West Pavilion dedication set for December 12

Ceremonies dedicating the Barnes Hospital West Pavilion to the people of St. Louis, St. Louis County and “sick people anywhere who need the specialized care we can provide” are scheduled for 10 a.m. December 12.

A brief program will be held in the East Pavilion Auditorium for invited guests, then they will be given tours of the West Pavilion. A highlight of the tours will be the cardiothoracic floor, which includes operating rooms, recovery areas, intensive care units and patient rooms. Two patient floors will also be available for touring with refreshments offered at the nurses stations.

Tours will be held for Barnes/Washington University employees and the general public from 2:30 to 4:30 that afternoon.

United Way campaign nears completion

United Way campaign activities were virtually completed in October and by presstime $63,091 had been contributed or pledged by Barnes Hospital employees, with more United Way pledge cards still coming in.

The goal had been set at $78,000 representing a $4,000 increase over the 1978 target, according to Paul Hartwell, chief cashier and chairman for this year’s drive at Barnes.

All employees of the hospital were contacted either by supervisors or department heads during the drive, which is a part of the greater St. Louis United Way’s agency family for 1980 are the Missouri Medical Record Association and the Missouri Medical Record Association and the St. Louis Chapter of the American Medical Association.

In other organizational changes, associate director Dillon Trulove and assistant director Richard Linneberger have been given responsibilities for chaplaincy, plant engineering, cardiac diagnostic lab, social work, telecommunications, clinics, infection control, activity therapy, housekeeping, laundry, central service and dispatch.

Construction supervision, which includes the finishing of the West Pavilion, will be handled by hospital president Robert E. Frank.

Mrs. Dunn, who started at Barnes as director of medical records in May, 1974, graduated from Delaware Valley High School, Milford, Pa., in 1970. She received a bachelor of science degree in medical records administration in 1974 from St. Louis University and a masters degree in business administration in 1977 from the University of Missouri.

A native of Brooklyn, N.Y., Mrs. Dunn was raised in Pennsylvania and was educated in St. Louis. She and her husband, Raymond, live in St. Ann.

Mrs. Dunn is president-elect of the Eastern Missouri Medical Record Association and is a member of the St. Louis Health Systems Agency, the St. Louis University Hospital and the St. Louis Community College at Forest Park Medical Records Technology Advisory Committee, the Association for Health Records and the Association for Record Managers and Administrators. She is serving on the 1979 United Way committee at Barnes.

Mr. Trulove, who started at Barnes in 1946 as an orderly after being discharged from the Army, became head orderly and a year later was named supervisor of central service. In 1962 he left nursing to become department head of housekeeping, and in 1966 he also took over dispatch. He was named assistant director and was made responsible for central service, dispatch, laundry and housekeeping in 1970; during this time he worked with vice-president Thomas Winston. In July, 1977, he began working with vice-president Rich Grisham in activity therapy, admitting, barber shop, beauty shop, dietetics, medical records, pharmacy, Queeny Tower restaurant and respiratory therapy in addition to his four areas. He was named an associate director of the hospital in January of this year.

Black employees honored at “Yes I Can” dinner

Twenty-seven black Barnes employees were guests at the St. Louis Sentinel's sixth annual “Yes, I Can” dinner held October 31 at Stouffer's Riverfront Towers. A leaner Smith, assistant head nurse, on $100, received the special honor of sitting at the head table.

Others attending included Jan Hawkins, assistant head nurse, emergency room; Terry Walker, assistant head nurse, $100; LaVonda Spencer, assistant head nurse, $12.100; Velma Jones, policies and procedures consultant; Helen Ibrzy, team leader, East Pavilion operating rooms; Margaret Ceaser, assistant head nurse, $11.00; Phyllis Parks, assistant head nurse, $12.00; Linda Cockrell, director of nursing; Pat Cressie, nursing officer of the day; Regina Hamilton, head nurse, $6.20; Nancy Harris, assistant head nurse, $4. Renard.

