David A. Gee Accepts Office

DAVID A. GEE, executive director, (left) is being congratulated upon his installation as president of the Hospital Association of Metropolitan St. Louis, by retiring president Paul F. Detrick (second from right), Paul F. Boettcher, new president, Gerald J. Malloy, (right) executive director of the association, as well as Andrew Potulski, director of the Division of Hospital Services of the W. K. Kellogg Foundation, guest speaker for the event.

Hospital Begins Drive For Federation Funds

A visible force in the health and welfare of the community, the Jewish Federation of Greater St. Louis was organized in 1901, and has been the stimulus in planning and developing services for the community.

The objective of the Federation is service to people, and the Jewish Center for the Aged and the Jewish Community Centers Association physical testament to that.

This year the fund-raising period at the Hospital begins April 1 at 10:30 a.m. in the Employees' Cafeteria. The first day of solicitation is April 4th, with the second, third and fourth ral- lies in the Employees' Cafeteria on the 5th, 6th and 7th of April. The Federation Drive at the Hos- pital is scheduled to end April 22. Mrs. Evelyn Whitlock is chair- man of the Drive for this year and is working with Max Appel and William Chiles as coordinators, and vice-chair- men: Samuel Frankel, Ph.D., Robert Hickox, Armand Jaquear, and Mrs. Virginia Reisinger, R.N.

Annual Support

The Jewish Federation gives an annual subvention for programs such as home care, chronic disease, outpatient clinic and the medical and surgical education programs. At its inception, the Federation took an active respon- sibility in the home care service at the Hospital. The Federation has honored bills for certain ex- penses of this division of the Hos- pital since 1951. The Home Care Department was established in 1953, originally designed for 25 pa- tients. The program now pro- vides home service for more than 60 patients, with special provision for medical, dental, nursing, so- cial, occupational and physical therapy, nutritional and house- keeping care. The home care ser- vice accepts patients from all divisions of the Hospital, and from practicing physicians who are members of the medical staff.

Charles Eckert, M.D., professor and chairman of the Depart- ment of Surgery at Albany Medi- cal College will be the second annual J. Probststein Visiting Professor of Surgery at Jewish Hospital.

The three-day event is sched- uled for April 14-16 and will in- clude two formal addresses by Dr. Eckert; case presentations; house staff rounds; and the annual sur- gical department dinner.

The visiting professorship was established in 1964 by a $13,000 gift from Dr. Max Appel and Mrs. Leon J. Lezon as a tribute of friendship and appreciation to Dr. Probststein, Jewish Hospital senior surgeon. The committee designated to choose the visiting professor in- cludes: Dr. Probststein; Mrs. Naomi Wagner, daughter of the Leon- sons; and Dr. Morton D. Pareira, surgeon-in-chief.

The following activities are open to members of the St. Louis area profession and will be held in the Moses Shoenberg Memorial School of Nursing Building, 306 South Kingshigh- way:

April 14: 1 p.m. case presenta- tion and formal address by Dr. Eckert, "The Changing Scope of Surgery." April 15: 2 p.m. case presenta- tion and formal address by Dr. Eckert, "The Contribution of Regional Lymph Node Dissection to Cancer Therapy"; 10:30 a.m. case presentations; and at 12:30 p.m. a complications conference.

Eckert to Deliver Probststein Lecture

Dr. Eckert received his under- graduate degree from the Uni- versity of Wisconsin, and his medical degree from Washington University School of Medicine in 1938. He served his internship and residency at Barnes Hospital and subsequently attained the position of associate professor of surgery at Washington Univer- sity. In 1945 Dr. Eckert qualified for certification from the Ameri- can Board of Surgery.

In 1956 he was appointed pro- fessor and chairman of the De- partment of Surgery at Albany Medical College of Union Uni- versity.

