was a total of 55 registrants from Texas, made up of the following classifications.

A.C.O.S. Members	17
A.C.O.S. Candidates	5
A.O.C.A. (Anesthesiologists)	6
A.O.H.A. (Hosp. Asso.)	11
A.C.O.H.A. (Hosp. Administrators)	1
A.O.C.R. (Radiologists)	8
A.O.A.O. (Orthopedics)	2
A.O.A.O. Candidates	1
Guests—All participating organizations	3
Residents and Interns	1

Those in attendance from Texas were as follows:

AMARILLO

Earle H. Mann, D.O.
Richard Wetzel, D.O.

COMANCHE

W. D. Blackwood, D.O.

CORPUS CHRISTI

Thomas M. Bailey, D.O.
Fred E. Logan, D.O.

DALLAS

Elmer G. Beckstrom, D.O.
James T. Calabria, D.O.
Earl Gonyaw, D.O.
Charles M. Hawes, D.O.

John L. Johnston, D.O.
 Hyman Kahn, D.O.
 Leon R. Lind, D.O.
 Mr. H. G. Mann, Administrator,
 Dallas Osteopathic Hospital
 Charles D. Ogilvie, D.O.
 Walters R. Russell, D.O.
 Samuel F. Sparks, D.O.
 Marille E. Sparks, D.O., Administrator,
 East Town Osteopathic Hospital
 Paul A. Stern, D.O.
 Fred B. Thomas, D.O.
 Edward J. Yurkon, D.O.

EL PASO

M. G. Holcomb, D.O.

FORT WORTH

Edgar D. Conrad, D.O.
 Charles L. Curry, D.O.
 Roy B. Fisher, D.O.
 Mr. G. A. Fuller, Jr., Administrator,
 White Settlement Hospital
 Myron L. Glickfeld, D.O.
 Thomas T. McGrath, D.O.
 George F. Pease, D.O.
 Myron B. Renner, D.O.
 Phil R. Russell, D.O.
 Mrs. Jane Siniard, Administrator,
 Fort Worth Osteopathic Hospital

GARLAND

Jim Martin, D.O.
 Mr. T. Petroff, Administrator,
 Garland General Hospital

GRAND PRAIRIE

Harriette M. Stewart, D.O., Administrator,
 Mid-Cities Memorial Hospital
 J. Natcher Stewart, D.O.

GROOM

Mr. James B. King, Administrator,
 Groom Memorial Hospital
 John L. Witt, D.O.

GROVES

Nicholas G. Palmarozzi, D.O.
 Frederick W. Rogers, D.O.

HOUSTON

Mr. Lee Davis, Administrator,
 Community Hospital Foundation, Inc.
 H. M. Grice, D.O.
 J. H. Kritzler, D.O.
 Jack P. Leach, D.O.
 Opal Robinson, D.O.
 Mrs. G. Stukey, Houston General Hospital
 G. W. Tompson, D.O.

HURST

Charles H. Bragg, D.O.

LUBBOCK

Mr. Lee Baker, Administrator,
 Lubbock Osteopathic Hospital
 Raymond E. Mann, D.O.

MT. PLEASANT

M. L. Cline, D.O.
 Palmore Currey, D.O., Currey Clinic-Hospital
 Garry W. Taylor, D.O.

SAN ANTONIO

Gordon S. Beckwith, D.O.
 Hal H. Edwards, D.O.

TYLER

Brady K. Fleming, D.O.

Dr. Beckwith Named To ACOS Board Of Governors



Dr. Gordon S. Beckwith, 120 West Ashby Place, San Antonio, Texas, was named to the Board of Governors of the American College of Osteopathic Surgeons, which met for postgraduate and business sessions, October 27-30, in St. Louis, Missouri.

Dr. Beckwith is a member of the Board of Trustees of the Texas Association of Osteopathic Physicians and Surgeons.

EXCELLENT LOCATIONS FORT WORTH VICINITY

The Locations Committee of the Fort Worth Osteopathic Hospital announces four locations ready for immediate occupancy. Adaptable for solo or partnership practice. If interested contact Dr. C. E. Dickey, 4021 E. Belknap, Fort Worth, Texas, Telephone TE 4-1947.

Obstetrical And Gynecological Meeting Huge Success

The Annual Fall Seminar of the Texas Association of Osteopathic Obstetricians and Gynecologists was held at the Cabana Motor Hotel in Dallas on November 2nd and 3rd. Many physicians from all parts of Texas were in attendance and judging from their comments, the entire program was well received.

