Reunion Class Parties
Saturday, June 11, 1988

1928  60th Reunion, 1:00 P.M.
       Luncheon, Faculty Club
       Jefferson Alumni Hall

1933  55th Reunion, 1:00 P.M.
       Luncheon, Faculty Club
       Jefferson Alumni Hall

1938  50th Reunion, 7:00 P.M.
       Dinner (Black Tie)
       The Cosmopolitan Club
       1616 Locust Street

1943  45th Reunion, 7:00 P.M.
       Dinner
       Carpenters’ Hall
       320 Chestnut Street

1948  40th Reunion, 7:00 P.M.
       Dinner
       The Union League of Philadelphia
       Fell and Card Rooms
       Broad and Sansom Streets

1953  35th Reunion, 7:00 P.M.
       Dinner Dance
       Bookbinder’s
       Walnut at Second Street

1958  30th Reunion, 7:00 P.M.
       Dinner
       DiLullo Centro
       1405 Locust Street

1963  25th Reunion, 7:00 P.M.
       Dinner Dance (Black Tie)
       The Franklin Institute
       Twentieth and the Parkway

1968  20th Reunion, 7:00 P.M.
       Dinner Dance
       Union League of Philadelphia
       The Oak Room
       Broad and Sansom Streets

1973  15th Reunion, 7:00 P.M.
       Dinner
       Garden State Park
       Route 38
       Cherry, Hill, NJ

1978  10th Reunion, 7:00 P.M.
       Dinner Dance
       Downtown Club
       Public Ledger Building
       Sixth and Chestnut Streets

1983  5th Reunion, 7:00 P.M.
       Cocktian Party and Buffet
       Vesper Club
       Boat House Row
A Lively Component  2
David K. Johnson, D.V.M. discusses the role of the Office of Animal Resources in providing optimum care for the non-human contributors to research.

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Developing a collection of primitive art is one of the many ways by which our alumni challenge routine.

Editor  Nancy S. Groseclose
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On the cover: Laboratory animals play an important part in the evaluation of new concepts and techniques.

Cover Design: Louis De V. Day

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A LIVELY COMPONENT

Laboratory Animal Program Contributes to Progress at Jefferson

by David K. Johnson, D.V.M.

With today’s rapid increase in biotechnology, advances in health care delivery and research methodologies, laboratory animals provide that essential component for evaluating new concepts and testing the efficacy and safety of new methods and treatments. The laboratory animal program at Jefferson meets the well being of these animals and provides professional veterinary support to the University’s educational and research objectives.

As testimony to Jefferson’s long-standing commitment to quality care, veterinary support and appropriate research use of animals, Jefferson has been accredited by the American Association for Accreditation of Laboratory Animal Care (AAALAC) since 1978 and recently (1987) reconfirmed its accreditation status after undergoing another periodic in-depth site visit.

The benefits of animal research complement both human and veterinary medicine. For example, investigation of human leukemia led to studies of feline leukemia as a model system for this disease. One of the outcomes derived from these comparative medical studies is a licensed feline anti-leukemia vaccine which was introduced to the market in January 1985. Rotaviral enteritis infections in newborn babies are a second serious medical problem. Veterinary research data on bovine and swine rotaviral enteritis led to the use of gnotobiotic piglets as successful models evaluating prototype human rotaviral vaccines. The historic development of polio vaccine in the mid 1950’s contributed not only to human health but also to protection for colony and zoo managed chimpanzees.

Progress in cardiovascular surgery and amelioration of heart disease is indebted to the contribution of many laboratory animal species. Laboratory animal research has directly improved therapies for patients with congenital heart disease, myocardial infarction including coronary bypass surgery, and patients requiring heart valve replacement, and artificial blood vessel grafts. These advances benefit pets as well as humans, as evidenced in the 1986 Devon Horse show on the suburban Main Line, when a horse with a cardiac pacemaker was shown in the Hunter division.

Research on the prevention of disease also relies critically on the appropriate and humane use of laboratory animals to benefit people and animals alike. Laboratory rodents are contributing to our understanding of tumor imaging, the interaction of stress and alcohol, the pathobiochemistry of aging, membrane lipid metabolism in cardiac hypertrophy, and many other basic science and biotechnical research endeavors.

Because Jefferson Medical College is committed to research, and is determined that first quality research be done, many considerations which require the attention of the University Veterinarian and his staff arise. The best species and strain needs to be selected modeling the human system or disease being investigated. Laboratory rodents are available in a multitude of inbred strains, congenics and outbred stocks, each with its unique contribution to science. The genetics of these strains is well understood; mouse lines can be precisely differentiated using selected genetic and biochemical markers.

The source of the research animal is also critical. The breeders/vendors who have gained the approval of Jefferson’s Office of Animal Resources have proven to offer dependably healthy animals, for delivery in a timely manner. The shipping guidelines of the U.S. Department of Agriculture are strictly observed; humane animal handling in transit is evidenced. Ani-
University Veterinarian and new Director of the Office of Animal Resources, David K. Johnson, examines a goat which is housed at Thomas Jefferson University for a cardiology project which enlists skeletal muscle to assist the heart.
mals’ health records — records of birth/acquisition date, breedings, vaccination schedules, medications administered, viral screen results — are provided by these vendors as needed. Production colony histories are also made available.

A healthy animal is a must if research is to be valid. Subclinical infections of certain rodent viruses (e.g. sendai virus and mouse hepatitis virus) are immunomodulators. Detecting and preventing such viral agents are particularly important for studies sensitive to subtle immune response. In addition to the breeders’ rigid genetic monitoring, rodents are now available from breeding sources that maintain the animals free of adventitious pathogens.

Having confirmed the receipt of a healthy animal or group of animals by physical examination and serum sampling, the laboratory animal staff maintains the animals in an environment free from infectious agents specific to the particular species. At Jefferson a dedicated staff is committed to meeting the assorted needs of the animals, among which are the providing of clean and comfortable quarters, and being attentive to the animals’ special caging, ventilation, and temperature requirements. This “veterinary health corps” is skilled in animal health technologies and provides the attentiveness and humaneness that are essential to a laboratory animal research program.

The incorporation of the animals with rigid health requirements into Jefferson’s research protocols necessitates equivalent precision in the maintaining of their physical environment. At Jefferson, improvements in facilities and the acquisition of improved caging will contribute a great deal to the maintaining of animal health, and will control subtle variables that affect research results. To this end, Jefferson is completing a major renovation of one of the two large housing/procedures floors, incorporating modular, cubicle-designed areas that will provide more versatility, and will make possible the isolation of smaller groups of animals from one another. In this same suite, the best equipment available to the industry for cage washing and sterilization is being installed. A suite for radiographic/fluoroscopic imaging of research animals will also be built. This is expected to be very useful for research applications, and will augment the diagnostic capabilities of the clinical veterinary staff. A major renovation is also under way to upgrade the heating and air-conditioning system which is dedicated to the animal housing core in Jefferson Alumni Hall.

Traditionally, when an effort is made to keep individual rodents or groups of rodents isolated from potential sources of infection, a microbial barrier is established at the room level, or even at the building level. This involves strict adherence to “quarantine” procedures whenever personnel, supplies, or new animals enter that area. Personnel might be required to take a shower and wear disposable “jumpsuits,” head covers, filter masks, gloves and footwear; supplies enter through a pass-through steam autoclave or perchloric acid chamber. Litters of new animals might only be allowed to enter while still sealed in the uterus, which has been surgically removed from the mother and sterilized externally. Animal colonies can be kept pathogen free using these methods, and large scale commercial breeders do practice such procedures very strictly, but this approach at Jefferson would prove to be impractical, inconvenient, and accessibility would be limited.

New caging systems are now available, and are being added to Jefferson’s inventory, which put an environmental barrier at the cage level. Their design is based on the same principle as the Petri dish, which, in bacteriology, functions to prevent cross contamination of side-by-side colonies of microbes with its snugly fitting lid. While this system still requires sterilizing of supplies, and the transferring of animals must be done only within a specially-designed laminar air flow chamber, it provides an excellent isolated microenvironment for rodents, and supports investigator’s needs of accessibility.

Certain research protocols require the use of rodents which are infected with one of the rodent pathogens, as animals in certain conditions have been

In December of 1986, Thomas Jefferson University appointed David K. Johnson, D.V.M. as Director of the Office of Animal Resources, to provide University-wide professional oversight and management for all educational and research programs that involve animals. Establishment of this office recognizes the continuing contribution that animals make to research and the awareness of the institutional responsibility for their care and use.

Doctor Johnson entered the speciality of laboratory animal medicine over 20 years ago and is a Diplomate of the American College of Laboratory Animal Medicine. He currently serves as one of their elected Board of Directors. He also is President of the American Society of Laboratory Animal Practitioners and is the immediate past President of the District of Columbia Academy of Veterinary Medicine. Doctor Johnson serves as a Consultant to the American Association of Accreditation for Laboratory Animal Care. His professional experience includes positions in the private and public sector including private practice, the U.S. Air Force, the pharmaceutical field, and the National Institutes of Health. He holds licenses in seven states including Pennsylvania and is designated by the U.S. Department of Agriculture as a federally accredited veterinarian. During his entire career, Dr. Johnson has maintained close professional associations with many veterinary hospitals and practices by providing to them consultation, as well as clinical and surgical services.
shown to be models of human disease. The “Petri dish” microenvironment can be depended upon to protect uninfected mice and rats from their infected neighbors, when used properly. Should there be the need, additional protection is afforded by apparatus such as the polyethylene film chamber — analogous to the “boy in a bubble” concept. Rodent cages can be maintained in this kind of unit, resulting in a sealed room within a room.

