Mr. & Mrs. Edison Establish $10,000 Unrestricted Fund

Jewish Hospital received an endowment gift of $10,000, and Mrs. Harry Edison, according to Joseph F. Rawitch, president of the hospital.

The donation will be used to establish the Mae and Harry Edison Unrestricted Endowment Fund. This contribution is especially significant with funds slated for the hospital unrestricted endowment program...the major source of income for the outstanding medical projects which are now being developed.

Mr. Edison, chairman of the board and treasurer of Edison Brothers Stores, Inc., is well-known in St. Louis for his business activity, civic and philanthropic endeavors.

He has been on the Jewish Hospital board of directors for many years, and was an original sponsor of the hospital newspaper.

The Edison families have long continued to support the building, research, and educational projects of Jewish Hospital. As a tribute and in honor of Mrs. Mae Edison's parents, Tillie and Max Goodhart, a contribution designating two rooms in their memory was made, and a bronze plaque commemorating their memory was so established.

Another outstanding contribution by the Edison families were gifts during the capital funds drive, totaling $114,461. These funds were used to help establish the Jewish Hospital heart station. The heart station was dedicated in memory of the five Edison Brother's parents, Sarah and Aekam Edison.

Mrs. Ira Simon Continues Annual Gifts To Hospital

A gift of $12,000 was presented to Jewish Hospital Development by Mrs. Ira Simon. This latest in a series of annual gifts was donated to the Ira and Herbert Simon Research Fund established in memory of Mrs. Ira's late husband and his brother, Herbert Simon, late husband of Mrs. Mildred Simon. The fund, first established at Jewish Hospital in 1960 with grants totaling $18,000, has grown to a total of $132,000 by the end of 1964.

This resource for unrestricted research was established by members of the Simon family to be used for the study and treatment of cancer, mental and nervous diseases, or any other diseases which the Research Committee of the Hospital Board of Directors may approve.

Pilot projects which have already been approved by the Research Committee under terms of the fund include: a study to determine the reasons why miscarriages result in women with psychiatric problems; and a study to analyze some of the biochemical characteristics of the skin to determine how to make skin grafts grow more rapidly. The latter study will also supply information about factors influencing skin cancer.

In support of her ongoing support, Mrs. Simon, the former Laura Hartman, exemplifies a woman of generosity and kindness.

"She is endowed with foresight as well as under-standing in recognizing the value of scientific research to humanity. After having gone through the pain and agony of caring for her husband, who was afflicted with cancer, she has chosen this important way of perpetuating her memory. Laura Simon is a vivacious, well-liked woman, considerate of her family, friends and the community."

MRS. IRA SIMON

Shoenbergs Contribute To Hospital Development

(The following story is one of a series in which will feature individuals or families who have influenced the hospital's development through the years. Without their continuing interest, guidance and support, Jewish Hospital could not have produced the present program of patient care, research and education.)

Moses Shoenberg and his descendants:

On June 9, 1929, the Moses Shoenberg School of Nursing was dedicated at 306 South Kingshighway. A gift of $300,000 was given by Mr. Shoenberg's widow, Dolly, and her only son, Sydney, made possible the construction of a nurses residence and school of education. The building was dedicated and hailed as "one of the most modern and efficient homes and nursing schools in the country."

"This building", said Dr. Frank H. Virette, editor of Funk and Wagnalls, and a speaker at the dedication, "typical of the spirit and high ideals of the Shoenberg family." Moses Shoenberg and his descendants have displayed a continuing philosophy of concern for Jewish life and education.

Moses Shoenberg was one of the original benefactors to the Jewish Hospital in 1901. Following in his footsteps, Sydney M. Shoenberg not only served as chairman of the nursing school building, but by 1951, had given a total of $700,000. $100,000 was given to the building fund in 1951, which contributed to enlarging the hospital by 200 beds. He donated an additional $100,000 in 1952 to enlarge and modernize the X-ray department in memory of his mother Dolly, who died February 28, 1940.

In October, 1959, a second residence for nurses was opened at 4949 Forest Park Boulevard, made possible by another Shoenberg gift of $600,000. This donation for 47 nurses will continue to be used in conjunction with the main residence, until the new nursing addition is completed in 1966. During the last capital fund drive the Shoenberg family gave $250,000. From 1920 through 1964, they have contributed a total of $1,365,614.