Interns Match 100% Jewish Hospital matched 100% of the interns sought for 1966, according to the results of the National Intern Matching Pro- gram. The St. Louis Hospitals matched on the average 47%; nationally the average was 56%

A total of 19 interns were sought and 20 were obtained.

Twelve interns were requested for straight medicine and thirteen obtained; seven interns were re- quired and matched for straight surgery.

The straight internship pro- vides supervised training on a single service in a hospital that has been approved in that specialty by the Council on Med- ical Education and Hospitals.

Harry Edison Dies

Mr. Harry Edison, a member of the Jewish Hospital Board of Directors, died March 11 at the age of 75.

Mr. Edison and his four brothers founded the Edison Brothers Stores, a retail shoe chain, in Atlanta, Ga., in 1922. The company was moved to St. Louis in 1932.

Mr. Edison was also a trustee of the Jewish Community Center Association; a trustee of Brandeis University, Wal- tham, Mass.; and one of the founders of the Albert Einstein College of Medicine, Yeshiva University, New York City.

Among the many gifts of Mr. Edison to the Hospital was the recent Mae and Harry Edison Unrestricted Endowment Fund of $10,000.

Mr. Edison is survived by his wife Mar; two children, Sidney and Edna, both of New York; and three brothers, Irving, president of the firm; Samuel and Simon.

The Hospital extends its deep sympathy to the family of Mr. Harry Edison.

The unit will centralize pa- tients, personnel and equipment necessary for the efficient and effective operation of the units is organized to give the necessary expert support of the patient.

The unit is estimated to cost more than $200,000. The Jewish Hospital Auxiliary plans to allo- cate the funds raised from the Children's Ball (January, 1967) to- ward the establishment of the Medical Intensive Care Unit.

Construction of the unit will begin in 1966. It will be ready for use by early 1967.

Federal Legislation

Federal legislation establishing regional medical programs has stimulated great interest in spe- cial and medical care facilities in hospitals throughout the country. In the provision and efficient operation of these programs, physicians see a bright opportunity to reduce the tragic morality of coronary dis- ease and other acute illnesses; social scientists and public health planners visualize the possibility of an improvement in the eco- nomic toll of the leading cause of death in the United States.

For the effective operation of any special care unit, three ele- ments are necessary: trained personnel, efficient communication, and adequate instrumentation.

Specialists

In addition to physician super- viors, each unit will have an around-the-clock staff of specially trained nursing personnel and bio-medical technicians to handle the varied problems that arise. An in- service training program will be conducted for those who staff the unit.

Communication and instru- mentation will be integral in the facilities of each private room. The beds will be equipped with instruments that make possible recording of the patient’s pulse rate and/or an electrocardiogram which registers at the central nursing station as well as on the individual bed monitor. Group monitors in the corridor will be coordinated so that they are readily visible to nurses and medical personal, but not to patients.

Alarm System

The instrumentation will be equipped with an alarm system which will be activated by a rise or fall in pulse rate, or the sud- den development of disturbances of heart rhythm.

The educational value and potential of this type of patient care unit is important. Physicians in training will have an oppor- tunity to obtain experience in the course and progress of patients. The unit will be built so that when the newer concepts of pa- tient care become available, the facilities can be re-adapted to fit the needs.
Recovery Room Nurse Gives Special Care to Patients

There aren’t many jobs where the employee is required to stand on her feet for as long as eight hours and breathe for people. Mrs. Theresa Moorehead, R.N., does that and much more in the post-operative Recovery Room for patients who have undergone surgery at Jewish Hospital. Her calmness and efficiency are reassuring to the patients and other personnel who work in the Recovery Room. Patients often have a way of getting well sooner from her special care. She is there to see that there is no problem after surgery. She talks the patient’s head to initiate breathing, then uses suction apparatus to stimulate the patient to start on his own. Mrs. Moorehead’s gentle voice encourages the patients to awaken, cough, and take deep breaths. She insists to see that there is no unusual bleeding and records information on the pulse rate as well as respiration. She is required to be constantly alert to any signs of faltering on the part of the patient. If there is trouble, a small hand unit known as the Ambu respirator is used in an emergency. If the need is greater than the Ambu can rectify, the anesthetist is called in to use a larger oxygen respirating unit provided for such cases.