In addition to the attention given to maintaining healthy animals for research, the Office of Animal Resources is in the process of refining its employee health program for individuals who work with animals. These people need protection against the obvious diseases, such as tetanus, rabies, and hepatitis. But there are zoonotic organisms of lesser renown, potentially carried by rodents, sheep, primates, cats, and other species, which might pose a threat to human beings in the laboratory setting. The hospital’s Infection Committee, and Student and Employee Health have input into policymaking and on-the-job decisions in this realm.

In keeping with new federal regulations requiring institutional provision for training of laboratory animal personnel, Jefferson has created a unique position, the Administrator of Educational Programs in the Office of Animal Resources. Sherrill Baumgartner, M.S., Latg., formerly Director of the Laboratory Animal Science Program at Harcum Junior College, has filled this position since September 1, 1987. The “charge” of the Administrator of Educational Programs is to “create, develop, and present programs targeted toward the laboratory animal staff at all levels with the purpose of reinforcing present skills in addition to expanding overall knowledge in the field. “Several new programs have already been implemented while others are scheduled to commence shortly. Documentation of participation in all available programs is kept on file with the Administrator of Educational Programs.

Of the programs already in operation, the most successful addition to the
Office of Animal Resources is the Short Course in Laboratory Animal Science. This course was presented as preparation for the AALAS (American Association for Laboratory Animal Science) certification exams and, as a result, 22 Jefferson employees have chosen to sit for the exam either in November or January. Over half of these individuals are research technicians, which is an indication of both a professional attitude toward animal responsibilities on the part of the technician and an overall commitment on the part of the University toward qualified research personnel.

A monthly seminar program was initiated in October for the laboratory animal staff and other interested individuals. Seminars to date include presentations on the commercial diets available to the researcher and the selection of an appropriate feed, the proper use of animal health forms at TJU, gnotobiology, the issue of animal rights and how to confront the concerns of the public, facility management, security and others. The seminar programs are given on a biweekly basis.

In addition, seminars are planned for investigators, research technicians, graduate students, and other interested individuals. A spring seminar is planned on the effect of murine viruses on immunological research.

A biotechniques course was offered in the fall to graduate students enrolled in the first Gibbons Scholars Program (12 total hours with 7½ hours "hands on" animal experience). The response of these students clearly indicates that a well structured, comprehensive introduction to the use of laboratory animals in biomedical research would contribute to the development of these individuals as future researchers. The course will be repeated biannually for all new graduate students.

An orientation program for new personnel involved in animal research is in the final stages of preparation and should be available for presentation in late March or early April. This will include both a core curriculum and assorted specialized curricula based on the area of animal use. Completion of the orientation course program will be required for all new employees working with animals at Thomas Jefferson University.

A biotechniques course will be made available on a quarterly basis for individuals wishing to perfect old, or to learn new skills. This course has been specifically requested by individuals involved in the Short Course in Laboratory Animal Science.

The response of the personnel already involved in courses has been very positive. Furthermore, as testimony to the innovativeness of the department’s educational agenda, a recent site visitation team from the National Institutes of Health evaluated the program as a "national model." On a more practical level, an “in-place” educational program has provided the
means by which the Office of Animal Resources can ensure that individuals charged with the responsibility of caring for, or using animals in research fully appreciate their needs and are sensitive to social concerns about using animals in research.

A veterinarian has been added to the staff to function at the front lines as a hands-on clinician. This expertise will be available to all investigators using animals at Jefferson in an advisory capacity, and to assist in research from the first draft of a proposed protocol through the conducting of the technique(s), and in the evaluating and caring for animals whose ailing health stands to compromise a project.

The laboratory animal medicine program is an institutional program that is responsible for all animals and all animal research, university-wide. Institutional policies regarding animal husbandry, veterinary care, animal surgical research and support facilities are established at the level of the Office of Animal Resources. At Jefferson, the institutional policies are well defined, with commitment from senior administrators and faculty. All applicable state, and federal laws as well as revised U.S. Public Health Service Animal Welfare Policies are essential components of Jefferson’s policies. In December of 1987, the National Institutes of Health, Office of Extramural Research, selected Jefferson as one of ten institutions for a “minimum notice” site visit to review our laboratory animal program. Not only did NIH site visitors find Jefferson to be in full compliance, but they complimented us for having developed a comprehensive laboratory animal medicine program. Senior administrative and faculty involvement were given excellent credit.

Two active committees are crucial to the laboratory animal program. One is the Animal Review Committee that must approve each protocol involving animals, before the study can be initiated. This committee is composed of investigators, a veterinarian, a non-scientist and an outside member who is otherwise not affiliated with Jefferson. During the review of protocols, particular attention is given to the proper and humane procedures involving the animals, including a clear rationale and justification for their use. To date, there are over 350 approved protocols with 121 primary investigators. This Committee invites investigators to committee meetings for the clarification of issues, and the committee will visit the laboratories for additional information. Besides meeting twice monthly, this Committee performs an in-depth site visit of the research animal facilities and laboratories on a biannual basis, as required by law.

The second committee, the Committee on Animal Resources and Supporting Facilities, is composed of members representing those departments using animals. This committee provides advice and recommendations for the laboratory animal program to incorporate investigator’s viewpoints into the laboratory animal program policies.

In summary, the laboratory animal program at Thomas Jefferson University is well defined with full support from the senior administrators and faculty. Its purpose is to facilitate the highest quality of research and educational knowledge through a quality laboratory animal program. The provision of appropriate care and humanness serves to meet the social concerns about the well-being of laboratory animals and their use in research. Moreover, through the diligence of investigators, veterinarians and laboratory animal staff, new preventions and treatments for both people and animals will be developed. A quality laboratory animal program equates with quality research results.

Animal housing areas have been recently renovated. In order to provide versatility of function and the ability to isolate species from species or project from project, small “cubicle style” rooms with sliding glass panel doors have been installed.

Animal feed and bedding are stored under controlled conditions in close proximity to the animal housing areas. Here, feed is being checked for a current manufacturing date.

Also contributing to this article were Kenneth E. Lodge, A.B., Latg., Veterinary Technologist, and Sherrill Baumgartner, M.S., Latg., Administrator of Educational Programs in the Office of Animal Resources.
Psychiatry Service

A service formerly provided by the National Board of Medical Examiners (NBME), which covered ISIE-81 interview coding services, is now available from the Department of Psychiatry and Human Behavior at Jefferson.

Over the past several years, the NBME has provided, on a cost basis, quantitative medical interviewing evaluation services. These services have relied primarily on the use of the Interaction Analysis System for Interview Evaluation (ISIE). This system represents a form of interaction analysis that was developed specifically for use in studies of medical interviews conducted by medical students, residents and trained physicians. The ISIE system was developed by Bryce Templeton, M.D., Thomas Samph, Ph.D., and others at and for the NBME; the development was assisted with an advisory committee chaired by Gordon H. Deckert, M.D.

In the fall of 1987, Bryce Templeton, M.D., Professor of Psychiatry and Human Behavior, completed an agreement with the NBME to move the ISIE coding services to the Department of Psychiatry and Human Behavior at Jefferson Medical College. The purpose of this move was twofold: (1) to increase the availability of ISIE coding services to researchers and other medical educators; and (2) to initiate additional developmental work that will facilitate the preparation of an enhanced version of the ISIE system.

The reliability of the ISIE system has been monitored on a routine basis and, using a modification of Scott’s coefficient, typically yields values of approximately 0.75 to 0.82. Under this new agreement between Dr. Templeton and the NBME, he will take on responsibility for maintaining the reliability of ISIE coding. Because the ISIE system involves direct observation of a clinical skill, concepts of validity which are employed in assessing the utility of indirect evaluation procedures are less applicable. The utility of ISIE as an aid in direct observation depends upon the following: the importance of the interviewing behaviors which ISIE measures in terms of their linkage with important health-care outcomes; the sensitivity of the ISIE system to variations in medical interviewing performance of physician trainees; and the extent to which instructors can, on the basis of our knowledge of outcome research, establish minimum performance standards for the various ISIE measures.

The ISIE system has been used in studying over 1800 interviews of medical students and residents and has been used by more than seven research teams. The most recent study employing ISIE was presented at the RIME meetings last fall and was published in the RIME proceedings. This study was undertaken in collaboration with Nancy Roesky, M.D. and focused on the development of standard setting techniques for use with the ISIE system.

The quantitative nature of the ISIE system permits a researcher or medical educator to make special comparisons in evaluating medical interviewing skills which are not easily achieved using non-quantitative methods: comparing the trainees at various levels of training; comparing the performance of a group of trainees before providing a program of instruction with performance after the instruction has been completed; and comparing a class of students at a given level at one medical school with another class at the same level of training at other medical schools. The ISIE technique also has the advantage of permitting instructors and others to establish explicit standards of performance.

A number of groups have used the ISIE system in conjunction with data checklists (generic checklists for real patients; and both generic and/or patient-specific checklists for simulated/trained patients).

Promotion

The appointment of Deborah L. Jones, Ph.D., as Director of the Office of Continuing Medical Education took place effective March 1. Dr. Jones came to Jefferson in May of 1986 as Associate Director of the Office. As Director, she will have direct responsibility for the development of continuing medical education at Jefferson Medical College, and administrative responsibility for the Office of Continuing Medical Education.