Doctor J. Dudley Chapman of Ohio and Richard Staab of Oklahoma were the featured out of state speakers. Doctor Chapman's discussion on Psychosomatic Gynecology and his comments on clinical research were excellent and certainly caused many of us to contemplate our methods of treatment. Doctor Staab's presentations on Gynecologic Endocrinology were very complete and educational. Certainly both of these men contributed much to the program.

As in the past, we must again be grateful to our local speakers for their contribution to the success of this seminar. Doctors Dott, Walters, Moore, and Fischer, all of Texas, gave excellent papers.

The following officers and trustee were elected; President, Dr. Frank Bradley of Dallas; Vice-President, Dr. Richard M. Mayer of Lubbock; Secretary-Treasurer, Dr. Jerry O. Carr of Fort Worth; Trustee Term Expires 1967, Dr. Roy Fischer of Dallas.

The following doctors and wives attended the meeting:

TEXAS

Amarillo

Dr. Ben W. Rodamar

Arlington

Dr. Bobby Smith

Bridge City

Dr. J. E. Barnett

Corpus Christi

Dr. Jack H. Dawkins

Dr. Marjorie Harmon

Dr. Joseph Schultz

Dallas

Dr. Dan Barkus

Dr. and Mrs. Frank Bradley

Dr. John Burnett

Dr. Raymond Dott

Dr. Joseph Dubin

Dr. and Mrs. Roy L. Fischer

Dr. George Miller

Dr. Leonard C. Nystrom

Dr. Donald M. Peterson

Dr. Carolyn Roberts

Dr. H. L. Samblanet

Dr. D. J. Slevin

Dr. Robert E. Slocum

Dr. William Walters

Dr. and Mrs. W. E. Winslow

Fort Worth

Dr. D. D. Beyer

Dr. and Mrs. J. O. Carr

Gonzales

Dr Willis Crews

Granbury

Dr. and Mrs. Robert Rawls

Grand Prairie

Dr. Albert Plattner

Dr. Emil Plattner

Dr. Herman Plattner

Dr. Lee J. Walker

Houston

Dr. and Mrs. James A. Byrd

Dr. H. E. Fanning

Dr. R. L. Hardy

Dr. and Mrs. E. P. Kehoe

Dr. George H. Johnson

Dr. and Mrs. G. A. McClimens

Dr. William R. Masters

Dr. Joseph E. Walpman

Dr. V. H. Zima

Hutchins

Dr. Ronald H. Owens

Irving

Dr. A. V. Mansky

Lubbock

Dr. R. M. Mayer

Dr. C. C. Rahm

Dr. M. M. Stettner

Dr. Harlan Wright

Mesquite
Dr. Robert L. Moore

Midland
Dr. B. B. Jagers

Mincola
Dr. C. W. McCorkle

Odessa
Dr. V. Mae Leopold

Port Neches
Dr. John B. Eitel

San Antonio
Dr. J. J. Diaz
Dr. and Mrs. R. E. Springer

St. Jo
Dr. and Mrs. Neil Purtell

Wolfe City
Dr. and Mrs. Roy C. Mathews

OUT OF STATE

OHIO
North Madison
Dr. J. Dudley Chapman

OKLAHOMA
Tulsa
Dr. Richard C. Staab

Dr. Palmarozzi Receives Degree Of "Fellow"



The degree, "Fellow in the American College of Osteopathic Surgeons," was conferred on Dr. N. G. Palmarozzi, at the group's annual meeting October 27-30 in St. Louis, Missouri.

Dr. Palmarozzi is associated with Doctors Hospital, 5500 39th St., Groves, Texas.

HEALTH NOTES

BREAST EXAMINATIONS are important in the fight against cancer. Every woman should examine her breasts carefully—by looking in a mirror and by feeling with her hands—after each menstrual period for lumps or any other changes, advises the National Cancer Institute. Should anything unusual be noted, the family physician should be consulted. Although most lumps are not malignant, periodic inventories are well worth the effort as cancer caught in its early stages can be eliminated.

HEALTH NOTES

OLDER EXPECTANT MOTHERS need the best physical and psychological care, and the woman of 35 is considered elderly for childbearing. In the mother-to-be of older age, there is a higher incidence of high blood pressure, diabetes, cancer, and heart disease. She is also more likely to have twins and oftener requires a cesarean section delivery. In addition, if she's had babies before, she may be given more casual care. These are the major reasons why she needs the ultimate in fine care.