Mrs. Moorehead is there to assist in these cases; intensive care work is not new to her. After graduating from St. John’s Nursing School, she started working in the nursing profession more than 10 years ago.

With a varied background, and much experience in the field, she was requested to initiate an intensive care unit at St. Mary’s Hospital. She has been working at Jewish Hospital for more than a year now.

The 3 p.m. to 11 p.m. shift is agreeable to Mrs. Moorehead. She can send her two teenage sons off to school as well as make breakfast for her husband before he leaves for his downtown business. Then she has the day to clean her home, go shopping, or do what is needed for her family.

When mid-afternoon comes, Mrs. Moorehead arrives early at Jewish Hospital so that she can be briefed by the daytime staff as to the condition of patients who are there, and how many more are expected during the late afternoon and evening. Mrs. Phyllis Todd, R.N., and Mrs. Betty Dodd, R.N., are members of the daytime staff of the Recovery Room. Nurse Aides include Mrs. Vergie Gilmore and Mrs. Johnnie Moorehead. Mrs. Anderson works with Mrs. Moorehead during the evening shift.

Mrs. Moorehead’s alert watching begins at 3 p.m., and though the scheduled hour for departure is 11 p.m., she does not leave until the last patient has been sent to the floor.

ChecKING THE CONDITION of a patient in the post-operative Recovery Room are Mrs. Theresa Moorehead, R.N. (left) and Mrs. Phyllis Todd, R.N. (right).
Dr. Tatkow Uses Harrington Method

TREATMENT FOR SCOLIOSIS

Instrumentation of the spine for correction of the condition known as scoliosis was introduced to the American Orthopedic Association in 1960 by Dr. Paul R. Harrington.

Since that time, a systematic evaluation has been carried out at the Methodist Hospital in Houston, Texas, under Dr. Harrington's direction. Dr. Robert W. Tatkow has studied periodically in Houston with Dr. Harrington, and has been performing one procedure at Jewish Hospital since entering private practice there. There are other operative and non-operative procedures to correct the asymmetric spine, but the Harrington Method was chosen for use at Jewish Hospital because of the great amount of correction obtainable as well as the minimum time loss for the patient.

A team of orthopedic surgeons who are attending physicians at the Hospital perform this surgery. Dr. Robert W. Tatkow and his associates, Drs. Jerome J. Gilden, Irwin B. Horowitz and Milton E. Lenebel work together with an operating room team for these intricate operations.

Early detection of scoliosis is important. Many families think that the child "will outgrow it." This mistake can lead to serious consequences, for scoliotic deformations require professional treatment.

95% Females

During the investigation, the orthopedic surgeon examines the child's spine. If a diagnosis of scoliosis is made, the decision concerning the type of treatment depends on the stage of the disease, the type of curvature and the age of the patient. Most spine fusions are performed between the ages of 12 and 16 years. Approximately 95% of the scoliosis cases occur in females. There is a greater incidence of success of the spine fusion at that time, because if left untreated during this period of rapid growth, the curvature may rapidly increase and cause severe deformity.

During the operation, the patient is placed prone with the spine slightly flexed over lateral chest rolls. After a sterile prepping of the skin, the fusion committee is covered with plastic to enable the surgeons to work under the most aseptic conditions. By careful direction, the muscle masses are retracted; the arteries, veins and nerves are left intact as much as possible and the area to be instrumented and fused is entirely exposed. The spine is instrumented on the operating table, and a boney fusion is left to develop over the instruments specially devised for the operation. Sponges are weighed periodically to determine the blood loss which is replaced by transfusion. The patient, post-operatively, is placed in a cast, and must remain in bed for about three months.