Moses Shoenberg died in 1925 at the age of 73. Called the Merchant Prince, he achieved this title by serving as one of the founders of the May Department Stores Co. He was active as vice-president in the business until age 69. Born in Dayton, Ohio, he started his first business, a small haberdashery, at the age of 22.

Shortly after, he went to Leadville, Colorado where he joined his brother-in-law, David May to establish a firm known as May and Shoenberg.

In 1892, he came to St. Louis and purchased the "Famous" store; then the D. Crawford and Company; and later the William Barr Dry Goods. This was the beginning of the May Department Stores Company chain.

In addition to his department store activities, he also founded the Eagle Discount Stamp Company, and was Chairman of the Board of the Commercial Investment Trust, Inc. of New York, a noted Maloney Electric Company stock, and a director of the First National Bank of St. Louis. He was president of the Federation of Jewish Charities of Temple Israel, and was a director of Jewish Hospital, the Jewish Sanatorium (to which he contributed a building) and the Columbian Club.

He was a member of the staff of Governor Hadley of Missouri.

MRS. IRA SHOENBERG

Seymour M. Shoenberg

His wife was the former Dolly Rem
heimer of Quincy, Illinois.

In the same family tradition, Sydney M. Shoenberg is a vice-president and a director of the May Company, director of the First National Bank and the St. Louis Union Trust, a director of CIT Corpora-
tion, and a member of the firm, Sydney M. Shoenberg and Company.

Formerly, Mr. Shoenberg served as a director on the board of the Y.M.H.A.

As a staunch supporter of the Jewish Hospital and member of the hospital board of directors in 1923, he observed, "I owe a duty to my less fortunate brother... how can any thinking person who enjoys the blessings of health go through a hospital without feeling of thankful-
ness at his own good fortune and a corre-
responding obligation to make things a little easier for those wracked with pain. And if that individual is fortunately endowed with more than his share of the world's goods, how can he resist the im-
pulse to give a small part of his surplus wealth to provide additional and more comfortable quarters for this work."

In 1946 he was elected to the City Art Museum Board of Control. As a bene-
factor of the arts, he donated many im-
portant paintings and sculptures by Utrillo, and Raeburn.

Sydney M. Shoenberg and his wife, the former Stella Hays, have three sons, Syd-
ney M., Jr., John M., and Robert H.

Both Sydney M., Jr., and John serve on the Jewish Hospital Board of Directors. John was President of the Board from 1958 to 1963 and is now a Life Member of the board. In addition, he has served on the board of the St. Louis United Fund, the Jewish Federation, the Jewish Sanatorium, the Neighborshood Association, and has been active in the National Conference of Christians and Jews, and the Planned Parenthood Association.

Sydney M. Shoenberg, Jr., was active and served as treasurer in a St. Louis Uni-
iversity campaign drive. He also served for the Community Chest Board and is a former director of the Jewish Federation and the Y.M.H.A.

Robert Shoenberg is vice-chairman of the Red Cross, a director of the City Art Museum, and a board member at the St. Louis Art Museum.

The three brothers are associated with their father in the investment firm of Sydney M. Shoenberg and Company in the Downtown's National Bank Building.

Jewish Hospital is grateful for and proud of their continuing association with the outstanding Shoenberg family of St. Louis.
Miss Dorothy Schmidt

Anesthetist Helps Department Grow During Her 20 Years at Hospital

“When I came to Jewish Hospital in 1945, there was one nurse anesthetist,” said Miss Dorothy Schmidt, chief nurse anesthetist who began her 20th year at Jewish Hospital last month.

“In 1946, when I was made chief anesthetist, we were left with just two girls in the department. For the first year, we went without vacation and were on call every other night and every other weekend, with no day-off afterwards.

“Very patiently I worked to add more people to the staff so we could have a day off after call. Each year there were more.

“When we had four surgery rooms, we needed five people. In 1965 we moved into a new surgery wing. At one time we had 10 nurse anesthetists, one for each of eight operating rooms, one off and one supervisor.

“Dr. David Littauer, then executive director, always gave me encouragement to go ahead—to get the most up-to-date equipment. With the confidence he had in me, the department was able to grow.

“There is a special satisfaction in working with good staff and good equipment.

“We have always been fortunate in securing good anesthetists. I feel that the standards of the hospital made a good impression.