Richard Mansfield, assistant director, security; Fred Ward, sergeant, security; Bill Ray, security officer; Marva Reese, instructor, education and training; John Curry, supervisor, planner, and scheduling; plant engineer; Margaret Henson, secretary-receptionist, pastoral care; Agatha Rollins, chief technologist, clinical hematology; Barbara Woods, supervisor, blood drawing; Drs. Darwin Jackson and Michael Lewis, resident-4, obstetrics/gynecology.

Marjie Jarmon, surgical pathology; Annette Colbert, chief secretary, surgical pathology; Janice Williams, technician, surgical pathology; Dr. Thomas Lyles, resident-3, urology; and Connie Micko, technician, laboratories.

Speaker at the dinner was Secretary of the Army Clifford L. Alexander, Jr., the first black to hold that position. The idea for the “Yes I Can” dinners was conceived by the late Sentinel publisher Howard B. Woods several years ago. The purpose is twofold: (1) to honor and identify minority achievers in business and industry in St. Louis and (2) to motivate and inspire young black people toward the pursuit of excellence by providing an opportunity for them to meet black men and women who have achieved success in their careers.

Jane Woods, publisher of the Sentinel and widow of Howard B. Woods, said that the dinner is held in the firm belief that the economic opportunities available to blacks in St. Louis have played a major part in maintaining the city’s harmonious race relations.
Although urinary tract diseases are common among men, women, and children of all ages, funding for research into their causes and treatment has been very limited. Knowing this, four concerned individuals formed the Urological Research Foundation, a private philanthropic organization, in October, 1978, to raise funds to support vitally needed studies in the area of kidney and urologic research at Barnes Hospital/Washington University Medical Center.

“We thought that the field of urology had gone neglected in the area of research,” said Elwin Smith, one of the organization’s founders, who had heard about the need for research funds from Dr. William Fair, Barnes urologist-in-chief. Already experienced in the art of fund-raising, Mr. Smith contacted three of his friends, Charles Rice, Arnold Schwab and the late Harold Tober, and thus, the not-for-profit corporation was formed.

“We thought that the lack of research into urological diseases could be an especially alarming situation because of the large number of cases of cancer of the prostate in the male,” he said. “The prostate causes a degree of suffering far out of proportion to its size.” Mr. Smith pointed out that in the past, very little funding for research was granted, due in part to the prudish attitude of the general public. “Money could be raised easily for problems such as diabetes, but not for prostate problems because they were ‘male diseases’ and could not be discussed,” he said.

“Money is needed for many things, such as manpower, equipment and medication,” Mr. Smith said.

Diseases of the prostate affect, and sometimes kill, a large percentage of the male population. The research effort here is concerned primarily with the causes and prevention of three particularly common conditions: prostatic infection, benign prostatic enlargement and prostatic cancer.

Prostatic infection, which is extremely hard to treat, is the most common cause of urinary tract infections in the adult male. Benign prostatic enlargement, the third most common reason for hospital admissions in men, is more common than diabetes, stroke or cancer. Twenty percent of all males suffer some enlargement of the prostate by the age of 50. By the age of 80, more than half of all men are affected and many require surgery.

Prostatic cancer, the most severe disorder affecting the prostate, strikes a very high proportion of older males, and because of the difficulty in early diagnosis, curative treatment is often impossible. It is the second greatest cause of cancer deaths in American males over 65, with only lung cancer producing more fatalities. While cancer of the prostate can often occur in men under 40, the risk increases mathematically with age until fully 80 percent of all men in their 90’s can expect to suffer from prostate cancer.

In some men the prostatic tumor will remain localized for a long time and the patient may die with his disease rather than of it. In other individuals, particularly younger men, the cancer can rapidly spread to other areas of the body and is highly malignant.

Only five to 10 percent of all cases are discovered before the cancer has spread beyond the early stages, when treatment through radiotherapy and surgery produce a high rate of cure. However, the majority of all cases are not discovered until the cancer has spread to other tissues at which time treatment is less likely to succeed. In 40 percent of the patients, the disease is not diagnosed until it has spread to bones and other organs.

Today, the Urological Research Foundation numbers approximately 40 and has raised more than $27,000. “There is no fee nor formal membership,” Mr. Smith said. “These are all people wishing to make a statement of their personal support of medical research.” Members encourage new people to pledge amounts of money to the foundation and to actively participate in raising additional funds. Although Dr. Fair’s research is in part funded through grants from the American Cancer Society, drug companies and the government, additional funds are always needed.