Dr. Jones is a graduate of Sweet Briar College and received her M.Ed. and Ph.D. degrees in Adult and Higher Education from the University of North Carolina at Chapel Hill. For the past 15 years, her professional and research activities have focused primarily on health professions education and the adult learner. Prior to coming to Jefferson, Dr. Jones was the Educa-
national Programs Administrator in the Cancer Department of the American College of Surgeons in Chicago.

chairman

Troy L. Thompson, II, M.D., became Professor and Chairman of the department of Psychiatry and Human Behavior at Jefferson on March 1, 1988. Previously he was Associate Professor of Psychiatry and Medicine and Director of the Division of Consultation-Liaison Psychiatry at the University of Colorado School of Medicine. Doctor Thompson's involvement in teaching medical students, residents and fellows in many specialties (particularly primary care) began when he was a resident in psychiatry and later a faculty member at Yale University. For seven years at the University of Colorado he has been co-director of the primary care internal medicine residency program, the only psychiatrist to hold this position.

Doctor Thompson received his undergraduate and medical degrees from Emory University in Atlanta. He is a member of Phi Beta Kappa and Alpha Epsilon Delta, academic honoraries, and Sigma Delta Psi, national athletic honorary. His research interests include studies of new antidepressants and an Alzheimer's disease medication. The author of more than 100 papers and chapters in textbooks on psychiatry, he has also edited three books and the bulletins of the Association for Academic Psychiatry and the Society for General Internal Medicine.

Nationally Dr. Thompson chairs the American Psychiatry Association's Committee on Consultation-Liaison Psychiatry and Primary Care Education and has served on the Association's task force on cost-effectiveness of psychiatric consultations. He holds memberships on the Executive Council of the Association for Academic Psychiatry and the Academy of Psychosomatic Medicine, and the AMA advisory panel on organ transplantation.

Doctor Thompson is married to Wendy Thompson, M.D., also a psychiatrist. They have a daughter and a son.

alumni president

The new president of the Alumni Association, William Hewson Baltzell, M.D., '46, brings to that office an exceptionally long heritage in Philadelphia medicine, tracing to Joseph Pfeiffer, M.D. who practiced here in the 1740s.

Among other distinguished physicians and surgeons in his family, Dr. Baltzell's great uncle, William Hewson Baltzell, Jr., was Dr. William S. Hals ted's first surgical resident at Johns Hopkins Medical School at the turn of the century. A great uncle, Louis Duhring, M.D., was Professor of Dermatology at the University of Pennsylvania in 1885, following the specialty of Dr. Baltzell's great grandfather, George Duhring, M.D., about 1830.

And to record the history not only of a distinguished family of physicians and surgeons, but of the heritage of America generally, there is E. Digby Baltzell, Ph.D., historian and Professor of Sociology at the University of Pennsylvania, whose Puritan Boston and Quaker Philadelphia is only one of numerous widely acclaimed publications. E. Digby Baltzell is Dr. William H. Baltzell's brother.

Our Dr. Baltzell, Clinical Professor of Otolaryngology, brings to the office of Alumni Association President the experience and expertise of an active career in his specialty.

Dr. Baltzell served as an intern at Jefferson in 1946-47, and then, after
service in the U.S. Army from 1947 to 1949, returned here as a resident through 1953. During the last year of residency he held a fellowship from the American Cancer Society.

A Fellow of the American Academy of Ophthalmology and Otolaryngology, Dr. Baltzell's primary interest has been in bronchoesophagology and laryngology. Over the years he has served at Philadelphia General Hospital, St. Mary's Hospital, Albert Einstein Medical Center, Northern Division and the Henry R. Landis Hospital. During the years 1955-1964, when he was Chief of Laryngology and Bronchoesophagology at the Landis Hospital, Dr. Baltzell saw the census of tuberculosis patients there drop from 400 patients to 30 patients as new drugs for the treatment of the disease were developed and put into clinical use.

Doctor Baltzell has served continuously as a Jefferson faculty member since 1953, in addition to maintaining his busy private practice. He attends Grand Rounds each Wednesday morning, and teaches junior and senior students here on Thursday mornings. His contributions to education at Jefferson can perhaps best be summarized by the fact that he was President of the Volunteer Faculty Association in 1977 and also served on the Executive Committee of the Hospital for a number of years.

On Tuesdays, and after Grand Rounds on Wednesdays, Dr. Baltzell can be found at the Veterans Administration Hospital in Wilmington, where he is a Consultant in Otolaryngology. He is also a Senior Attending Bronchoesophagologist at Chestnut Hill Hospital as well as a Consultant in Otolaryngology at Germantown Hospital. In addition, he has been a Bronchoesophagologist at Methodist Hospital for more than sixteen years, and is a Consulting Surgeon at Pennsylvania Hospital.

He is also the author of several professional publications, among them an article published in the Archives of Internal Medicine in 1971 entitled "The Dying Patient: When the Focus Must be Changed," which was reprinted several times.

Active in numerous specialty organizations, he is a past President of the Philadelphia Laryngological Society, and serves as Chairman of the Section of Otolaryngology of the Philadelphia College of Physicians.

A long-time resident of Chestnut Hill, Dr. Baltzell and his wife, Martha, enjoy the beauty of the Wissahickon there, and also look forward to sailing off the coast of Maine in summer.

Doctor Baltzell has a shop at his Chestnut Hill home where he enjoys "polishing" a collection of antique furniture. Asked to expand upon that matter of polishing he makes an analogy between the art of surgery and the care of precious items from the past. "In surgery," he says, "you do just what you have to do. The use of force is not appropriate. Bad surgeons, indeed, make their own bad luck. The same is true of antiques. If you use force, such as stripping and refinishing, you destroy the patina and character and perhaps spoil the piece."

Dr. Baltzell's contributions to the Jefferson Alumni Association include more than a decade of service on the Executive Committee. Looking ahead, he comments on the exceptional loyalty of Jefferson alumni. "This loyalty is a very precious thing. It is important to keep it viable and growing even as the institution expands. Our alumni influence what our students will be. As our research horizons expand we must work to integrate new associates so that we retain the sense of family which makes our institution unique."

new professorship

Larry A. Donoso, M.D., Ph.D., has been named the first Thomas D. Duane Professor of Ophthalmology at Wills Eye Hospital and Jefferson Medical College. The newly endowed research professorship honors Thomas D. Duane, M.D., Ph.D., former Ophthalmologist-in-Chief of Wills Eye Hospital and Chairman of the Department of Ophthalmology at Jefferson. This is the first endowed chair for Wills and the first chair in ophthalmology for Jefferson.

Doctor Donoso holds M.D. and Ph.D. degrees from the University of Utah. Following residency in ophthalmology at the Lions Eye Research Institute of the University of Louisville, he was awarded a Heed Foundation research fellowship in oncology at Wills Eye Hospital in 1978. He then became a Roland Meyers Surgical Fellow at the Vitreo-Retinal Research Foundation in Memphis, Tennessee before returning to Wills Eye Hospital.

Since joining the Wills staff in 1980, Dr. Donoso has been active in investigations of ocular inflammatory disease and ocular cancer. He is currently the principal investigator of an NIH grant to study the retinal protein S-antigen and its relationship to uveitis, an inflammation of the vascular layer of the eye, and is co-investigator of an NIH grant to study malignant melanoma.

appointments

John J. Gartland, M.D., '54, James Edwards Professor Emeritus of the Department of Orthopaedic Surgery and current Director of the Office of Departmental Review, was recently installed as President of the Council of Medical Specialty Societies. This national organization, founded in 1965, addresses the issues and concerns of specialty medicine in America.

As President of the Council of Medical Specialty Societies, Dr. Gartland will sit on the Council for Medical Affairs along with the chief officers of the American Board of Medical Specialties, the American Hospital Association, the American Medical Association, and the Association of American Medical Colleges.

The Council of Medical Specialty Societies sponsors conferences on such topics as standards of care, technology assessment, funding for graduate medical education, professional liability, physician reimbursement, physician manpower, and interspecialty cooperation, as well as physician continuing education. The Council is also considering a proposal for establishment of a new journal to provide a forum for objective views and positions on current issues. The intended readership would include national, state and local
leaders and health policy decision makers of all types including, but not limited to physicians and health care administrators.

Doctor Gartland, who is a past President of the American Academy of Orthopaedic Surgeons, points out that the United States is the only country in the world where specialists outnumber generalists 52% to 48%. He comments that "If we specialists are to survive in the next decade, we must be concerned with issues that transcend specialty boundaries. Communication, understanding, and cooperation are essential among the various disciplines of specialty medicine."

honors et cetera

Peter Chodoff, Director of Medical Education and Research at The Medical Center of Delaware and Professor of Anesthesiology at Jefferson Medical College, was recently appointed Assistant Dean at Jefferson. His role as Assistant Dean will be to strengthen the educational and research programs between Jefferson Medical College, which is the medical college for the State of Delaware, and the Medical Center of Delaware, which is Jefferson’s largest affiliated hospital and the recipient of the largest number of medical students.

Jerrold A. Glick, Director of Business Administration at Jefferson Medical College since 1979, has been appointed to the position of Director of Planning and Resource Analysis, a newly created staff function within the Office of the Dean. In this position Mr. Glick will be responsible for the development of a long-range planning process for the Medical College; and also for establishing and maintaining a liaison function with those agencies of the federal and Commonwealth governments which relate to the operation of the Medical College.

Robert T. Henry, V.M.D., University Clinical Veterinarian and Adjunct Assistant Professor of Biochemistry (Laboratory Animal Science), was honored at a reception in the Eakins Lounge, Jefferson Alumni Hall on the occasion of his retirement Friday, January 29, 1988.

Marvin E. Jaffe, M.D., ’60, has been named Senior Vice President for Medical Affairs at Merck Sharp & Dohme Research Laboratories. Since his appointment as Vice President for Clinical Research at Merck Sharp and Dohme in 1978, he has led the clinical pharmacology, research and operations groups and other clinical research activities of that company through a period of considerable growth and development, so that it now has clinical research activity in every major therapeutic field. Most recently he has taken on the additional responsibilities of licensing, university and industry relations and clinical research aspects of various regulatory matters.