“Today in the United States, there are over 12,000 anesthetists. Since 1965, we have added 30 other schools for nurse anesthetists. I had my training at Lakeside Hospital, Cleveland, Ohio, which is connected with Western Reserve University. Founded in 1933, it was the first school for nurse anesthetists in the United States.

“Do you know how I became an anesthetist? Dr. Samuel D. Soule, obstetrician, was instrumental in this. I had been in nursing for about 5 years. Dr. Soule asked me if I’d ever thought of becoming an anesthetist. He said, ‘there’s a wonderful profession waiting for you at Jewish Hospital. Why don’t you call her and ask where she got her training.’

“Well, I never did call her, but I didn’t have too. Dr. Soule came back several days later and said, ‘she got her training at Western Reserve University. Why don’t you find out when classes start.’

“A friend and I were accepted in May that year for the eight month course. Now, by the way, that same course takes 2 years.

“Miss Florence King, Jewish Hospital’s administrator at that time, came to Cleveland to an American Hospital Association meeting. She only needed one anesthetist, but because she had been so happy with her first Western Reserve graduate, she took two of us.

“When I came to Jewish Hospital, we had a two-month rotation of students. That term patients was first carried out by Dr. E. M. Bluestone who started a program in 1947. In the past seventeen years, home care programs have enjoyed varying degrees of success throughout the United States. As many as forty programs have been organized in conjunction with hospitals and nursing homes.

“At an out-of-hospital service, this coordinated program has added a new dimension to patient care. Now persons encumbered with financial strains resulting from long illnesses, can have comparable medical and para-medical services in their own home at a fraction of the hospital costs.

“In addition to the economic factors, many patients have illnesses which can be treated at home from the standpoint of medical, social, and psychological needs.

“The Home Care Program of Jewish Hospital is entering its twelfth year of successful operation as one of the pilot projects in the United States. The program is a major division of the department of Long Term Care, directed by Dr. Franz U. Steinberg.

“Organized in 1953 under the direction of Dr. David Littauer, then executive director of Jewish Hospital and Dr. L. Jerome Flame, it was initially designed to care for twenty-five patients in their homes. At the present time, the program has more than doubled—providing home service for an average of fifty-eight patients who receive 20,000 days of care annually.

“The concept of home care for long-term patients was first carried out by Dr. E. M. Bluestone who started a program at Montefiore Hospital in New York City in 1947. In the past seventeen years, home care programs have enjoyed varying degrees of success throughout the United States. As many as forty programs have been organized in conjunction with hospitals and nursing homes.

“The unique Tri-Pan camera, invented by George Fischer, Centurion Products, Inc. is controlled from a small console that also contains the controls for the zoom lens, the two-way audio and the camera controls (brightness, contrast, focus) thereby enabling the instructor to line up the exact area and angle he wants and to magnify it up to 50 times or more. TV monitors have been installed in the surgeon’s control room. Upon completion of the new Steinberg Auditorium amphitheatre, additional equipment, a television projector, will be installed so an operation can be shown on a 400 square foot screen.
Musical Planned for Auxiliary Annual Meeting

Singing and dancing members of the Women's Auxiliary are invited to tryout for the original musical to be presented at the annual meeting, Tuesday, April 27, at the Meadowbrook Country Club.

Tryouts for actors, singers, dancers, prop crew and costumers will be at 10 a.m., February 17, at Temple Israel, 10675 Ladesie Road.

Mrs. Donald Quicksilver, is author of the show.

Co-directing the show are Mrs. Quicksilver and Mrs. Samuel Schenberg; with Mrs. Charles Sohier, choreographer; Mrs. Al Selkis and Mrs. Gene Schneider, producers; Mrs. Kenneth Fenso, costume supervisor; Mrs. Harold Lazartoff, property chairman, and Mrs. Millard Routman, scenery designer.

Babies Saved
By Prediction
Of Amniotic Tap

"Amniotic tap," recently instigated at Jewish Hospital by the departments of obstetrics and laboratories, under the supervision of Dr. Daniel Rosenstein and Dr. Phillip Goldstein, it balancing the dangers of erythroblastosis, or Rh incompatibility, against those of prematurity.