“Our goal is to provide an annual income of at least $50,000 to support the services of technicians, equipment and supplies for ongoing research.” Mr. Smith said.

Present officers of the organization are Mr. Smith, president; Adolph Frank and Arnold Schwab, vice-presidents; Herman Katcher, secretary; and Charles Rice, treasurer.

The foundation recently presented its first piece of equipment, a tissue culture incubator, to aid in this research. The newly donated piece of laboratory equipment will primarily be used to grow hybridomas, a substance used in the production of highly specific antibodies, a new concept in the development of screening tests for cancer of the prostate.

“This first contribution is an example of what committed individuals can do in making substantial contributions to the needs of medical researchers,” Dr. Fair said.

The VFW Auxiliary presents check for cancer trials

The Auxiliary of the Veterans of Foreign Wars of Missouri has presented a check for $4,269 to Barnes Hospital to further clinical research of immunotherapy to treat cancer. The presentation was the third such gift to Barnes since 1975 and brings Auxiliary contributions here to more than $8,400.

Emelia Droegge of St. Louis, junior past state president of the VFW’s Department of Missouri, presented the check to Robert E. Frank, Barnes president, and Dr. Marc Wallack, director of surgical oncology at Barnes. Dr. Wallack will use the funds to further clinical research with a cancer vaccine to prevent the recurrence of certain forms of cancer.

Eight Auxiliary members attended the ceremonies. They represent the 11th and 12th districts of the VFW in Missouri, comprising posts in St. Louis City and St. Louis County, respectively. They included Dottie Maxwell, past-president of Auxiliary 6137; Peggy Bonney, state chaplain; Mary Davis and Fran Reinemeyer, past-presidents of Auxiliary 3500; Elisabeth Dorr, 12th district president; Audrey Creel, past state president; and Grace Peglar, 11th district president.

Joseph Greco, associate director of Barnes and director of development, said that the gifts from the Auxiliary attest to the work of researchers in the medical center who are attempting to find more effective treatment and an eventual cure for cancer.

Mr. Greco also announced that Barnes Hospital is in the process of organizing a development program to aid victims of cancer who are in difficult financial conditions because of the disease.

Employes ride to aid cancer research

Nine Barnes employees pedalled a total of 417 miles and collected more than $4,350 in the American Cancer Society’s Bike-A-Thon September 30, according to the hospital’s bike-a-thon coordinator Anna Ikeda, nursing administration. The event, which attracted more than 1,200 area participants, was sponsored by the society and KWK Radio.

Riders were sponsored by co-workers, friends and relatives who pledged money for each mile ridden during the event. All proceeds went toward cancer research. Ms. Ikeda, Barnes’ top rider, pedalled 100 miles and solicited pledges totaling $2,678.55.

Other Barnes participants included Harvey Mack, nursing school, 97.5 miles; Mike Gentile, RN on 13100, 60.5 miles; Bruce Linders, immunology lab, 35 miles; Vicki Thurman, purchasing, 30 miles; Dotti Hahn, key punch, 28 miles; Debbie Brown, RN on 9200, 26 miles; Pat and Tom Long, lab administration, 20 miles each.

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Dick Spencer named medical records director

Dick Spencer, formerly assistant director of medical records at Barnes, has been named director of the department, effective November 1. He succeeds Rose Dunn who has been named an assistant director of the hospital.

An accredited records technician, Mr. Spencer started at Barnes in January, 1976, as director of outpatient medical records. When outpatient and inpatient medical records were combined in July, 1977, he was named assistant director of the department.

Just prior to coming to Barnes, Mr. Spencer retired from the Air Force as a senior master sergeant. During his 20-year tenure in the Air Force, he served on a hospital administration traveling team that took him all over the world, including Spain, England, Greenland, Scotland, Iceland, Japan and Viet Nam.

A native of Greenfield, Ill., Mr. Spencer is a graduate of Greenfield High School. Presently attending night school, he is nearing a degree in business.