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FILMS

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

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

PHYSICIAN AND SURGEON, D.O. — A 16 mm. motion picture — 14 minutes. Color and sound. This film, recommended for use by state osteopathic associations, begins with an ex-

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

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

FOR A BETTER TOMORROW — A 16 mm. motion picture. 22 minutes. Color and sound. This is the story of one of America's most controversial problems, the doctor shortage. The film highlights the inadequate number of students in training to be doctors as a major cause of the shortage and uses the educational program in osteopathic colleges to illus-

trate that the training of a physician is the longest, costliest, and most complex educational program in America. "For a Better Tomorrow" is an excellent presentation on the training, requirements and opportunities for the osteopathic physician. It is recommended for showings before lay groups, career-day programs, and pre-osteopathic students.

SYMPTOMS OF OUR TIME—A series of six 16 mm. films. Black and white, sound. Each 14½ minutes:

- (1) **DRUG ADDICT** — Teen agers "hooked by the habit" and their effect on society.
- (2) **ACCIDENT PLAGUE** — Examples with impact. See accidents which happen at home, play, and work — which could have been prevented.
- (3) **MEDICAL EMERGENCY** — A girl — appendicitis — an operation — shows why no one need fear surgery.
- (4) **ARTHRITIS** — Aptly termed the "king of misery," this is the story of a man afflicted with the oldest disease known.
- (5) **ALCOHOLISM**—A man "takes to drink" to escape pressures of today's living and finds alcohol cannot be used as a crutch.
- (6) **THE DEMOCRATIC COLD**—Humorous "do's and don'ts" of home remedies for colds . . . America's most common ailment.

Produced as a Public Service by the American Osteopathic Association, these films are utilized mostly for teaching of health programs in the high schools. They are highly in demand.

RADIO TAPES

EMPHASIS ON HEALTH — Produced by the American Osteopathic Association in cooperation with the U.S. Public Health Service. Two tapes I PS Speed 7½ minutes each:

Tape #1 — Programs #1-#7

- (1) Heart Disease (2) Cancer (3) Accidents (4) Pneumonia (5) Diabetes (6) Common Cold (7) Old Age.

Tape #2 — Programs #8-#13

- (8) Cirrhosis of the Liver (9) Arthritis (10) Tuberculosis (11) Ulcer (12) Overweight (13) Childhood Diseases.

PAMPHLETS

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FORT WORTH, TEXAS

S.O.P.A. News

NEW GROUP FORMED

The Osteopathic Physicians' Assistants in San Antonio met in September to discuss the possibility of starting a local unit of S.O.P.A. in their city. Six girls attended this first meeting. A meeting was held October 15 at the San Antonio Osteopathic Hospital with seven girls present.

Elected as officers of the group were:

PresidentMrs. Elva Nadine Childress
Vice-PresidentMrs. June Rutherford
Secretary & Treasurer

Mrs. Alicia Hinojosa

Chairmen of Committees appointed were:

Education and Ways and Means

Co-ChairmenMrs. Jo Smith and
Mrs. Christina Tabb

GrievanceMrs. Sara Netts

Public Relations Mrs. Beatrice Morales

There is much interest and enthusiasm in the group and we hope to have more and more girls join.

ELVA N. CHILDRESS
Reporter

(Harris County)

The Harris County Society of Osteopathic Physicians Assistants, Dist. 6, held the regular monthly meeting at Houston Osteopathic Hospital on Nov. 8. Mr. Sandall of the Credit Bureau of Greater Houston spoke on 'The Doctor's Place in Credit Economy,' with a question and answer session following. Ten members were present.

The Society ordered candy for the membership to sell, the proceeds going to the scholarship fund.

Dr. Joseph Carpenter, our master of ceremonies at the Houston convention, accepted the position on our advisory board.

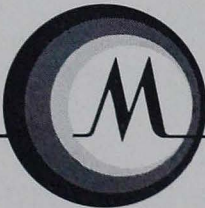
An outing has been planned for the Dec. meeting. We will meet at 8:00 p.m. at Valians Sport and have dinner in the press box with the business meeting following.

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NEWS OF THE DISTRICTS

District No. Three

Report of 2 Meetings

This column begins with a brief report on two District 3 meetings—the one in September (which I missed) and the November one.

Dr. Joe DePetris, Dallas internist was the speaker at the September 15 District 3 meeting. Reports have it that his presentation of "Cardiovascular Diseases" was exceedingly well done. It was well illustrated with slides and autopsy material. I'm sorry I missed it, Joe.

At the November 17 District 3 meeting Dr. Robert Wagner, Tyler internist, spoke on "Diabetes." It too, was well delivered and well received.