Rh incompatibility usually affects children of Rh-negative women, married to Rh-positive men, who have become sensitized to Rh-positive blood during their previous pregnancies. The production of hemolysing antibodies grows worse from one pregnancy to another.

Conventional postnatal blood exchange transfusions will save some of these children. Some can be saved by premature delivery. Another group are so severely affected so early that they couldn't possibly be saved by premature delivery.

Performed in the seventh and eighth month of pregnancy, the amniotic tap can accurately predict which babies will live to birth, which are anemic but can survive to birth, which are anemic and will die, and which will die.

The transabdominal tap is made on the mother to withdraw a specimen of the amniotic fluid surrounding the threatened fetus. Because hemolysis of fetal cells increases the concentration of hemoglobin breakdown products in the fluid, analysis of its optical density by spectrophotometry can show severity of fetal anemia. Thus, the obstetrician knows whether to induce the baby before his normal term.

The next step, still in the experimental stages, is to institute intravenous transfusions to tide the baby over until it is mature enough to survive outside its mother's womb.

Arteries, Veins, Brain Studied
With New X-ray Techniques

"We are diagnosing more patients illnesses in radiology than ever before," said Dr. Hyman Senturia, director, department of radiology, "because of new techniques which provide information not readily obtainable by any other method."

It is now possible to inject solutions into arteries and veins which make these structures opaque to X-ray.

"In fact, the greatest advances in radiology at the Jewish Hospital are being made in blood vessel diseases." For example, those patients who have difficulties with the circulation in their legs can be fully studied by these techniques, which will determine if and where a blood vessel is blocked or narrowed, what the cause of the changes are and what can be done to correct the difficulty.

"To use another example, certain diseases of the brain can best be studied after the injection of radio-opaque solutions into the vessels of the neck which are distributed to the brain. In this way, tumors, blood clots and malformations of blood vessels can be detected. The so-called "small stroke" can be studied in this way when it first occurs and when corrective surgery can be done.

"Other techniques have been developed with the use of radioactive isotopes. These radioactive materials locate themselves in a certain organ of the body and their presence is detected by a signal which is given off by the radioactive element."

"For example, a certain isotope, when injected into an arm vein, will be selectively concentrated in the brain and by mapping the signals which the isotope releases it is possible to detect and localize disease processes such as tumors or blood clots. Many body organs can be studied this way, such as the liver, kidneys, pancreas, lungs, and thyroid and the skeleton to provide both anamnestic and x-ray films for patients who cannot be operated upon.

"Examination of the breasts using X-ray, or "mammography" requires a special X-ray tube and super-sensitive film, but is a valuable aid to the physician in diagnosis of obscure breast diseases. Breast cancers, cysts and areas of inflammation can be diagnosed in this way with a minimal radiation exposure to the patient, while the usual methods of study leave doubt as to the correct diagnosis.

"Also, during 1965, equipment will be installed which will permit motion studies of various organs in the body, swallowing, the beating of the heart, and moving joints will be recorded on movie film and studied on the projection screen. In this deliberate way, malfunctions and dynamic disturbances can be studied. The use of moving pictures to study dynamic functions of the body is dependent on the development of the image intensifier, an electronic tube capable of brightening the fluoroscopic image 3000-4000 times.

"The familiar Polaroid rapid film processing has found a place in X-ray diagnosis; in the radiation therapy section, the Cobalt source which is used for its gamma rays can provide another aid. The original source of gamma radiation was provided by a gift of $35,000 from the Women's Auxiliary, but, as with all radioactive materials, it decreased in strength after almost 5 years of use. The replacement, a fresher, stronger source, has reduced the treatment time, but the quality of the gamma ray emitted is unchanged."
Contributions to Jewish Hospitals Funds

CONTRIBUTIONS RECEIVED ARE USED FOR RESEARCH, APPLIANCES FOR CLINICAL PATIENT CARE, NEW EQUIPMENT, AND OTHER WORTHY UNDERTAKINGS, SPONSORED BY THE JEWISH HOSPITAL AUXILIARY.

(THIS CONTRIBUTIONS ARE RECEIVED DURING PERIOD DECEMBER 1, 1964 TO JANUARY 31, 1965. (CONTRIBUTIONS TO THIS FUND MAY BE MADE BY SENDING CHECKS, PAYABLE TO THE JEWISH HOSPITAL TRIBUTE FUND TO MRS. HENRY H. STEINBECK, 630 WATERMAN AVENUE, ST. LOUIS 30, OR MRS. JOSEPH F. RUWITCH, 102LAKE FOREST, ST. LOUIS 17.)