Mr. Spencer and his wife Pat have four children and they live in O’Fallon, Ill. He is a member of the American Medical Records Association.

WUMC provides $7.8 million in free care

More than $7.8 million dollars in free medical care was provided by institutions of the Washington University Medical Center during the 1978-79 fiscal year, which ended July 1, according to the center’s annual report.

The center’s six institutions, Barnes Hospital, Barnard Free Skin and Cancer Hospital, Washington University, Central Institute for the Deaf, Jewish Hospital of St. Louis and St. Louis Children’s Hospital, invested almost $36 million in research and spent more than $27 million in capital improvements. Barnes alone invested $17.04 million in capital improvements.

William L. Edwards, Jr., was re-elected chairman of the board of directors at the WUMC annual meeting, where the report was presented by Dr. Samuel Guze, WUMC president. Edwin B. Meissner was newly elected to serve as treasurer to replace Ethan A. H. Shepley.

Other re-elected officers include Lee M. Liberman, vice-chairman; Robert J. Hickok, assistant secretary; and Hugh M. Morrison, assistant treasurer.

Sickle cell disease testing underway

Mothers of newborn black babies at Barnes Hospital have the opportunity to participate in a program to determine if their children have sickle cell anemia or if they carry the sickle cell trait. The program, which began last October, is being conducted by Dr. Harold Zarkowski, a Barnes Hospital and Children’s Hospital pediatrician who specializes in sickle cell disease.

“If you can make a diagnosis during the newborn period and educate the mothers, it’s better than waiting for some clinical event to occur to bring the child to the office and to learn at that time that the child has sickle cell disease,” Dr. Zarkowski said. “Recent studies have found that ten percent of all children with sickle cell anemia die before age 15 of complications of the disease.”

Sickle cell anemia is an inherited disorder of the red blood cells which occurs in blacks and which causes increased susceptibility to certain infections, chronic fatigue to various Morgen and recurrent bouts of pain called crises. Sickle cell crises are characterized by severe pains in the chest, abdomen, arms and legs, and can last anywhere from a few hours to a week or more and may occur as often as several times a month. At present, there is no satisfactory treatment that can prevent painful crises or damage to body organs, although doctors and other professionals can relieve some of the symptoms of a crisis and treat infections and other complications of sickle cell disease.

In a patient with sickle cell disease, the red cells change from the normal round shape to a sickled shape when oxygen is released to the tissues. In patients with sickle cell trait, the red cells rarely change to the sickled shape. Thus, no disease.

One out of 400 black Americans has sickle cell anemia and one out of ten black Americans has sickle cell trait. Missouri health officials have estimated that more than 1,000 Missourians have the disease, while an additional 50,000 Missourians are believed to have sickle cell trait. If two parents have sickle cell trait, each time a child is born there is a 25 percent chance that the child will have sickle cell anemia.

A simple blood test, hemoglobin electrophoresis, determines if a baby has the disease or trait. A baby can have fetal hemoglobin with a trace of adult hemoglobin (normal), fetal hemoglobin with a trace of adult hemoglobin and a trace of sickle cell hemoglobin (sickle cell trait) or fetal hemoglobin, no normal adult hemoglobin and sickle cell hemoglobin (sickle cell anemia). Expectant black mothers at Barnes are asked if they would like their newborn babies tested for sickle cell anemia at birth. Blood is taken from the umbilical cord so that no extra blood drawing from the baby is required. Most mothers welcome the test, Dr. Zarkowski said. Approximately 2,000 babies were tested during the first year at Barnes. Four were found having sickle cell anemia.

“Although sickle cell anemia is not a major threat to a baby during the newborn period, we would like the mothers and children to participate in our program,” Dr. Zarkowski said. He is participating in a cooperative study of the clinical course of sickle cell disease conducted under the direction and funding of the Sickle Cell Disease Branch of the Division of Blood Disease and Resources of the National Heart, Lung and Blood Institute, National Institutes of Health. Approximately 3,500 patients of all ages throughout the United States are being enrolled in the study.