Mobility Increase

During the next three months, the patient's mobility is gradually increased and, for the next six to 12 months after the operation, restricted activity in a brace is required. This affords enough time for the total maturity of the fusion.

The cause of scoliosis is unknown in more than 85% of the cases; the other 15% can be traced to a diversity of bone, muscle and neurological diseases.

Dr. Tatkow is a native of New York City, and received a B.S. from the University of Wisconsin, an M.D. from St. Louis University. After serving an internship at the District of Columbia General Hospital, Dr. Tatkow served a general surgical residency at the Washington Hospital Center in Washington, D.C., and a residency in orthopedic surgery at the Hospital for Joint Diseases in New York City.

Dr. Tatkow came to St. Louis in 1956, and he and the former Debra Segal have three children: Michael, 6; Andrew, 4; and Janice, 11 months.

The Medical Care Research Center at Jewish Hospital has received a two-year renewal grant of $560,000 from the Public Health Service, as announced by Albert F. Wessen, Ph.D., president of the center, chairman of the department of sociology-anthropology at Washington University.

The center was established early in 1960 to foster research collaboration, sponsored by Jewish Hospital administrators, engineers and the health professions. Initially, the center received more than $560,000 to finance its efforts for five years. Originally a joint venture of the Washington University Social Science Institute and the Hospital, the center has extended its contacts with the St. Louis University School of Medicine and the St. Louis County Health Department. Dr. Wessen said.

Professional personnel associated with the center include David A. Gee, executive director, Jewish Hospital; Dr. Charles H. Dart, Jr., chief-of-surgery, Jewish Hospital; Dr. C. Howe Eller, commissioner of health, St. Louis; and David J. Pittman, director of the Washington University Science Institute. A total of 26 physicians, administrators and scholars were associated with the center last year.

Medical Staff

Herbert B. Zimmerman, M.D., director of the cardio-pulmonary laboratory, recently presented two papers at a cardiology conference conducted at the University of Illinois in Columbia. Purposes of the conference were to present some of the recent major achievements in the specialty as well as to review fundamental principals of therapy. Dr. Zimmerman is director of the University's Department of Physiology and Management of Cardiac Arrhythmias, and "Electrical Convergence of Arrhythmias." Carl J. Heifetz, M.D., recently had an article published in the February issue of the American Journal of Medical Research. The article is titled "Technique of Single Layer Endo-to-End Intestinal Anastomosis by Triangulation." Lawrence K. Halpern, M.D., has been appointed to serve on the Board of Trustees of the American Academy of Dermatology by Dr. Herman Bremner, president of the Academy.

Robert Goldstein, Ph.D., director of the Division of Audiology and Speech Pathology, and Lloyd L. Price, M.S.C.D., research assistant now at Florida State University, co-authored a paper, "Clinical Use of FFA with an Average Response Computer: A Case Report," which was published in the February issue of Journal of Speech and Hearing Disorders.

Morton D. Pariera, M.D., chief-of-surgery, Charles H. Dart, Jr., M.D. and Dan B. Moore, M.D., recently attended the 7th International Transplantation Conference held in New York. It was sponsored by the New York Academy of Sciences.

Alex H. Kaplan, M.D., director of the Department of Psychiatry, recently presented a paper on "Psychiatric Sequelae of Therapeutic Abortion" at the Department of Psychiatry of the University of Illinois, a project which is supported by the Ira and Herbert Simon Research Fund.

Mary Bishop, M.D., Division of Adult Psychiatry, participated in a community interest program sponsored by Famous-Bar Co. in conjunction with the Family and Children's Service of St. Louis. Dr. Bishop participated in the program, "What Shall We Teach Our Children?"

Calvin H. Weiss, D.D.S., director of Dentistry, recently spoke at the Catholic Hospital Assn. on "Care of the Aged and Handicapped: the Necessity of Comprehensive Dental Care." Rafael M. Laliga, D.D.S., has accepted a fellowship in clinical pedodontia at Forsyth Dental Center, Harvard University for the 1966-67 academic year.