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ALEXANDER CARAFOLI

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Mr. and Mrs. Carl D. Black

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Mr. and Mrs. Sam Rubenstein

Mr. and Mrs. Edward F. Schweich

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Dr. and Mrs. Leon Foster

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Mr. and Mrs. Harold Dubinsky

Mr. and Mrs. Sidney Mathes

Mr. and Mrs. Joseph F. Ruwitz

Mr. and Mrs. Arthur H. Slonim

Mr. and Mrs. Harold Dubinsky

Mrs. Rose Klamon

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Mrs. Rose Klamon
Dr. Morton D. Pareira Calls Transplantation
Most Challenging Problem in Surgery

(The Jewish Hospital Department of Surgery, in conjunction with the Department of Surgery, University of Missouri Medical School, has formulated an extensive report on the promotion and development of transplantation biology. This program has been projected as a means for a major breakthrough in transplantation biology, which will then be adapted for clinical transplantation. On completion of the new Yale Research Building, the program will be devoted to transplantation research; this will be coupled with a program to train personnel in transplant techniques.

The following article is the first in a series of three, prepared for 216 by Dr. Morton D. Pareira, Jewish Hospital surgeon-in-chief, who is directing the research and is the author of the history of transplantation biology, concluded; and the final article will outline the program to be carried on at Jewish Hospital.

Q: Dr. Pareira, can surgical transplantation be done successfully today, and just what will it mean in relation to diseases such as cancer?

A: There is no more challenging problem today to the patient and surgery in particular, than the possibility of successful transplantation of tissues and organs. This is not yet possible except in the case of paired organs in identical twins, who are a very rare circumstance. We can indeed, investigate into the mechanisms which underlie the rejection by one individual of the cells of another lead the investigator into the realms of immunology, biochemistry, bio-physics, embryology, tissue culture, radiotherapy, cryobiology, anatomy, and moral philosophy. Understanding of this mechanism offers enormous promise not only in the fields of organ transplantation but also in the closely related fields of the origin and treatment of cancer and of those disease processes that are inherited, of which transplantation (and, also longevity) in mammalian species include man.

Q: Who will do this work?

A: A practical solution to the problems of transplantation must be made by surgeons who have been trained in, and are working in, the field of transplantation biology in concert with basic science investigators working in the same field because surgeons, in the final analysis, not only possess the technical skills required to accomplish organ grafting but also are confronted daily with grief, sorrow, and death resulting from the present inability to transplant successfully from man to man.

Q: And are there groups like this presently at work?

A: This type of task force approach by a combined group of such individuals is not being made in this, or any, contemporary surgical endeavor. Such is the desire of most surgeons, and the attempts by many, to achieve the final goal by assorted means (all of which have been unsuccessful) rather than by knowledge and understanding of replacement biology, and the resultant distrust of the clinical surgeon by the basic transplantation biologist. Currently, innumerable research grant requests are pursuing the fields of transplantation biology, submitted to federal agencies by clinical personnel, are being summarily rejected because of the lack of substantive backgrounds of these individuals and groups in transplantation biology.

Q: Just for background, doctor, how did all this get started?

A: The transplantation of living cells from one individual to another is not a natural event. Indeed, from time immemorial the function of portioning of the body occurred in different individuals considered the special province of supernatural forces (or devils inspired) or of the remarkable qualities that might be expected to be found in contrary conditions. These perversities normally beyond the power of the single species. The preoccupation of the ancient world with such perversions is certainly great so that the modern work is not as far from the ancient work as might be expected. For the grafting of skin from the main stems of limbs of sphinges and other beasts, fashioned in metal or stone by forces or deities inspired by dreams and not by the craft of their own accomplishment. The reason for this lack of homograft survival was not understood in the early 1940's. Earlier recognition of the fact of inevitable homograft rejection had been obscured (1) because of the early death of the laboratory animal (or burned human) from "other causes"; (2) because of failure to follow-up of transplants in laboratory animals; or (3) because rejection of organs in homograft animal was considered to be failures of surgery by technique. This is an example of how truly modern "modern medicine" is.

Q: Then the first so-called "successes" were not actually such, were they?