Although sickle cell disease has been known for years and many symptoms are recognized, the clinical course of the disease from early childhood through adulthood is poorly understood. Since information is incomplete, the project was initiated to observe patients for five years to determine the natural history of the condition. It is hoped that, given this opportunity to evaluate health histories, physical examinations and laboratory tests of a large number of patients, clinicians will learn more about the nature and the complications of the disease. They will gain more understanding of why people are affected differently by the disease and can develop and share information which will ultimately improve treatment.

Jogger who collapsed receives new pacemaker

Michael Harvey, a manufacturer’s representative who was revived by Barnes doctors after suffering a heart attack while jogging in Forest Park in early 1976, recently was a patient at Barnes to have his pacemaker replaced.

“I feel good; it’s great to be alive,” Mr. Harvey said at the time of his discharge. “It’s been 3½ years and the doctors said this one should last eight or nine years. I’ll see you then.”

Mr. Harvey, then 60 years of age, was jogging in Forest Park one morning when he collapsed. Dr. Gerald Perkoff, former Barnes physician, and Dr. Richard Aach, a Barnes gastroenterologist, came to his aid by providing cardiopulmonary resuscitation until an ambulance arrived. Mr. Harvey was a patient in the coronary care unit until he received his first pacemaker.
The way it was

On November 27, 1914, a little more than a week before Barnes Hospital opened its doors on December 7 of that year, the trustees issued a paper describing the "special features of Barnes Hospital." With Queeny Tower replacing the private pavilion in 1965, the original buildings began to disappear.

The Peters Building, the East Pavilion and now the West Pavilion have each taken their toll and little is left of the $808,091 "plain but substantial brick building without elaborate ornamentation" that Robert A. Barnes provided for in his will. Some details of Theodore C. Link's architectural niceties and Hill-O'Meara Construction Company's substantial buildings are still around for the discerning eye to behold. On these pages, the Bulletin reprints the 1914 description of the hospital along with photographs of remnants left 65 years later.

November 27, 1914

Barnes Hospital faces Kingshighway on two sides. The lot between Euclid Ave. and Kingshighway and between West Kingshighway and the Wabash tracks contains about eight acres. The Hospital buildings, which are fire-proof, consist of an Administration building in the center with a Medical Ward building to the east, a Surgical Ward Building to the west and a building for private patients west of the Surgical Ward building, and fronting on Kingshighway.

Immediately north of the Administration building is the Service building which contains the kitchens, dining rooms and dormitories. North of the Service building is the Laundry building with dormitories above. All of these buildings are connected by tunnel to the Children's Hospital and Washington University Medical School on the east side of Euclid Ave. The location of the Hospital insures air and sunlight without limit.

Between the Hospital grounds and the Wabash Railroad, which is depressed at this point, is an ornamental concrete fence which cuts off all sounds from passing trains. A magnificent rotunda wainscoted with English veined Italian marble contains a splendid bronze bust of Mr. Barnes.

The rooms and corridors in the Private Patients building as well as all other spaces occupied by patients are provided with rounded corners and coved angles and base which obviates dust matters. All interior walls are finished with 5 coats of white enamel. All doors throughout are without panels, being flush veneered birch and white enameled. The stairways throughout are of terrazzo. The kitchens are all lined with white glazed brick from floor to ceiling. All of the corridors and wards are covered with battleship linoleum.

All operating rooms are lined, from floor to ceiling, with white cararra glass and the floors are of marble, laid in mosaic. The buildings are provided with tile lined sanitary clothes chutes with door openings on each floor and terminate in tile lined rooms in the basement.

To give an idea of the extent of Barnes Hospital group of buildings, it is only necessary to state that there is more than one mile of main corridors. There are more than 1500 windows, 450 rooms and more than 1000 interior doors. All of the space occupied by patients is lighted by indirect lighting fixtures. The buildings throughout are heated with hot water, under thermostat control. Iced water is supplied from the power house with draw fountains located conveniently throughout all the buildings.
The Children's Hospital, which is adjacent, will be supplied with food from the Barnes Hospital kitchens, conveyed through an underground tunnel.

The Power Plant, located on the East side of Euclid Ave. at the Wabash tracks, is of the very latest and of the most economical type. From this power house are supplied heat, electric light, domestic hot water, iced water, live steam, refrigeration and compressed air for the Barnes Hospital, Children's Hospital and Washington University.