Dr. Jaffe, who is a Fellow of the American Academy of Neurology, is a Clinical Associate Professor of Neurology at Jefferson, where he has taught for 15 years. He is also Agent for his class.

Dr. Jaffe

Mrs. A. K. V. Klotz, recently installed President of the Women’s Board of Thomas Jefferson University Hospital, is a new member of the Board of the Trustees of the University, succeeding retiring Women’s Board President, Mrs. Peter A. Theodos. Formerly Mrs. Klotz was Chairman of the Maternity Department and a member of the Finance Committee of the Women’s Board. Mrs. Klotz is also President of the National Society of Colonial Dames in the Commonwealth of Pennsylvania.

Carl M. Mansfield, M.D., Professor and Chairman of the Department of Radiation Therapy and Nuclear Medicine, and Mohammed Mohiuddin, M.D., Professor of Radiation Therapy and Nuclear Medicine, are responsible for the operation of a new Jefferson-Chestnut Hill Radiation Oncology Center on the grounds of Chestnut Hill Hospital.

Joseph F. Rodgers, M.D., ’57, Associate Dean for Residency and Affiliated Hospital Programs, attended the 98th annual meeting of the Association of American Medical Colleges in Washington, D.C., November 6-12, 1987. On Thursday, November 12, at the 26th annual Conference on Research in Medical Education, Dr. Rodgers presented a paper entitled “Student Ratings of Clerkship Activities as a Basis for Curriculum Modification: A Four Year Comparison of Six Departments.”

Richard H. Rothman, M.D., Ph.D., James Edwards Professor and Chairman of the Department of Orthopaedic Surgery, has been appointed Overseer at the College of Arts and Sciences at the University of Pennsylvania and also appointed an Associate Trustee of the University of Pennsylvania.

Samuel O. Thier, M.D., President of the Institute of Medicine, National Academy of Sciences, was the speaker at the 24th annual Martin E. Rehfuss lecture. His topic was “The Social and Scientific Value of Medical Research.”

John A. Timour, University Librarian and University Professor of Medical Bibliography, was honored at a reception in the Eakins Lounge, Jefferson Alumni Hall, on the occasion of his retirement December 4, 1987.
The Role of Chinese Principles in Modern Medicine

by Lowell E. Kobrin, M.D., Ph.D., F.A.C.O.G.
Class of 1971

An article designed to breakdown the mythology associated with Chinese medicine and to illustrate how it is totally complementary with modern medical understanding.
Traditional Chinese medicine is an area of study that is seldom pursued by Western trained physicians. To those of us educated through the Cartesian Aristotelian logic system of analysis, Chinese medicine may appear to be archaic, unscientific and minimally comprehensible. How can anyone in this current scientific age make use of concepts such as Five Elements, Six Energies, Qi (pronounced chee) or Yin and Yang? Is there any connection between principles of understanding human disease that are over three thousand years old and modern scientific medicine? Is there a valid source for instruction in this ancient knowledge, and is there practical value to learning such a system in this age of molecular medicine with its advanced diagnostic methods, sophisticated surgical techniques and modern pharmaceuticals?

To begin to answer these questions requires a survey of the historical events which have brought Chinese medicine out of the world of Eastern mysticism to its current integration with the most advanced concepts of quantum physics.

After Christianity had been well-established, Jesuit fathers from France found their way into China. Not surprisingly, they gravitated toward the Taoist monasteries, within whose walls they established residence. It was there that the Jesuits had the opportunity to observe the various aspects of Chinese medicine, since the body of theoretical knowledge and practice of Chinese medicine was largely in the hands of the specially trained Taoist monks. Their knowledge was based upon texts and commentaries, the oldest and most reliable of which came from the seventh and eighth centuries B.C. Recent archaeological findings, however, indicate that Chinese medicine is actually well over 3,000 years old. The endurance of this system of evaluation, synthesis, diagnosis and treatment through the numerous cultural and political changes that have swept China is remarkable. It is probably true that more persons have been treated by Chinese medicine in the course of human history than by any other formalized system of medicine.

The Jesuit priests observed these Chinese physicians treating and curing patients through the use of long needles thrust into specific places on the body, through the use of herbal formulation and dietary therapy. Sometimes the inserted needles were heated with burning herbs (moxabustion). It was the Jesuits who coined the term acupuncture. (L. acus=needle and punctura=to pique). The Chinese name for this procedure was called chen jiu — to pique and to heat. Over the years the Jesuits observed the Chinese physicians carefully, taking meticulous notes and making commentaries in Latin. They also compulsively collected as many copies of the ancient texts and manuscripts as possible and brought all of this information along with their reports back to France in the seventeenth century. These current treasures were stored in Chateau LaFontaine in Marseilles with trunks of ancient books, some of which have only recently been opened. These books can no longer be found in China.

Acupuncture, therefore, has been practiced for a long time in France, with the first official state instruction established in 1822, two years before the founding of Jefferson Medical College. Since that time there were periods of more and less activity in furthering the understanding of this ancient technique. However, not until President Nixon established detente with China in 1972 was acupuncture explained in the light of modern scientific thought. Study groups composed of physicians and other scientists started from scratch to understand acupuncture in order to be as systematic and thorough as possible. Then a major discrepancy occurred which forced the development of two schools of thought. One group of physicians contended that acupuncture had to be explained by some type of complex neural reflex system, while another group followed a more esoteric idea and expounded upon the concept of Energy — the ancient notion of the Qi. The former group of researchers fostered work to demonstrate that acupuncture has influences in such areas as endorphin or neuromodulator production, while the latter group produced work which demonstrated the unique electrical properties of the acupuncture points and the acupuncture channels (meridians). This work was done in accepted scholarly, scientific fashion and was irrefutable.

As more and more research is attempted to solve the “mysteries” of Chinese medicine, it is becoming increasingly clear that the Western Cartesian criteria for evaluation no longer hold true. Research done in the contemporary sense of statistical analysis does not really make much sense in the acupuncture context, except for formula sets used in anesthesia or for first aid in traumatic injuries. A patient is treated for a problem by acupuncture based on his presentation at time T1. At time T2 the presentation is no longer the same. The patient presents slightly differently at Time T2 as a result of the treatment at T1. Therefore, just to repeat the first treatment is no longer correct and appropriate, and it must be modified accordingly. It is very difficult to adapt modern statistical analysis to evaluate this type of therapeutic event. Thus, acupuncture represents a special case, and requires clinical evaluation outside strict Cartesian criteria. This is not to say that we should abandon biochemical and physiological research in an effort to more clearly understand the physical manifestations of acupuncture. Those interested should certainly pursue these experiments, while at the same time remaining open-minded enough to investigate non-structural concepts which offer a logical explanation to numerous observable events in acupuncture therapy, but which are unexplainable through a purely molecular approach.

In France, over the last 20 years, an extraordinary amount of work has been done by physicians-scientists working with Sinologists to decode and reorganize the ancient texts. These individuals have gone over and over the old texts. From their poetic metaphors concerning the concept of Energy, a comprehensive “new age” understanding has evolved which has both theoretical and clinical aspects going far beyond any attempts to reduce acupuncture to a
purely molecular model. The French Medical Acupuncture Association, under the leadership of Dr. Maurice Mussat, has largely been responsible for fostering this work, and has come to the conclusion that it is impossible to understand acupuncture in a modern context and with a modern mind unless one is 1) well-versed in contemporary Western medicine, 2) well-versed in the thinking patterns of traditional Chinese medicine and 3) trained in the most modern understanding of Chinese medicine — "The Energetics of Living Systems" — a quantum physics understanding of the fundamental knowledge underlying acupuncture.

This is the system of understanding that is taught to those medical students who pursue acupuncture training in France, where they are allowed to start their training during their fifth year of medical school (equivalent to our fourth year in this country). This program takes three years to complete. A written and oral examination are required after each year of training and an original thesis must be accomplished to be accepted into the French Medical Acupuncture Association.

Through the collaboration between the French Medical Acupuncture Association and Joseph M. Helms, M.D., Coordinator of Acupuncture Education for the UCLA Medical School Extension, a standard and comprehensive method of teaching Western trained physicians the theoretical and practical aspects of Chinese medicine has been brought to this country. This approach gives full dignity to the ancient texts, while bringing the information into a modern scientific medical context that can readily be grasped since it relates more directly to our familiar Western disease nomenclature.

**The Nature of Chinese Medicine**

Once a physician has completed a training program in Chinese medicine, an important understanding emerges. Our Western focus attempts to find an agent responsible for a disease process: to zero in, then to isolate, change, control or destroy it. Our thinking process reduces the individual into smaller and smaller parts to find a molecular model. The Chinese system, on the other hand, is very expansive. It deals with the same physical manifestations of illness as does Western medicine, but the mental operations that guide the physician's evaluation and formulation of treatment differ radically from the Western approach. The chief complaint of all symptoms, even apparently unrelated minor ones, including the patient's childhood and adult behavioral patterns and illnesses, and even certain preferences are woven together to form a pattern of disharmony. This pattern describes a specific imbalance within the patient. No precise cause nor specific disease, as in a Western sense, is sought: — rather the disharmony pattern renders a workable description of the whole individual, and it is the pattern which forms the framework for designing a therapeutic approach.

Let us use the Western enigma of the Premenstrual Syndrome as an example of a problem that can usually be handled reasonably well in all of its manifestations using Chinese medical principles. The frustration of Western scientists attempting to discover a molecular "cause" to explain and to treat the diversity of physical and psychological manifestations exhibited by a significant number of women in the ten or so days preceding menses has been well documented, and has been the subject of numerous journal articles over the past years. Is there some type of relationship that can be made among symptoms such as dysmenorrhea, easy anger, depression, water retention, migraines and sweets cravings? From a Western medical understanding there is no apparent shared "cause" for these symptoms other than to say that they are somehow related to the ovulation cycle.