A: Skin "homografting" (grafting from one human to another) was practiced throughout World War I and on into the early part of World War II before it was realized that homografting (as opposed to isografting in which portions of a single individual's tissues, skin for example, were removed from one portion of his body and transplanted to another body) was never successful.

The reason for this lack of homograft survival was not understood in the early 1940's. Early recognition of the fact of inevitable homograft rejection had been obscured (1) because of the early death of the laboratory animal (or burned human) from "other causes"; (2) because of failure to follow-up of transplants in laboratory animals; or (3) because rejection of organs in homograft animals was considered to be successes of surgery by technique. This is an example of how truly modern "modern medicine" is.

A: This is where the matter stood a mere twenty years ago and, except for some better understanding of the fact that workers in this field were elaborating principles or transplantation biology more than principles of tumor growth.

Q: How far have we come since then?

A: This was the matter that I have heard an abstract presented at a meeting in Chicago, in 1964, which has been summarized in a report of the American Otological Society, Inc., which is a monthly publication in the field of otolaryngology.

Q: But I thought before that you said this wasn't successful?

A: Skin "homografting" (grafting from one human to another) was practiced throughout World War I and on into the early part of World War II before it was realized that homografting (as opposed to isografting in which portions of a single individual's tissues, skin for example, were removed from one portion of his body and transplanted to another body) was never successful. The reason for this lack of homograft survival was not understood in the early 1940's. Early recognition of the fact of inevitable homograft rejection had been obscured (1) because of the early death of the laboratory animal (or burned human) from "other causes"; (2) because of failure to follow-up of transplants in laboratory animals; or (3) because rejection of organs in homograft animals was considered to be failures of surgery by technique. This is an example of how truly modern "modern medicine" is.

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LISTENING TO DR. ROBERT BURSTEIN explain the purpose of the electrophoresis unit are, from left, Mrs. Donald Rubin, past president, Mrs. Fred Weinstein, research chair- man, and Paul Gallant, president of the Life-Seekers. Formed 16 months ago, the 70-member group holds rummage sales, bowling parties and other fund-raising projects, to purchase lifesaving equipment for research projects.

Ravitch - Distinguished Surgeon - Selected For First Probstin Visiting Professorship

Dr. Mark M. Ravitch, surgeon-in-chief, Baltimore City Hospitals and associate professor in surgery, Johns Hopkins Hos- pital, has been chosen as the first visiting professor under the J. G. Probstin Visiting Professorship of Surgery. Dr. Ravitch will be at Jewish Hospital March 8 - 10 for formal lectures, case presentation ses- sions, working rounds, and press confer- ences. All St. Louis medical personnel are invited to hear Dr. Ravitch.

The visiting professorship was estab- lished in 1964 by a $15,000 gift from Mr. and Mrs. Leon J. Leonson as a tribute of friendship and appreciation to Dr. Probstin, Jewish Hospital senior surgeon. The committee designated to choose the visiting professor includes: Dr. Probstin; Mrs. Naomi Wagner, daughter of the Leon- sons; Dr. Morton D. Pareira, surgeon-in- chief, and David A. Gee, executive direc- tor.

Dr. Ravitch, a nationally distinguished surgeon, received his undergraduate degree from the University of Oklahoma where he was elected to Phi Beta Kappa. In 1934 he received his medical degree from Johns Hopkins University School of Medicine and was a member of Alpha Omega Alpha.

During his internship and residency at Johns Hopkins, he was selected as an Honorary Fellow in Surgery, a position held by William Stewart Halsted Fellow in Surgery. He is a fellow in Surgery, qualified for cer- tification from the American Board of Surgery and in 1952 from the Board of Thoracic Surgery.

He was an honorary associate consult- ing surgeon at Guy's Hospital, London, 1949, recipient of the scientific medal of Vishnevsky Surgical Institute, Moscow in 1961, and was a visiting professor, Wash- ington University School of Medicine in St. Louis, 1961.

Of local interest, he delivered the Hod- gen Lecture, St. Louis Surgical Society in March 1960 and the 11th Annual Barney Brooks Lecture at Vanderbilt University in 1964.

Dr. Ravitch received special appoint- ment to the National Institutes of Health, Surgery Study Section, 1962-65.