Ambulances will enter over a wood block driveway, from Euclid Ave. or Kingshighway and discharge their patients at the Receiving Ward, located in the rear of the Administration Building on the first floor level. Under this driveway is a loop driveway which connects with the Euclid Ave. entrance and over which will be conveyed all of the supplies for the Hospital, which will be received at the storeroom on the basement level.

Under an agreement between Barnes Hospital and Washington University, all patients of Barnes Hospital will be treated by the members of the Washington University Medical Staff, under regulations established by the Trustees of Barnes Hospital. This staff is composed of physicians and surgeons who stand at the head of their professions.
Breathing club offers moral support

Chronic lung disease, such as emphysema and chronic bronchitis, frequently change the day-to-day lifestyles of its victims. Many feel depressed, often asking themselves "why me?" They have diseases that never go away, and they sometimes get weary of the daily treatments required for their survival. Many times they need encouragement from others who have already experienced these same emotions.

The Better Breathing Club was organized at Barnes Hospital two and one-half years ago to provide emotional support and to assure continuing care after discharge for patients suffering from chronic obstructive pulmonary diseases. The idea of Jill Feldman, pulmonary nurse specialist, who had seen a similar program in Arizona, the club was formed of lung disease patients as part of the pulmonary home care program, a joint effort by Barnes Hospital, Washington University School of Medicine pulmonary division and the Irene Walter Johnson Institute of Rehabilitation.

"These people get reinforcement from their peers, others who have experienced the same situation that they are facing," said Jill Feldman. "It's also a learning experience for them."

The Better Breathing Club was started for graduates of the pulmonary home care program, an eight-week series of classes taught by an interdisciplinary team of a physician, a social worker, a dietitian, an occupational therapist, a physical therapist and a pulmonary nurse specialist. Each week a different topic, such as the function and the structure of the lung or alterations with lung disease, is covered in class. Guest speakers from the pulmonary division talk about lung diseases and allow time for a question and answer period. Participation in the pulmonary home care program is by physician referral.

"The club has just been terrific," said Dr. Robert Bruce, director of the Barnes RICU. "These people learn how to cope with their diseases and they share things that only patients know about and know how to talk about." Presently, there are 25 to 30 patients participating in the club.

"The club is also a mutual support society," Dr. Bruce said. "When a person is down, it tends to help him to talk to someone else with the same problem, sometimes much worse than his own."

Although the idea for classes for chronic pulmonary patients is not new, the idea of keeping them actively together after finishing the classes is unique. "It's apparently unique in the United States for a lung-associated sponsored club," he said.

The Better Breathing Club has received some funding from the American Lung Association of Eastern Missouri for their visitation program, an unusual program devised by an original member and current club president, Willie Averbush. The program consists of members visiting other chronically ill patients who rarely get out and providing them with moral support as well as social contact with the outside world. "There are other breathing clubs in this area," Miss Feldman said, "but no other visitation clubs."

"The Better Breathing Club also provides members with a social group that they can keep up with and feel comfortable with," Dr. Bruce said. Just recently, the club held its first annual picnic, a cooperative venture supported by the RICU nursing staff, the department of social work, Visiting Nurse Association and the pulmonary division.

For additional information contact Jill Feldman (3571), Ken Corcoran, Wohl Hospital social worker (3106) or Willie Averbush (725-6470).

Barnes team goes to national finals

Two Barnes Hospital respiratory therapy employees, Bill Nahm, RRT, and Mark Richardson, CRTT, will be traveling to Washington, D.C., December 1-4 to participate in the national eliminations finals of the Sputum Bowl, a scholar quiz sponsored by the American Association of Respiratory Therapy. David Patient and Terry Denton, both former Barnes employees, are also on the team.

The Sputum Bowl competition consists of questions relating to respiratory therapy. The Barnes team emerged as Missouri champions after a series of state and local competitions which began early this spring. The Missouri Society of Respiratory Therapy, participating this year for the first time in national competition, will pay for the plane fare and hotel room for the participants.