Hyman Muser, M.D., assistant professor of psychiatry at the University of Illinois School of Medicine, was the guest speaker at last month's meeting of the Division of Adult Psychiatry. Dr. Muser spoke on "Research on Supervision: On the Reliability of Residents Accounts of Beginning Psychotherapy." Franz U. Steinberg, M.D., director of Long Term Care, recently spoke to the medical staff of Burge Protestant Hospital in Springfield, Mo., on "Coordinated Hospital-Based Home Care."

Marvin E. Levin, M.D., recently had a paper published in the Journal of the American Podiatry Association on "Diabetes Mellitus as Manifested in the Foot."
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[Edna E. Peterson Scholarship Fund]
The cost of operating a hospital has increased 50% in the past decade. To help meet this rise in operational expenses, hospitals have been forced to gradually increase daily room rates.

The first of the year increase in room rates at Jewish Hospital does not begin to compensate for the added costs of supplies, food, expanded services, equipment, utilities, increase in personnel and higher medical benefit costs.

There has been an average increase in room charges of 90% over the past 10 years, but the hospital patient today receives more comprehensive medical care than ever before.

Average Stay
An important factor in equating costs to the patient is the fact that 10 years ago, a patient had an average length of stay of 9.7 days. Today, the average length of stay at Jewish Hospital is only 8.6 days. Ten years ago, patients had an average of 12 laboratory tests; today patients have an average of 27 laboratory tests. Ten years ago the number of x-rays per patient was 1.5; today the number of x-rays per patient is 2.7. Over the ten-year span, the cost of drugs per patient has increased 30%.

All of this adds up to the fact that today’s patient receives more intensive and complete medical care for the shorter time he spends in the hospital.

As an individual means of offsetting the spiraling costs of medical care, more than 80% of the total population have some form of health insurance.

Average Cost
The average cost to the patient for a day of care in Jewish Hospital is $46.51. The cost to the Hospital must make up a deficit of $105,902 despite the revenue received from the United Fund and the Jewish Federation.

A complete range—misses Carol Eaker, registered nurses Misses Carol Eaker, registered nurses, and research programs at Jewish Hospital have more than 1,000 full-time personnel and more than 200 part-time employees.

With a bed capacity of 525, this provides approximately 2.3 employees per patient. Most of them the patient never sees, but who, nevertheless, important members of the team in providing the patient with maximum comfort as well as comprehensive care and service.

High Standards
All of these services, education and research activities combine to provide patients and the St. Louis community with the broadest spectrum of medical care available.

In order to maintain high standards of excellence in care and service, the hospital must retain a highly trained, skilled staff of employees.

Very few institutions in the United States have the depth and variety of services offered by Jewish Hospital.

Doctors’ Day
In honor of the observance of Doctors’ Day on March 30 this year, the Auxiliary has contributed $50 for books for the Medical Library.

Clever Ball Committee Begins Work
The first Clever Ball was held in 1962 to celebrate the 10th anniversary of the Auxiliary. It was such a success that another ball was planned for the 15th anniversary. Proceeds from the ball in 1967 will go toward the support of the new 16-Bed Jewish Hospital Auxiliary Medical Special Care Unit.

The celebration will include a cocktail hour, dinner and dancing. The orchestra will be announced at a later date. Ticket prices are the same as for the first ball: $50 per person; $250 a couple for patrons.

Auxiliary Spring Meeting To Be Held April 20
The Auxiliary will hold its annual Spring Meeting on Wednesday, April 20, at Temple Israel, as announced by Mrs. Edwin G. Shifrin, president.

Miss Selma Diamond, renowned writer and television personality will be the featured speaker. Miss Diamond has been for numerous screen personalities including Groucho Marx, and was recently heard as the voice of Spencer Tracy’s wife in the film production of “Mad, Mad World.”