His societies include: American Surgi- cal Association, American Association for Thoracic Surgery, Society for Vascular Surgery, Surgical Biology Club, American Association of Pediatrists, and Surgical Section, among others.

Dr. Ravitch served as associate editor for Surgery, editor of Current Problems in Surgery, editor of Pediatric Surgery Monographs, consultant to Current Med- ical Digest and on the editorial board of Rambam Medical Journal.

In addition to his numerous activities, he is well-known for his interest in the history of surgery and will be discussing this on an informal basis with members of the hospital staff during his visit.

Life-Seekers Give
Electrophoresis Unit To
Ob-Gyn Department

A $2000 electrophoresis unit, given to Jewish Hospital by the Life-Seekers, a young women's organization dedicated to aiding research, is being used by Dr. Robert Burstein and the department of obstetrics for original research into possi- ble allergic reactions in pregnancy.

From previous studies done in the de- partment of obstetrics, Dr. Burstein, de- veloped the theory that the mother may exhibit an immune or allergic reaction to her developing pregnancy. Complications in pregnancy may stem from these re- actions.

Since it is known that certain protein components in the blood plasma reflect allergic reactions, the electrophoresis unit, which analyzes these substances, will be used to establish patterns in normal and abnormal pregnancies.

It is hoped that by comparing a preg- nant woman's plasma protein components with the established norms, impending ab- normalities in pregnancies can be de- tected before the clinical signs of com- plications are noticed and pregnancies salvaged.

Tenenbaum Leaves
$10,000 to Hospital

A bequest of $10,000 was left to Jewish Hospital by Harry Tenenbaum, co-founder of television station KTIV, Channel 2, and president until his death December 7, 1964.

He and his business partner, Paul E. Peltason, sold KTIV last April to the Newhouse Broadcasting Corporation. The station was sold because of the illness of Mr. Tenenbaum. Mr. Peltason is still active as an executive of KTIV.

Pareira Receives Letter

The following letter, received by Dr. Morton D. Pareira, surgeon-in-chief, is from one of his former students, Andrew McCance.

Dr. McCanse was co-chief resident at Jewish Hospital, 1960-61, along with Dr. Charles Dort, Jr.

Presently, Dr. McCanse is in private practice in Kansas City, Missouri, and is continuing to offer his services in med- ical education:

Dear Doctor Pareira:

Enclosed is the picture of the plaque I received last June, as one of four attend- ing staff members in the various depart- ments so honored. For the preceding three years, I held a weekly conference with the surgical house staff which included the Surgical Journal Club and case pres- entations. In addition, I served on the Surgical Curriculum Committee and was in charge of the scientific presentations at the surgical staff meetings for St. Luke's Hospital.

At the present time I am actively en- gaged in the teaching program at Kansas City General Hospital and Med- ical Center and spend about 150 to 200 hours per year at that hospital. Kansas City General has the only approved four year surgical residency program in Kansas City, excluding the University of Kansas Medical Center, Kansas City, Kansas. This hospital is affiliated with the University of Missouri and is presently in the position of filling certain departmental positions with full time men to supplement the ac- tivities of the private attending staff which has provided the teaching services in the past. The future of the hospital looks to be most exciting.

I hope your efforts will continue to be as stimulating to your surgical residents as they were for me.

Cordially,

Andrew McCanse, MD.

Dr. Albert B. Eisenstein, medical scien- tist, is editing two books, both to be released in late 1965.

The council on food and nutrition of the American Medical Association asked Dr. Eisenstein to edit the third edition of “Nutrition in Clinical Medicine.” Not written for the layman or even the general practitioner, the book will have 50 chapters written by 70 national and interna- tional experts.

St. Louis contributors other than Dr. Eisenstein will be Dr. Morton D. Pareira, surgeon-in-chief, Jewish Hospital, “Nutri- tion and Trauma”; Dr. Robert Shank, Washington University School of Medicine, “The Assessment of Nutritional Status”; Dr. Lillian Recant, Washington University School of Medicine, “Nutrition and Di- abetic Mellitus”; and Dr. Carl V. Moore, President, Washington University School of Medicine, “Iron and Copper, The Hypochromic Anemia”.

The second book, “The Adrenal Cortex” represents Dr. Eisenstein’s major interest in medicine. About a year ago, because he felt a new book should be written on the subject, he talked to publishers then selected 17 experts to write about their specialties.