Barnes was among four hospitals competing this spring in the district one semifinals at the St. Louis Community College at Forest Park. From there they competed in the finals at Incarnate Word Hospital and at the state meeting in Springfield.

Maxillofacial prosthetics department established

A department of maxillofacial prosthetics has been established by the Washington University School of Dental Medicine to treat patients who require anatomic, functional or cosmetic replacement of living tissues with nonliving substitutes.

Dr. Donald Gay has been appointed a Barnes assistant dentist and will head the department, according to Dr. John Delfino, Barnes oral and maxillofacial surgeon-in-chief.

Dr. Gay explained that the defects dealt with usually result from congenital abnormalities, traumatic injuries or ablative surgery, and prostheses include artificial eyes, facial prostheses, cranial implants, chest implants, burn prostheses, speech prostheses and various kinds of splints and stents. "We will obviously work with specialists from many services," he said.

Mr. Gay received his D.D.S. from the University of Tennessee, his prosthodontic training at Walter Reed Army Medical Center in Washington, D.C., and his maxillofacial prosthetic training at the National Naval Dental Center at Bethesda, Md.

Michael Kent, a certified dental laboratory technician who further specialized in maxillofacial prosthetic laboratory technology, is also joining the department. He taught the Navy's maxillofacial prosthetics technicians for several years before coming here.

Patient referrals can be made through the department of maxillofacial prosthetics at 454-0300, extension 317.

Senator Woods speaks to social workers here

Missouri State Senator Harriet Woods spoke to a group of area hospital social workers on adult protective service legislation October 22. More than 50 persons attended the talk which was sponsored by the Barnes Hospital Department of Social Service.

During a session which followed, Senator Woods answered questions on temporary guardianship, nursing and boarding home laws, and adult abuse legislation.
Tribute Fund

The following is a list of honorees (names in boldface) and contributors to the Barnes Hospital Tribute Fund from Sept. 18 to Oct. 15, 1979.

IN MEMORY OF:

John L. Wilson
J. W. McFee

Carol G. Gruetzemacher

Mrs. E. R. Culver, Jr.

Mrs. Walter Dickie
Mrs. Venon A. Peterson
Mrs. Joseph L. Farrell

Helen Lamb Powell Frost
Dean & Fred Hayden

Thomas D. Winston
M/M Phillip H. McNeill

Olive Robinson Hunter
Municipal Theatre
Association of St. Louis

G. Gordon Hertslet
M. R. Chambers

Carter Stith Spano
M/M Phillip H. McNeill

Gayle Torrez
Carol Gruetzemacher

Patient Care Fund

Mary L. Moore
Frances A. Parrish
Joseph H. Eschbacher
Alexander Williams
Wilma L. Amsbury

Alonzo Atkins
Catherine Birkenmeier
Albetta Brungenborg
Ethel E. Budde
Charles Chaskelson
Raymond E. Chipman
George F. Conter
Ruth Davenport

C. M. Dunn
Linda Erickson
Richard A. Collins
G. W. Gladders
Louise M. Griffith

Dorothy Harvey
William F. Hoemann
Rita S. Hoerr
M/M Sam DeMoff's

Catherine D. McDowell
C. M. Dunn
Linda Erickson
Richard A. Collins
G. W. Gladders

Mary L. Moore
Frances A. Parrish
Joseph H. Eschbacher

Olive Robinson Hunter
Municipal Theatre
Association of St. Louis

G. Gordon Hertslet
M. R. Chambers

Carter Stith Spano
M/M Phillip H. McNeill

Gayle Torrez
Carol Gruetzemacher

Annual Charitable Fund

Albert J. Edlin (Mrs.)