Our treatments are focused on each of the symptoms: analgesics for pain, diuretics for water retention, tranquilizers or antidepressants for mood changes, Lomotil for diarrhea and oral contraceptives to "take over" the cycle. To complicate matters, the symptoms may vary from patient to patient in both number and severity. There also may be other side effects from allopathic remedies which can sometimes be more bothersome to the patient than the PMS symptom that one is trying to

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*Lowell and his wife, Judith, who serves as Executive Director of the Coos Bay Downtown Association, have two daughters, Elissa, age 13 and Lara, age 11.*
d fied Field Theory that underlying the entire physically manifest universe is a fundamental entity — the *quantum field* (also called the Unified Field). This is a continuously non-quantifiable medium which is present everywhere. It is a totally undifferentiated field which is toti-potential and it manifests through vibration the entire physical universe, while at the same time maintaining its undifferentiated state. Particles are merely local condensations of the field — concentrations of energy which come and go, thereby losing their individual character and "dissolving" into the underlying field. Einstein wrote — "We may therefore regard matter as being constituted by the regions of space in which the field is extremely intense . . . . There is no place in this new kind of physics both for the field and matter, for the field is the only reality." Over three thousand years ago, the Chinese sages had already understood this concept of an underlying undifferentiated field in its notion of the Tao — the ultimate reality underlying and unifying the multiple things and events that we observe — its principle characteristic being a cyclic nature of ceaseless motion and change. It is empty and formless, yet it produces all forms. Its most fundamental vibration is the very first aspect in the differentiation of energy. This wave form (as do all wave forms) has a maximum positive and a maximum negative amplitude which is constantly changing in polarity as it propagates along a time vector. The most positive amplitude is the theoretical "absolute" *Yang* aspect of the wave, while the most negative amplitude is the theoretical "absolute" *Yin* aspect. (Figure 1)

We must now elaborate for a moment on *Yin* and *Yang* — a very confusing and misunderstood concept for most Westerners. "Yin" and "Yang" are neither forces, material entities nor transcendent mythical concepts. The Yin-Yang theory describes how things function in relation to each other and to the universe. One cannot be discussed without referring to the other. Everything in the universe has two aspects — a *Yin* aspect and a *Yang* aspect. See Figure 1) Any *Yin* or *Yang* aspect can be divided further into *Yin* and *Yang ad infinitum*.

For example, in the body the ventral surface is considered *Yin* in reference to the dorsal surface which is *Yang*, but the front can be further divided into the thorax which is considered *Yang* in reference to the abdomen which is *Yin*. Within a *Yin* (chronic) illness there may be aspects of *Yang* such as sharp, forceful muscle contractions; while within a *Yang* (acute) illness there may be weakness and loss of weight — both *Yin* qualities. In all of nature *Yin* and *Yang* are continually transforming into each other. This constant transformation is the source of all change, — i.e. evolution. It is the activity of life itself.

In the body, for example, inhalation is followed by exhalation; periods of activity must be succeeded by rest. If the transformation process becomes blocked, the relative proportions of *Yin* and *Yang* become unequal. This leads to an excess of one aspect and a deficiency in the other aspect, and this imbalance becomes manifest in the body as emotional and physical disease.

For practical purposes the energy between the most *Yang* and the most *Yin* aspect of the wave can be differentiated into six Vibrational ranges or energy states, and it is within these theoretical frequencies that the energy circulates in the human body via the Qi pathways or meridians. Each energy state has a Chinese name and represents two of the twelve paired meridians which are named according to their representative organ or function. The positive limiting state of "absolute" *Yang* is represented by the central dorsal channel called the Governor Vessel, while the negative limiting state of "absolute" *Yin* is represented in the body by the central ventral channel, the Conception Vessel.

An in-depth discussion of the meridians is beyond the scope of this survey. Suffice it to say that each organ/functional unit has very specific activities in the body that can influence structural, physiologic and psychologic events. Recall our earlier example of PMS, where a "Congestion of Liver Qi" can clinically manifest in hypermenorrhea.
The meridians follow very precise pathways in muscle cleavage planes or between fascia and bone. The Qi is structurally represented within these cleavage plains by the electrically charged interstitial pool of electrolytes which courses throughout the entire body. The meridians are really predictable pathways of least resistance to flow. The acupuncture points themselves can often be palpated as slight depressions or holes. The zone of electrolytic concentration is maximal at the precise point location and it is here that the distant action of the point is most efficient.

The needle tip acts as a positive electrode when placed into the interstitial milieu. Consequently a flow is established in the meridian toward the needle tip. Flow toward the needle tip within the meridian is called dispersion. If the needle is heated, twirled or connected to an electrical current, the tip becomes negative and flow within the meridian is away from the needle. This is called tonification.

Acupuncture points can have properties which affect the organism as a whole or they can be used for their local effect. They can also be used to activate specific functions. For example, if acupuncture points Spleen-4, Kidney-3 and Master-of-the-Heart-6 are needled in that order bilaterally, the endocrine axis is activated. Then, using other points, the energetic influence can be directed to various target organs such as the thyroid, the ovaries, the adrenals or the breasts.

The 12 paired meridians can be arranged to form a workable system based on the Theory of the Five Elements. In this schema the meridians of the Triple Heater, Master of the Heart, Small Intestine and Heart belong to the element Fire; Spleen and Stomach belong to Earth; Lung and Large Intestine belong to Metal; Kidney and Bladder belong to Water; and Liver and Gallbladder belong to the Wood element. This system can be used to affect the body-mind complex according to very specific rules, the details of which are beyond this introduction.

The Five Element concept, which at first glance appears to be archaic, defines a very sophisticated understanding of the human psychophysiologic complex which allows the practitioner to correlate Western pathology with traditional Chinese knowledge. In his text, Texts and Pathology in Acupuncture, the French physician and master acupuncturist, Yves Requena, defines five constitutions named after the Five Elements. A constitution is defined as the set of an individual's congenital, somatic and psychological features, i.e. one's fixed and unchanging genetic heritage. One's congenital heritage includes, most importantly, the program of a predisposition to certain physical traits, be they morbid or physiologic. Susceptibility to infection and to rheumatic diseases, for example, are common traits among those individuals of Water (anergic) constitution; while a predisposition to seasonal and contact allergens, to gall-bladder disease and to right-sided colono pathies would be found in persons of Wood (allergic) constitution. Requena further defines eight specific temperaments for individuals. A temperament refers to one's traits of character — the psychophysiological complex that determines behavior. The predominant constitution and temperament can be determined for each patient, the two factors together defining one's terrain — an individual's innate predispositions that define his physical as well as his psychological reactivity to any type of aggression. Initially one's terrain is determined genetically, but it changes throughout life due to severe climatic changes, psycho-affective shocks and upsets, etc. It is apparent that the accurate determination of a patient's terrain can have great value in designing preventive treatment and counseling. It can also help to understand why certain individuals are more prone to various emotional and physical disorders than are others.

Method of Evaluating

When a patient presents for a medical acupuncture the first visit is quite comprehensive. The method of evaluating the patient encompasses everything which all of us have learned during our medical training plus other factors such as evaluation of the tongue and the taking of the pulses (there are three superficial and other deep pulse positions over each radial artery at the wrist along with 27 pulse qualities).

After evaluating the patient in totality a synthesis is made and the primary treatment is formulated. If a problem is a dense structural one, a surgical or allopathic approach may be indicated, but acupuncture could be added to augment Western treatments. There are often several correct and logical approaches that could be used to initiate therapy, the system chosen being based on the nature of the problem and the experience of the practitioner.

After completion of the first treatment the patient is usually asked to return in one week. At that time a detailed progress report is taken concerning the evolution of the problem since the initial treatment, and a new review of systems is elicited. Based on the evolution of the pathogenic process the treatment could be refined, modified or reformulated. As homeostasis is achieved, as evidenced by decreasing symptomatology and a greater emotional well-being, the treatment sessions are spaced farther and farther apart. It is suggested that patients return for treatments two to three times yearly, especially around seasonal changes, for a reinforcing treatment aimed at maintaining physical and emotional homeostasis within that individual's constitution. Often specific herbal formulations based on the principles of medical acupuncture can be used to augment and prolong acupuncture effects. It may be noted here that about five percent of patients appear refractory to acupuncture treatment, but most of these individuals have also been refractory to Western approaches.

A Vision for the Future

From this overview we can see that the specialty of medical acupuncture is an integrated medicine which allows the practitioner to draw the best from both systems, depending upon the
All the diverse forms of energy and matter in the universe are nothing more than the more differentiated and refined states of this fundamental Energy.

patient's problem. We, as physicians, have the responsibility to learn as much as we can in order to do the most good for our patients while at the same time doing the least harm. Once we have mastered the system of medical acupuncture we have the knowledge to design new types of protocols for clinical research into acupuncture which will take into account the terrain of the patient and the variable disharmony patterns that may underlie a clinical manifestation. For example, there can be seven different disharmony patterns that end up structurally as a peptic ulcer. Without training in Chinese medicine we can only recognize the ulcer itself.

There are now about 140 physicians in the United States who have been trained in this integrated system of medicine and a new academic organization, The American Academy of Medical Acupuncture, has been formed. Textbooks in English are already available, or in preparation. While training is available now only at the post-graduate level, the time will soon come when this knowledge could be integrated with the undergraduate medical school curriculum. This could first be designed as a clinical elective with certain basic concepts (such as the anatomical location of acupuncture points) added in appropriate places in the preclinical years.