She has written for numerous screen personalities including Groucho Marx, and was recently heard as the voice of Spencer Tracy’s wife in the film production of “Mad, Mad World.” A woman of tremendous wit, Miss Diamond’s popularity makes her a stranger to the public.

After a “petit luncheon,” installation of two new officers will take place, and the results of the fund raising services will be read.

Members of the Program Committee include: chairman, Mrs. Donald G. QuickSilver, Mrs. Joseph Berger, II, vice-president of membership services; Mrs. Stanley Cohen, community relations chairman; Mrs. Eugene Glick, hospitality chairman; Mr. Robert L. Hausfater, Mrs. Meyer Farkas, Mrs. Mildred Routman and Mrs. David Sher.

$25 Attend Career Day
“What is nursing?” “What does a nurse do?” These are some of the questions that were asked and answered when 25 invited students (sophomores and juniors in high school) attended a Career Day sponsored by the Jewish Hospital Department of Nursing and the Board of Directors Committee on Nursing.

The program was held from 1:30 p.m. to 4:30 p.m. on Saturday, March 5 in the School of Nursing. A tour of the residence and the hospital was followed by round table discussions with nursing students and staff answering questions from the girls.

A film, “Why You Choose Nursing,” was shown to the group. It was followed by a tea at 3:30 p.m.

Members of the planning committee included: Mrs. Jack Gold- man, Board of Directors Nursing Committee and chairman of Career Day; Miss Margaret Lorig, Director of Nursing; Miss Laverne Ryker, Director of Nursing Education, Miss Helen Wohltor, R.N.; Miss Elsie Delap, R.N.; Mrs. Dorothy Fuszer, R.N.; and student nurses Misses Carol Eaker, Donna Allford, and Sandra Pekel.

Special Gifts
Mr. and Mrs. Kirby B. Westheimer, son and daughter-in-law of Mr. and Mrs. B. H. Westheimer, recently donated a large collection of imported prints and lithographs to the Hospital in honor of his parents’ 30th Wedding Anniversary.

The Hospital has received $2,500 from the estate of Maurice Posser.
DR. DONALD J. DICKLER (right) and a friend, Albert Schweitzer (left) and Ralph Aberle take a trip out during their visit to the top of the Gateway Arch. This unusual trip is no longer possible.

**Dr. Dickler Sees View from Arch**

Lately Donald J. Dickler, M.D., has been on the top of the world — in St. Louis, that is. Not only has he seen the view from the Jefferson National Expansion Memorial Gateway Arch, but he also has been nominated the president of the St. Louis Society of Anesthesiologists for the coming year.

How did a doctor who knows more about his native Brooklyn Bridge happen to journey to the top of the Gateway Arch? One of Dr. Dickler's friends, Albert Schweitzer, an artist for the St. Louis Post-Dispatch, was given an opportunity to join Ralph Aberle, a supervisor for the construction team, and others for this special trip. Mr. Schweitzer knew that Dr. Dickler was an avid photographer, and thought he would be able to take some memorable pictures. (Dr. Dickler has had an interest in photography since he was a boy, and some of his work during college years at New York University won prizes.)

The three men and photographer, Bob Arteaga, took an elevator up to 570 feet; then they climbed up to 630 feet on a narrow steel ladder bolted to the side of the Arch.

"It was a fabulous and unusual experience, and one which is no longer possible. Everyone who has seen the color slides has developed a remarkable appreciation and new perspective of the Arch," Dr. Dickler said about his trip.

As an attending staff associate at Jewish Hospital, Dr. Dickler is a member of a team of four anesthesiologists and one Fellow in the division of anesthesiology. Dr. Dickler received his M.D. from New York University College of Medicine, and served an internship at City Hospital in New York. After two years in service, he was a resident in anesthesiology at the Halbanon Veteran's Administration Hospital and at the Jewish Hospital of Brooklyn. Before coming to St. Louis, he practiced anesthesia at the Jewish Hospital of Brooklyn for several years.