Among the St. Louis contributors are: Dr. Sara Luse, Washington University School of Medicine; Dr. Thomas Frawley, St. Louis University School of Medicine; Dr. Theodore Weichselbaum, president, Biological Research Inc.; Harry Margraff, Washington University and Dr. William Daughaday, Washington University School of Medicine.

RAVITCH

Dr. Eisenstein Edits 2 Medical Books

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DOCTOR'S URGED COMMUNITY TO FORM FIRST JEWISH HOSPITAL

(In the December issue of 216 we published a transcript of a radio broadcast presented October 27 by KSD. The feature "This Day In St. Louis" was written for KSD by the Missouri State Historical Society. Included were facts about the early efforts of the Jewish Community to establish a hospital dating back to 1878.

This was only a small part of the story. The events leading to the formal opening of the first Jewish Hospital form part II of History of Jewish Hospital.

Toward the end of the year 1890, a feeling developed again that there was an urgent necessity for a hospital. Various instances of suffering came to public notice. Jewish Doctors, Epstein, Friedman and Jacobson, who had been devoting much of their time to the treatment of the poor called attention to the great need for a hospital. Acting on their suggestion, a small number of gentlemen met and discussed the subject.

In early 1891 a meeting was held at Addington's Hall consisting of the large assemblage of Jewish citizens which had been collected together many years. The meeting, composed of community leaders as well as medical personnel and lay members, was conducted as an open forum. After lengthy, animated, and at times, eloquent discussions, it was decided, upon motion of Rev. Samuel Sale, to form a permanent association, incorporated under the laws of the State of Missouri, for the purpose of collecting funds with the ultimate object of building and maintaining a hospital under Jewish auspices. The resolution carried almost unanimously.

When April 27, 1891, Missouri Secretary of State, A. A. Leesuer, granted a charter to the Jewish Hospital Association of St. Louis, Missouri. This charter gave as the object of the Corporation, to afford medical and surgical aid, comfort and relief to deserving and needy Israelites, and to aid in all other denominations as the Board of Managers can provide for.

For the first few years very little was done in accomplishing the aims set forth in the 1891 charter. Finally in 1900, four civic-minded women met and formed a plan of action. Mrs. Gertrude Mathes, Mrs. F. M. Lacy, Miss Edith and Mrs. Ida Kahn met at the home of Mrs. Rebecca Kahn to discuss how to create a hospital to meet the urgent health needs of the growing Jewish population in St. Louis.

These determined women were members of pioneer Jewish families; they refused to abandon the idea of a hospital, and they plunged into the effort with an enthusiasm which soon won over the Jewish community.

The first person to respond to the plea for working funds was Elias Michael, merchant and civic leader who later became one of the directors of the St. Louis Women's Auxiliary. At that time he owned the Michael Hotel in the 10th Street Post Office. He had a large number of customers and the majority of them were Jews. He volunteered to finance the first building. Although the cost was $150,000, he went ahead with the project and the building was completed in 1895.

The first person to respond to the plea was an anonymous donor. He was a wealthy Jewish man who had been asked to finance the project by the Women's Auxiliary. He agreed to do so, provided the Women's Auxiliary would match his funds. The first building was completed in 1895.

The second building, which was completed in 1905, was financed by the Women's Auxiliary. It was a large, brick building with 120 beds. The Women's Auxiliary was responsible for raising $750,000 to finance the building.

The Women's Auxiliary gave the funds to the hospital for working funds. They were very careful not to spend the money on anything that would interfere with the hospital's primary function, which was to provide medical care. They worked with the doctors to ensure that the hospital was run as efficiently as possible.

While her husband was teaching, Mrs. Klaff visited the hospital and began talking with members of the Women's Auxiliary. Unexpectedly, she found herself surrounded with students as eager as her husband's.

"Their auxiliary is only two years old, with 500 members divided between 10 hospitals in the city. All the women simply adore the work. That's why they were so interested to hear all about our Women's Auxiliary."

"At first they received a lot of opposition from the doctors," Mrs. Klaff said, "who felt that they were coming to the hospital because they had nothing better to do with their time. Now, these same doctors don't see how they got along without them. They work on the floor right along with the doctors, similar to nurses aids. They have other duties too—such as running errands and being the liaison between patients, doctors and visitors."