The first medical school to develop a department of medical acupuncture will be able to offer a very expanded understanding of the human organism which will find application in every modern medical specialty and allow us, as physicians, to accomplish much more for our patients.

Suggested Reading


2. Connelly, Dianne M. *Traditional Acupuncture; The Law of the Five Elements*. The Centre for Traditional
Integration of Traditional Chinese and Western Medicine

With a history going back thousands of years, traditional Chinese medicine combines unique theories with rich practical experience of such practices as herbal treatments and acupuncture. The government has attached great importance to this cultural inheritance and to developing traditional Chinese medicine and pharmacology. There are now 336,000 personnel in the field of traditional Chinese medicine, including 2036 senior doctors.

The integration of two worlds of medicine is unique to China's history as a rich and ancient civilization seeking the best from Western science. In clinical practice and scientific research, the two schools can make up each other's deficiencies and bring their own strengths into full play. "Letting a hundred flowers blossom and a hundred schools of thought contend" has significantly helped develop medicine in our country.

Dr. Zhang Hongkai
Editor,
Chinese Language Edition, JAMA
1927

Samuel M. Dodek, 2930 Woodland Dr., N.W., Washington, DC, Professor Emeritus of Obstetrics and Gynecology in the School of Medicine and Health Sciences of George Washington University, was honored on the 50th anniversary of the founding of the students' Honorary Obstetrical Society by having his name added to the title of the Society. Henceforth it will be known as "The Howard F. Kane - A.F.A. King - Samuel M. Dodek Obstetrical Society."

Doctor Dodek was also honored by the George Washington University School of Medicine through the establishment of the "Samuel M. Dodek, M.D. Award," which was conferred for the first time on March 13, 1987. The first recipient was Roy Hertz, M.D., Ph.D., pioneer researcher in the field of reproductive endocrinology and the discoverer of the use of methotrexate for the cure of malignant trophoblastic disease.

John H. Gibbon, Jr., was one of five physicians awarded gold medals for Distinguished Service to Medicine by the College of Physicians of Philadelphia on November 20 at ceremonies in recognition of the College's bicentennial anniversary. He was the only physician, now deceased, to be so honored. Robert Gibbon, M.D., '66 accepted the award for his uncle.

Donald P. Ross, 325 Beach Road, Tequesta, FL, writes with happy memories of the 60th reunion from the family's home in Niagara Falls where he has been staying for a brief period.

1931

Jack M. Lesnow, 211 Lincoln Ave., Rockville Centre, NY, writes that "all is well." He says that being retired presents no problem. Travel, reading, gardening and golf occupy his time, and if he had to do it again, he'd retire five years earlier!

Nathan Ralph, 7400 Annapolis Lane, Parkland, FL, has retired. He and his wife recently moved to Parkland where they are living near their son, Jonathan D. Ralph, '76, an obstetrician and gynecologist in Plantation.

1932

C. Earl Albrecht, Drawer L, Bermuda Run, Advance, NC, who serves as President of the American Society for Circumpolar Health, was awarded the J.A. Hildes Medal by the International Union for Circumpolar Health at the VIIth Circumpolar Health Symposia in Umea, Sweden in June, 1987.

Alfred G. Gillis, 777 W. Germantown Pike, Plymouth Meeting, PA, lists the Alumni Bulletin and Contemporary Medicine among favorite journals.

August J. Podboy, 128 Scarboro Dr., York, PA, has been retired from ophthalmology for the past two years, and enjoys reading, music and traveling.

John R. Vastine, 109 Salamanca Ct., Solana Beach, CA, continues to practice in an area community clinic 12 hours weekly. He says he enjoys the contacts with patients in this time of ever changing events in medicine and in health care delivery.

1936

Bernard Mason, 825 12th St., Huntington Beach, CA, is continuing with a closed office practice; and as a Team Physician at Orange Coast College, where a plaque honoring him was installed June 3, 1987.

1937

Everett J. Gordon, 4896 Sentinel Dr., Bethesda, MD, was presented with the Anti-Defamation League's Maimonides Award at a testimonial dinner on November 5, 1987 at the Washington Hilton Hotel. Dr. Gordon has been a practicing orthopaedic surgeon in the Washington metropolitan area since 1946. He has served as Chief of Orthopaedic Surgery at Hadley Memorial Hospital and Jefferson Memorial Hospital as well as Clinical Associate Professor at Georgetown University School of Medicine. He is also active in civic affairs, and has been a member of the Board of the Anti-Defamation League for many years.

1939

James J. Kelly, 20 North Ninth St., Darby, PA, is still in general practice in Darby. He is Medical Director of
Leader Skilled Nursing Facility in Yeadon, and St. Francis Country House in Darby. Dr. Kelly is also one of the founders of Haverford Community Hospital in Havertown, and serves on its Board of Directors. He writes that he is "looking forward to a marvelous reunion in '89."

1941
Frederick A. Robinson, Jr., 160 Foxcatcher Ln., Media, PA, is "completely retired." He has six grandchildren.

1944
Bernard L. Braverman, 17900 Gulf Blvd., Redington Shrs., FL, writes that he was recently a patient at Jeff and "appreciated the excellent treatment."

Samuel D. Kron, 135 S. 19th St., Philadelphia, is no longer in the clinical practice of surgery, but is full-time Medical Director of HealthPass, the largest managed care program for medical assistance recipients in the country.

John A. Martin, 914 Oakwood Drive, S.W., Roanoke, VA, recently retired after 35 years of service to Roanoke Memorial Hospital, 20 of which he spent as Chief Radiologist for Radiology Services. He writes that he's well, busy, and involved with other business interests, Republican politics, golf, and fishing — not in any particular order!

1945
Joseph C. Koch, 4 Ridgemead Fields, Verona, PA, is retiring as Corporate Medical Director of Consolidated Natural Gas Co. He explains that this is a second retirement, as he completed a long career with U.S. Steel Corp. in 1982. Dr. Koch is a Diplomate of the American Board of Preventive Medicine, certified in occupational medicine.

William T. Lineberry, Jr., 1890 Edgecliff Dr., Fullerton, CA, is semi-retired, but is doing locum tenens coverage with two industrial medical clinics. He plans to retire completely in another year.

1946
David G. Simons, 324 12th St., Huntington Beach, CA, was inducted into the International Space Hall of Fame in Alamogordo, New Mexico, as a space pioneer on September 26, 1987. He was honored for his record-breaking 34 hour solo balloon flight to over 100,000 feet on August 19-20, 1957. This flight, made before Sputnik, gave him the opportunity to be one of the first to appreciate the roundness of the earth as seen from space, 20 miles up, above 99 percent of its atmosphere.

1947
S. Victor King, R.D. #5, Box 287A, Tyrone, PA, will retire from active practice of orthopaedic surgery January 1, 1988. He and his wife, Carol, plan to remain in the Altoona area and will be at home to all of their friends.

Gail G.L. Li, 1380 Lusitana St., Honolulu, writes that his youngest daughter, Sheryl, will matriculate at Jefferson in September 1988.


1949
Richard A. Ellis, 1521 Locust St., Philadelphia, a Clinical Professor of Ophthalmology at Jefferson, and an attending surgeon at Wills Eye Hospital and Graduate Hospital, has been elected to the American College of Eye Surgeons, a newly-formed group of intraocular eye surgeons who specialize in establishing quality care in cataract and lens implant surgery as well as general eye surgery.

1950
Irwin N. Perr, 14 Liberty Bell Ct., E. Brunswick, NJ, is the first New Jersey recipient of the Warren Williams Speakers award, presented by the American Psychiatric Association on October 9, 1987. Dr. Perr is a Professor of Psychiatry at the Robert Wood Johnson Medical School of the University of Medicine and Dentistry of New Jersey, and Adjunct Professor of Law at Rutgers Law School, Newark.

1951
Ernest F. Doherty, 103 Waterside Pl., Winders Pond, Grafton, VA, writes that he and his wife, Marie, are enjoying the Williamsburg area very much. He recently sailed on EAGLE to Bermuda and his wife flew there to meet him. He reports a new clinic being built by the Coast Guard.
Jerome I. Greco, E-Z Acres, Drums, PA, was recently named Deputy Secretary for Community Health for the state of Pennsylvania. He was honored at a testimonial dinner in Hazelton on November 14, 1987 for his contributions to the improvement of the quality of life in the northeastern region of the state.

George M. Meier, 11 High St, Butler, NJ, is retiring after 35 years as a pediatrician in Butler. He says, "I wanted to retire while I was still in good health. Why retire when you're too old to do anything?" He plans to continue as the Butler Bulldog team doctor, and will continue to conduct baby clinics in the community.

Benjamin R. Paradee, 9 Colonial Ridge Drive, Haddonfield, NJ, writes that he is planning to retire from administrative duties in his family practice by the end of this year, but will continue to see patients three days per week. He and his wife, Shirley, are grandparents "x 4 and counting."

1952

Jerome I. Brody, 438 Bryn Mawr Ave., Bala Cynwyd, PA, a Professor of Medicine at The Medical College of Pennsylvania, maintains an active consultative practice in hematology/oncology as well as continuing his clinical research. He recently wrote a chapter on Factor VIII Related Antigen in the Coronary Artery in Ischemic Heart Disease for a book, *Techniques in Diagnostic Pathology, Volume I: Techniques in Immunocytochemistry*, to be published by Academic Press. The topic reflects his persistent interest in the association of hemostasis and cardiovascular disease. Dr. Brody's younger daughter entered Jefferson this year with the class of 1991. He writes that the 1987 convocation "was a moving and exciting experience for our entire family."