Dr. Dickler has been married to the former Lillian Cronson for almost 23 years. They have three sons: Jeffrey, 19; Howard, 17; and Andrew, 13. Some time each summer the family can be found boating and fishing at their country home in Sharon, Conn. On Indian Lake.

**The Middle Ear Problem Needs Proper Treatment**

When some children develop persistent head colds, fluid collects within the middle ear. If the condition is not treated properly, the membrane can change from its non-glandular state and develop mucus-forming glands similar to those living in the nose.

"Once this membrane is allowed to change, every time the child's nose runs, fluid forms in the ear. In other words, his ear gets the 'sniffles,'" Dr. Ben H. Senturia, director of the department of otolaryngology, recently told members of the International Medical Assembly of Southwest Texas at their 30th annual session in San Antonio, Texas.

The normal middle ear, he explained, is lined with a simple membrane which contains no secretory glands. The development of the mucus-forming glands in the membrane is a disorder which can be caused by many forms of irritations including bacterial infections, blisters or the standard allergic states.

Whether it results from a head cold or any of the other irritants, fluid in the middle ear usually causes a slight loss of hearing and an uncomfortable "stopped up" feeling before it drains out of the Eustachian tube into the throat, or is absorbed.

In a small percentage of cases where the fluid does not drain off, gland-containing membranes are formed and at first a reversible hearing loss is caused. If it is allowed to persist for an indefinite period, permanent damage to the ear occurs.

**Fluid Problem**

"The normal middle ear has long been a problem for study by ear-nose-throat specialists; however, no one has really understood the problem of fluid in the middle ear," Dr. Senturia said. Dr. Senturia first observed the change of membrane character in laboratory animals. More recently, the occurrence has been noted and photographed in tissue removed at the time of mastoid surgery to correct the disease. Now, the change in determining through laboratory studies what will induce the mucus glands to change back to the former simple construction before the condition becomes chronic or produces irreversible damage. Until a cure can be found, the only answer is prevention of this unusual middle ear disorder.

"Stopped Up" Ear

Dr. Senturia urges parents to take their children to see a physician whenever the "stopped up" condition is present. "If there isn't something to be cured with five grains of aspirin... and it isn't cleared over the phone," Dr. Senturia said.

The surgical procedure to remove the fluid in the middle ear is a simple one, he said.

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**Youth Corps Hard at Work**

For more than three months, Jewish Hospital has been participating in the Neighborhood Youth Corps In-School and Out-of-School Program. The groups have been rolled into the work training program.

A federal program sponsored by the Human Development Corporation, the Neighborhood Youth Corps includes young men and women from low income families who have dropped out of school or graduated from high school but have been unable to find employment; or those who need to earn money in order to stay in school.

The first group (Out-of-School) can work a maximum of 32 hours per week; the second group can work up to 12 hours per week.

The Human Development Corporation, which sponsors the Corps, is a non-profit organization designated by the city and county supervisor to serve as the primary coordinating agency for anti-poverty programs.

Youths were selected and are being paid by the Youth Corps. Wayne Fleisch is work supervisor for the Out-of-School; John Nathan is work supervisor for the In-School program.

They worked with Mrs. Mabel Howell, administrative resident, and William Chiles, personnel director, to evaluate enrollees in their skills and potential work habits.

In close coordination with Hospital supervisors, the 36 workers were placed in 10 departments. Hospital supervisors evaluate the Corps workers twice each month; the Youth Corps has a monthly evaluation. There are two hours of counseling each week on the workers' own time.

The Youth Corps is filling a need in the community: they enable the Hospital to test new types of programs, while not replacing Hospital employees. The Hospital benefits by preparing the Corps workers twice each month; the Youth Corps has a monthly evaluation. There are two hours of counseling each week on the workers' own time.