Because of poor attendance there was some discussion about changing meeting dates from the third Sunday of stated months to the Saturday evening before. What does the membership think of that? Which would be more convenient for absentees: to stay home from a Saturday night meeting or to stay home from a Sunday afternoon one?

Fourteen, all told, were in attendance at the September meeting; thirteen at the November one.

* * * *

The Mineola General Hospital is in the process of expansion. A new addition, which ought to be in use by the time this is published, will make it a nice 35-bed hospital—just about the biggest osteopathic hospital in the district.

* * * *

The district is blessed with another member of the ACOS in the person of Tyler's Dr. Brady K. Fleming. Dr. Fleming was inducted October 28, at the College's ceremonial conclave, at Chase-Park Plaza, St. Louis.

H. G. GRAINGER, D.O., F.A.A.O.
Correspondent

District No. Ten

District ten held the regular meeting November 26 with excellent attendance. Dr. Lee Walker of Grand Prairie was guest speaker and spoke on various aspects of obstetrical practice, including the management of the anesthesia, delivery, and post-partum care of the typical normal case. His lecture was received by a most appreciative audience. Following the talk, a question and answer period extracted a surprising amount of additional information from Dr. Walker, including Rh problems, hemorrhage, and a host of other abnormal conditions.

Speaking of obstetrics, Dr. L. J. Lauf continues to deliver babies at an unprecedented rate, and figures reveal that he will surpass his previous record for the number of deliveries in any one calendar year. To date, November 27, he has delivered 1266 babies in 1963. Within the 24 hour period beginning at 7:00 a.m. November 17 Dr. Lauf delivered 11 babies and saw 103 office patients. On November 26 during the hours from 7:46 a.m. to 3:08 p.m. he delivered 8 babies. During the past week he has seen a minimum of 83 patients per day. With no residents, internes, or even any help from any other doctor.

The flying bug has bitten a number of members of District 10. In the process of learning to fly or being seasoned pilots are Drs. Bob Burns, Ben Young, Harlan Wright, Ed Davidson, Gene Brown, Ken Gregory, Maurice Priddy, Wayne Ramsey and possibly others.

Dr. G. G. Porter flew with the Texas Tech football team to Arkansas for the U. of Ark. game Nov. 23rd, and the week before that he flew with Harlan Wright to El Paso for the Tech-Texas Western game. While there, Dr. Wright put Lynne on a jet for California, and

plans to go and bring her home during the Thanksgiving holidays. Harlan says he is doing all this flying just to log some hours in the new plane so Charlie Rahm will consent to fly with him again.

Ben Young reports that business is moving along at a very rapid pace in Lorenzo, while Wayne Ramsey and Charlie Rahm report a slight November slump.

Work on the remodeling of the Porter Clinic is progressing steadily but will not be finished in time to have a Christmas party in the new lecture room and social hall.

Dr. Oliver H. Jones, better known as "Ollie," has moved from Corpus Christi to become associated with Dr. Basil Johns at Olton. Welcome to District 10, Ollie.

Dr. Horace Emery, recently won the class D singles in the annual city-wide tournament of the Lubbock Mens' Bowling Association with a 602 series.

The Auxiliary to District 10 entertained their husbands at a lovely covered-dish supper December 10 at the home of Dr. Horace Emery, with Mrs. Emery and other members of the Auxiliary as hostesses.

District No. Thirteen

Everyone in the district is proud of the new Wintermute Memorial Hospital which had its open house November 3, 1963. Cooper and the surrounding area should be proud of this modern facility.

Drs. Fite and Vinson have already begun construction on their Colored Rest home; this is unique and should serve people who heretofore have not been served.

Alas, Emerson Smith has his troubles at Wolfe City, one son on the football team, one in the Band and two to go. No rest for the wicked.

The regular monthly meeting was held at the Country Club in Bonham Saturday, November 9, 1963. Sixteen were present, after a short business session Dr. Kenneth White, Commerce, Texas brought us two interesting case histories as a program.

The December meeting will be held Friday night at the Cabana Motor Hotel in Dallas during the Annual Post-Graduate Seminar, December 6, 1963.

R. D. VAN SCHOICK, D.O.
Reporter

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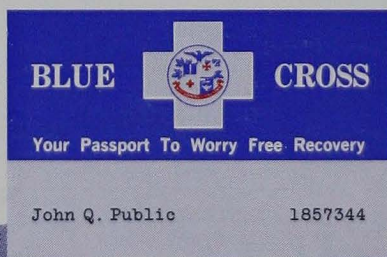
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