1953

Franz Goldstein, 707 Arlington, Narberth, PA, writes that he has reached 65 and is now a member of the senior active gastroenterology staff at Lankenau Hospital. He continues to teach Jeff students, is busy practicing, is Governor for Pennsylvania-East of the American College of Gastroenterology, and has "lots of other projects going."

1954

Robert A. Hinrichs, 2007 Galatea Terrace, Corona Del Mar, CA, writes that his younger son, Brad, is a member of the Class of 1991 at Jefferson. Oldest son, Mark, is completing his Ph.D. in English at Rutgers, and daughter Karen has returned to Louisiana State University for her master's degree in nursing.

Henry Wm. Fletcher, 53 Adriance Ave., Poughkeepsie, NY, was recently elected President of the American Cancer Society, New York State Division. Dr. Fletcher, an obstetrician and gynecologist, has served as a member of the New York State Division's Board of Directors since 1985 and is a member of the Medical Affairs Committee.

1955

W. William Porterfield, 3650 Olentangy River Rd., Columbus, OH, has terminated his clinical practice in plastic surgery after 26 years and assumed the position of President and CEO of Physicians Health Plan of Ohio, a physician wholly owned HMO/IPA.

John W. Schelpert, III, 838 Pelhamdale Ave., New Rochelle, NY, has been elected Chairman of the New York State District of The American College of Obstetricians and Gynecologists. Dr. Schelpert, who is in private practice in New Rochelle, is an attending obstetrician/gynecologist at the New Rochelle Hospital Medical Center.

1956

William L. Howe, 602 Williams St., Clearfield, PA, writes that his son, William L. Howe, Jr., '82, will be returning from the Navy in June of this year to join him in his practice of general surgery.

C. Robert Jackson, Madison Medical Center, Madison, WI, was the moderator of a Conference on Medical Ethics, held November 12, 1987 at Gustavus Adolphus College, Saint Peter, Minnesota. Sponsored by the Committee of Physician Friends of Gustavus, of which Dr. Jackson is Chairman, the conference is intended to acquaint pre-medical students with some of the ethical issues they might expect to encounter in a medical career, and gives recognition to the role that a liberal arts college with a religious tradition can play in the formulation of personal ethics.

1957

Raymond G. Tronzo, 1114 N. Olive Ave., West Palm Beach, FL, has been named Clinical Professor of Orthopedic Surgery at the University of Miami Medical School. He writes that he teaches joint replacement there once a week and enjoys the return to academic medicine. He has also been named to the Associate Board of Editors of Clinical Orthopedics and Related Research. The second edition of Dr. Tronzo's book, *Surgery of the Hip Joint*, has just been published by Springer-Verlag.

1958

Henry S. Clair, 1609 Grasshopper Lane, Box 463, Gwynedd Valley, PA, writes that his son, David L. Clair, '84, is in his second year of urology residency at Rhode Island General Hospital. Daughter Beth is an attorney in Jacksonville, FL and is engaged to Jesse H. Eisenman, '84, who is currently a fellow in gastroenterology in Jacksonville.

Frederick W. Floyd, 1212 Lake Point Drive, Lakeland, FL, writes that he is "doing well." Three of his nine children are still in school. He hopes to be present for his class's 30th reunion.

Richard R. Vanderbeek, 664 Spring Valley Rd., B.D. 83, Doylestown, PA, is looking forward to the 30th reunion. His oldest son, a graduate of Lehigh University, is working at the New York Federal Reserve; second son is a student at Lafayette, and third son is in high school. Dr. Vanderbeek is a member of the Board of Trustees of Doylestown Hospital and Director of the Hospice Program.

1960

Charles R. Druffner, 701 Glenburn Rd., Clarks Summit, PA, has recently been recognized for successfully passing the Advanced Achievement Examination in Internal Medicine, a voluntary test designed to recognize and encourage certified internists who continue to maintain the knowledge required for excellent care at a time of rapid change and expansion of medical knowledge. Dr. Druffner is a past president of the Lackawanna County Medical Society and the Lackawanna County Heart Association. A practicing internist in Scranton, he is affiliated with Mercy Hospital, Community Medical Center, Moses Taylor Hospital and Allied
MRI: Introducing A New Technique

David P. Mayer, M.D., 75, was recently appointed Director of the Advanced Diagnostic Institute at Graduate Hospital. Trained in CT-scanning and ultrasound, Dr. Mayer has recently become involved in the field of Magnetic Resonance Imaging.

He has been developing new technologies, and has been disseminating information about existing technologies. In order to address the needs of MRI users, Dr. Mayer recently organized the Delaware Valley Magnetic Resonance Imaging Society.

"Many MRI users are not familiar with the operating and diagnostic possibilities of our equipment so we created the society and designed our meetings to enhance their knowledge."

Dr. Mayer explains the physics of MRI: "Magnetic Resonance Imaging creates images of any part of the body by placing it in a powerful magnetic field and exposing it to radio waves. But MRI is much more complicated than other non-invasive techniques of exploration such as ultrasound, CT-scan and conventional X-ray. In conventional X-ray and CT, for example, there is only one variable that can be manipulated—the density of the material being examined. But in Magnetic Resonance Imaging, several other variables come into play. These variables include proton density, and flow of the T1 and T2 of the body part under study. Moreover, MRI can produce many distinctly different images of the same part of the body depending on how the machine's parameters are configured."

Not only is MRI a more complicated exploratory technique than X-ray, CT-scan or ultrasound, but, believes Dr. Mayer, it will also prove to be a more versatile and more fruitful diagnostic instrument. "MRI is used for much more than cancer diagnosis. I believe that it will have an enormous impact on all medical fields. It is already used for cardiac and obstetrical work. It can be used in orthopaedic work to determine whether the menisci of the knee are torn. It is the best method of determining whether a patient is suffering from multiple sclerosis."

The MRI Society holds monthly Thursday night gatherings. "These are nuts and bolts sessions," states Dr. Mayer. "During the first hour, we share images from clinical cases. During the second hour, technical representatives from various MRI manufacturing firms provide help to physicians. Or physicians lecture on various aspects of MRI research." Physicians can earn a Category I CME credit for each meeting attended.

Until recently, Dr. Mayer was on the Radiology staff at Albert Einstein Medical Center—Northern Division as well as being Medical Director at Elkins Park Radiology Associates. As of July 1st, 1987, he assumed the position of Director of the Advanced Diagnostic Institute at Graduate Hospital, an imaging center devoted to advances in diagnostic radiology.
It's all done with mirrors! No. Not really, but it looks that way. That's David Karasick on the left and Stephen Karasick on the right. The twins frequently collaborate in the diagnosis and treatment of patients. Here they review a chart in the radiology files.

Strangers to the Department of Diagnostic Radiology at Jefferson find themselves seeing double until they sort out the twin Associate Professors, David Karasick, M.D., '74, and Stephen Karasick, M.D., '74. Even their resumes require close scrutiny to distinguish the brothers who graduated from Temple University and from Jefferson Medical College, and then elected to specialize in the same branch of medicine. They were residents in radiology together in Jefferson from 1974 to 1978, then held appointments as clinical assistant professors of radiology at Temple University from 1978 to 1980 while serving as staff radiologists at Episcopal Hospital.

David and Stephen joined the Jefferson radiology faculty in 1980. Today they serve on three of the same department committees: the Graduate Educational Committee, the Resident Selection Committee and the Support Services Committee, as well as being former Clinical Co-Directors of the Radiology Residency Program.

The twins credit their older brother, Sheldon Karasick, M.D., a radiologist at Albert Einstein Medical Center, Northern Division, with inspiring their interest in the specialty.

Within the department at Jefferson, the twins' interests follow parallel but different courses: David Karasick has expertise in orthopaedics and rheumatology, and heads the skeletal subsection of diagnostic radiology. In addition to authoring and co-authoring numerous papers and presentations, he is presently collaborating with Jack Edeiken, M.D., formerly Chairman and Professor of Radiology at Jefferson and currently Professor at The University of Texas System Cancer Center in Houston, in the preparation of the fourth edition of Roentgen Diagnosis of Diseases of Bone.

Stephen Karasick heads the genitourinary subsection of diagnostic radiology and has a special interest in infertility problems. This interest has led him to develop expertise in the use of hysterosalpingography, an important diagnostic method in the evaluation of female infertility.

From these two perspectives David and Stephen have collaborated on a number of publications over the past twelve years. Most recently they have published the Atlas of Hysterosalpingography, in 1987. This detailed reference for radiologists, reproductive endocrinologists and clinical gynecologists describes the techniques and value of hysterosalpingography as a diagnostic method for investigating tubal and uterine factors of infertility.

Stephen Karasick and his wife Dorene, a former banking executive, have a twelve month old daughter, Abby Nicole. David's wife Madelyn, is a second year resident in radiology at the Philadelphia College of Osteopathic Medicine. They have a five month old son, Andrew. □
Rehabilitation. Dr. Druffner and his wife, Patricia, are the parents of five children.

Neil R. Feins, 505 Jerusalem Rd., Kennedy Memorial Hospital, Cohasset, MA, has been promoted to Professor of Surgery and Professor of Pediatrics at Boston University School of Medicine.

Paul J. Schneider, 62 Harrowgate Drive, Cherry Hill, NJ, has just completed his ninth year as Chairman of the Department of Medicine at Underwood Memorial Hospital in Woodbury.

1961

Joseph J. Cirotti, 836 Tennis Ave., Ambler, PA, writes that he and his wife, Ethel, now have only one child in college out of five and four grandchildren. Dr. Cirotti is a pediatrician at the AMH Health Center, an affiliate of Abington Memorial Hospital in Willow Grove, PA.

David K. Subin, 5931 Overlake Ave., San Diego, is practicing surgery of the hand and orthopaedics in downtown San Diego. He is a member of the Board of Trustees of Mercy Hospital and Medical Center, and President of the Mercy Physicians Medical Group, a 260 member PPO. Sons Eric and Ken are both attending Stanford University.