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**Annual Report**

The 1965 Annual Report has recently been published, and is now being circulated to the many friends of the Hospital. Included in the 20-page report are the financial statements, statistical tables, listing of the medical staff, and a review of the activities of the Hospital for the 1965 year.

A new section has been incorporated into the book this year to include a listing of benefactors.
Team Discovers New Endocrine Disease

The discovery of a new endocrine disease will be presented in April at the annual meeting of the American College of Physicians in New York by Dr. Marvin E. Levin, Jewish Hospital attending physician and president of the St. Louis Diabetes Association.

A medical research team from Washington University School of Medicine has discovered a new hormone-producing tumor of the pancreas. The team consists of Dr. Levin, F.A.C.P.; Dr. Lilian Recant; Dr. Charles Kilo (all from the Departments of Medicine and Preventive Medicine); and Dr. Malcolm McGavran.

A.D.A. Approves Dental Residency

Jewish Hospital has been approved by the American Dental Association for a residency in general dentistry, as announced by Dr. Calvin H. Weiss, director of the hospital's Department of Dentistry. This is the first residency in general dentistry in the country to be established in a private, voluntary teaching hospital.

The new residency in general dentistry is an extension of Jewish Hospital's current dental intern training program of which Dr. Jerome Grosby, senior dentist, is coordinator. Members of the intern curriculum committee include Dr. Simon L. Baumgartner, Dr. Grosby, Dr. Herman Turner, and Dr. Weiss.

The establishment of the dental residency at Jewish Hospital points up the rapidly growing importance of dentistry in a hospital environment. The present time, fewer than one third of the nation's hospitals have departments of dentistry. The Hospital's Department of Dentistry was established in 1948. It was approved by the American Dental Association for a dental internship in 1954, and is now one of only 201 hospital dentistry departments in the nation with a dental internship or residency program. There are two rotating dental interns in the program at the Hospital.

from the Department of Pathology. A distant but vital member of the team was Dr. Roger Unger, Department of Medicine, Southwestern Medical School in Dallas who confirmed through chemical assay the findings of the St. Louis group.

Two Major Cells

The endocrine tissue of the pancreas consists of two major types of cells: the beta cell which produces insulin, the hormone which lowers blood sugar, and the alpha cells which produce a hormone called glucagon, which raises the blood sugar. Many beta cell tumors producing excessive amounts of insulin have been previously demonstrated. Although the possible existence of an alpha cell tumor secreting abnormally large amounts of glucagon has long been suspected, it has never been previously demonstrated.

Recent evidence with diabetes was found to have a malignancy alpha cell tumor of the pancreas. This association prompted the investigators to assay her blood and the tumor for glucagon which was indeed found to be present in very high quantities. Measurements of glucagon in this case were done by Dr. Roger Unger at the Southwestern Medical School in Dallas.

Detailed Studies

Detailed studies by the biochemical studies in this patient have so far proven this to be the first case of a person secreting tumor and thereby establishes the existence of a rare endocrine disease.

The association of diabetes with this tumor, it was pointed out, may be coincidental as any malignancy especially of the pancreas can result in diabetes. However, it seems highly suggestive that a tumor producing large quantities of a hormone which raises blood sugar might well be another rare cause for the development of diabetes.

By describing the clinical, pathological, and chemical responses in this patient, it is hoped that other physicians will now be stimulated and guided in a search for additional such glucagon secreting tumors.

A new Sabbath Card has been designed as a reminder to all patients, visitors and staff members of their invitation to attend Jewish Sabbath services at the Hospital. The card was designed by Sounders Schultz, a St. Louis artist. It contains hands to express the benediction; candles for the Sabbath; a twisted figure which represents Challah (Sabbath braided); an inverted Hebrew letter (Shin); and in the black background is the Kiddush Cup.

Services are held from 10:30 a.m. to 11:00 a.m. each Saturday in the first floor chapel and are conducted by Rabbi Lawrence Siegel, the hospital chaplain.