Vinette Evans
Mildred L. Pilburn
Otto L. Friendly
Lynne Fry
Nora A. Gant
Raymond E. Gill
Verniel C. Givers
M/M J. M. Greenblatt
M/M Gordie Gubin
Alma B. Heves
Frieda W. Horner
Hazel Kester
M/H. O. Kincaid
Earon Barnes, Jr.
Mary Cheatham
W. Allen Cleeneay
Stella Doepke

Ruth M. Edwards
W. T. Coghill
Eissie L. Estes
J. Carr Gamble, Jr.
Lenora Holzinger
Mary Beth Johnston
Maudie E. Jones
Nettie Little
Shirley Maichin
Mel Marcus
Elsa G. McGee
Helen M. Schaeffer
Veron & Elia Swiney
Mrs. Walter Tiskh
Sazak L. Toney
George M. Towns

J. Jackman
Osie Jones
Anetha King
Stanley J. Kudlinski
Robert E. Manson
Jim Nagle
Frank Newman
Robert M. Pollard
Ralph R. Thomsen
Myrtle Ingram
Earl M. Mars
Jane P. Sharp
Louis Silverman
Zette Spencer
James Watson
Jack Hartstein, Barnes ophthalmologist, has suc-ceeded Dr. Marvin Fishman as medical director of lung disease. She was 78.

Rachel Bradley dies

Rachel Bradley died at Barnes Hospital October 17 of lung disease. She was 78.

The family suggested memorials to Barnes Hos-pital Tribut Fund in lieu of flowers. Mrs. Bradley was a member of Barnes Auxiliary, which sponsors the Tribute Fund.

Hospital notes

Dr. Jack Hartstein, Barnes ophthalmologist, has been elected vice-president of the American So-ciety of Contemporary Ophthalmology.

The following are reported on staff by the presi-dent’s office: Dr. Burton Singerman, assistant psychiatrist, and Dr. Sandra L. Blietn, assistant pediatrician, both effective July 1.

Dr. Michael Brooke, Barnes neurologist, has suc-cceeded Dr. Marvin Fishman as medical director of the Irene Walter Johnson Institute of Rehabili-tation.

Dr. Philip Ludbrook, Barnes cardiologist, spoke on “Indications for and Implications of Hemo-dynamic Monitoring” September 27 at a pressure monitoring seminar at the Breckenridge Inn. Al-so participating was Washington University re-search instructor Joe Byrne.
Horse show raises more than $50,000

The St. Louis National Charity Horse Show, which was held in October at Greensfelder Recreational Center in Queeny Park, contributed more than $50,000 to the Kilo Foundation for Diabetes and Vascular Research. The show was planned as a revival of the old St. Louis National Horse Show, which was one of the nation’s premiere equine events from about 1900 to 1950.

The Kilo Foundation was founded in 1972 by Dr. Charles Kilo, Barnes diabetes specialist, and Dr. Joseph Williamson, Barnes pathologist. They have researched diabetes and vascular disease for more than 10 years.

Funds provided by the foundation have been used to help purchase several items of equipment, including a $140,000 electron microscope, which benefits many diabetes investigators at Barnes Hospital. Drs. Kilo and Williamson have engaged in numerous collaborative studies at Barnes, including a study on eye disease and diabetes with Dr. Stephen Waltman, and a study on platelet factors and vascular disease in diabetes with Dr. Heinrich Joist.

“This year we hope to be buying more research equipment with the money raised from the St. Louis National,” said Dr. Williamson. “We’ll also be supporting at least one Fellow, perhaps two.”

More than 600 horses, some from California, Arizona, Washington, Canada and Australia, competed in this year’s horse show.

Helicopter ambulance available to Barnes

Medical Air Rescue Corps (MARC), an emergency helicopter ambulance service for a radius of approximately 100 miles from St. Louis, is now at the disposal of any physician or administrator who calls for it. Operated by St. Louis University Medical Center, the helicopter will transport patients to whatever medical care facility specified by the caller. MARC can be utilized for primary response emergency care, hospital-to-hospital patient transfer, neonatal transport, disaster rescue and evacuation and donor organ transport.

The MARC helicopter, staffed by an emergency flight nurse and pilot, serves as a flying emergency room furnished with life support equipment for any age patient, including critically ill newborns. It can carry up to three stretcher patients at one time and is available 24 hours a day, seven days a week.

The MARC helicopter can be requested by calling 771-9016. The following information should be provided: patient’s name and address, place patient is being transferred from and to, location and use of landing sites at both places, approximate landing space available at both places, the weather conditions at both places and the general condition of the patient.

Patients are billed directly for the service by St. Louis University Medical Center. Current charges are $100 for lift-off plus $2 per mile, subject to change.