Joseph H. Rosen, 470 Ballymore Rd., Wynnewood, PA, was named a Fellow of the American College of Radiology at the annual meeting in September, 1987. Fellowships to the College are awarded for significant scientific or clinical research the field of radiology, or significant contributions to its literature.

Benjamin Wolfson, 55 Newton Ave., Woodbury, NJ, a specialist in psychiatry since 1970, was the guest speaker at the October meeting of the Chest and Health Association of Southern New Jersey. His topic was "The Dilemma of the Chronically and Severely Mentally Ill Population."

1962

Herbert C. Perlman, 11404 Fleetwood Drive, Carlisle, PA, has been elected a Trustee of the Pennsylvania Medical Society from the Fifth District. Dr. Perlman, who is Chairman of the Radiology Department at Carlisle Hospital, also received a Master’s Degree in Public Administration from Pennsylvania State University in 1986. He teaches a sophomore seminar in Health Planning at Jefferson. He and his wife, Judy, have four children, one of whom, Claire, is a sophomore at Jefferson.

1963

Robert C. Gallo, M.D., 8513 Thornden Terr., Bethesda, MD, was one of five recipients of gold medal awards for Distinguished Service to Medicine presented by the College of Physicians of Philadelphia on November 20 at ceremonies in recognition of the College’s bicentennial anniversary.

Each of the recipients was felt to have made significant contributions to medicine in the spirit of the College of Physicians’ two-hundred-year-old mandate: "the advancement of the science of medicine, and thereby, the lessening of human misery."

1964

James C. Barton, 4073 Frecon Road, Chambersburg, PA, writes that he and his wife, Anne, are looking forward to their silver wedding anniversary this year. Their daughter Anne is a research technician in the Biochemistry Department at Jefferson. He says "As I age, geriatric medicine looks more appealing and is something to identify with."

Stephen C. Kaufman, 3301 Goldsboro Court, Falls Church, VA, writes that his older son, Jeff, is a freshman at the Medical College of Virginia after graduating Phi Beta Kappa from the university of Virginia. Younger son, David, is a sophomore at James Madison University. He adds that there are now five members in his general practice in Alexandria.

Robert M. Steiner, 111 S. 11th St., Philadelphia, presented a lecture entitled "Current Update on the Use of MR of the Body" at Latrobe Regional Hospital, Latrobes, PA, in October. His article "Current State of Residency and Fellowship Programs in Pulmonary and Cardiac Radiology" was published in the American Journal of Roentgenology earlier this year.

Harvey M. Tucker, 23700 Halburton Rd., Beachwood, OH, has been named Vice Chairman of the Division of Surgery, and continues as Chairman of Otolaryngology and Communicative Disorders at the Cleveland Clinic.

1965

Edwin E. Cohen, 1001 Grampian Blvd., Williamsport, PA, writes that his son, Ross, is attending the Pennsylvania College of Podiatric Medicine.

Phillip H. Winslow, 123 Patton Drive, Medical Plaza, Ponca City, OK, writes that his son, Matt, now 19, is a sophomore at the University of Pennsylvania. Son, Paul, age 17, is a junior in high school.

1966

David W. Vastine, 297 St. James Drive, Piedmont, CA, was the Honored Alumni Speaker at the eleventh annual Residents-Alumni meeting of the Department of Ophthalmology, Eye and Ear Infirmary of the University of Illinois at Chicago College of Medicine last May. His topic was The Role of Research in the Private Practice of Medicine. Dr. Vastine completed his residency in ophthalmology at that institution in 1975. According to Dr. Vastine’s father, John R. Vastine, ’32, David was the eleventh member of his family to graduate from Jefferson. His work in world health and infectious disease control began during medical school when, as holder of a Smith, Klein and French fellowship, he served at the United Mission Hospital in Kathmandu, Nepal. Since then he has had U.S. Public Health Service Assignments related to malaria control.
TREASURES FROM THE SOUTH PACIFIC

An Unusual Collection Introduces Art From a Last Frontier

by Cynthia J. T. Clendenin

To visit Theodore A. Feinstein, M.D., 75 at his Philadelphia townhouse is to walk into a remarkable world of New Guinea and Oceanic primitive arts. Tribal artifacts pervade the living space on three levels, blending with twentieth century American furnishings, American impressionist art and seventeenth century Chinese porcelains. The home cum museum was created out of Dr. Feinstein’s belief that any form of art is compatible with everyday life. “New Guinea art is extreme to western eyes,” he comments, “but I feel that as long as it says something, it is not out of place.”

Doctor Feinstein’s gallery is one of only six or seven on the East Coast that deal exclusively in New Guinea and Oceanic tribal art. He describes the purpose of his gallery as being to expose Philadelphians to the art of a people that one day will cease to exist in its present unspoiled form, as the inroads of modern civilization bring new tools and western ideas into the region. “It’s sort of a matter of getting Philadelphians to open up a bit,” he comments. “To have them see that this art can be every bit as imaginative and expressive as the western art they are more familiar with. At the same time I want to make them realize that true art of any kind can be compatible with everyday life. That it can be integrated into a home for continuous enjoyment.”

Doctor Feinstein has been collecting art since he was 15 years old. While an undergraduate at LaSalle College, where he majored in biology and minored in art history, he began importing and dealing in posters and graphics. He also began collecting works of contemporary American impressionists, an interest which he continues today. During his internship and residency in obstetrics and gynecology at Jefferson he developed an interest in seventeenth and eighteenth century Chinese porcelain renditions of silver patterns from the American colonies.

Not long thereafter he became interested in African primitive art through its influence on the works of Braque, Mondigliani and Picasso, and then purely by accident came across an article comparing African and New Guinea art. He soon came to realize that whereas African art can no longer be regarded as truly primitive, the art of New Guinea represented a last frontier of unaltered styles.

“Each piece of art that I have is fascinating to me, but the New Guinea art seems the most vivacious,” he comments, “and there is a certain religious quality about it. The trading pieces don’t especially speak to you because they don’t tell a story, but the other pieces speak to you even if you don’t know the story.”

Doctor Feinstein explains that about 120 different tribes inhabit New Guinea, one of the largest non-continental islands in the world, but because the terrain is so mountainous and thickly forested in the interior, some tribes are completely unaware that others even exist.

Many of the Papuan tribes have no written language, but translate their beliefs through sculpture and art. Perhaps it is this need for expression which accounts for the surprising degree of intricacy and sophistication in the design of their artifacts.

The art is an expression of good will, such as an appeal for successful crops, never evil; and it is functional, not merely decorative. No modern technology is used; the varied colors of the pieces come not from paint but from
The objects are usually made of wood or clay, decorated with shells, sago palm fronds, and other natural products, including feathers, seeds, and human hair. Even the most practical utensils and tools are ornamented, as well as the ubiquitous basket hooks which are used to hang foodstuffs from the rafters of the huts, out of the reach of rodents.

For the most part, it is the women who work with clay to make vessels for cooking and storage, while the men use stone cutting tools to produce the art objects, working primarily with wood. The art objects are used only by men, for rituals, and are stored in their club-houses, or *haus tamboran*. These sacred objects are never seen by women, or youths prior to initiation into manhood. Women do make the finials which are placed on the gable ends of the *haus tamboren*. These clay figures symbolizing life usually depict a human being with a bird squatting on its head or shoulders, or more rarely a crocodile.

Birds and crocodiles are recurring motifs. Doctor Feinstein explains that representations of these creatures retell ancient legends, one of the most famous of which describes two village women who went out onto a lake in search of food after the crops had failed. One of the women climbed onto a large pole in the center of the lake to fish, while the second woman rowed to a distant part of the lake and later forgot her friend and returned to her village alone.

An exhausted bird came and sat upon the head of the woman who remained, and because she allowed it to rest there, the bird sought help for her from the Spirit Maselai. The woman was taken to the Spirit's kingdom below the lake, where she gave birth to two eggs. Returning to her village, she hatched the eggs beside the fire. One egg hatched into a bird, which she gave to the forest, and the other into a crocodile, which she gave to the rivers and lakes. Ever after, when the rivers are flooded, the bird child of the forest offers food for the village; and when the crops fail, the crocodile child of the rivers and lakes provides fish, and the people do not go hungry.

The human form dominates Papuan tribal art. Frequently figures portray an important ancestor. Hence a hunter may be depicted without an arm, to tell his story. Representation of fire may symbolize death, or it may symbolize man's control over his environment, since he would have had to capture fire.

Although little decoration is worn in the daily life of the tribes, ceremonial occasions call for elaborate bodily adornment including masks, arm and head bands, leaf and shell ornaments, and painting of the face. Another aspect of bodily decoration is the elaborate ritual scarring of the skin of young men as they are initiated into manhood, to symbolize the scales of the crocodile.

Trading items, long important to the economy for exchange among tribes along the Sepik river, reflect stylizing of more complicated mythologic forms, typically masks carved in relief, with the details exaggerated. Since 1945 there has been a rapid explosion of interest in New Guinea art and trading artifacts are now in demand for export. Not surprisingly, this has tended to have
a deleterious effect upon the uniqueness and originality of many of the items available abroad. Knowledgeable collectors seek instead the artifacts sheltered in the haus tamboren, and seldom available to westerners.

Doctor Feinstein's collection of rare sacred objects serves many purposes in demonstrating the high degree of skill and imagination of these artisans. He explains that he likes to consider himself a custodian of the artifacts, rather than an owner, much as a collector of rare violins rarely describes the instruments as his own. For Dr. Feinstein, being able to present these items to people in America is akin to a trust—placing him in the role of emissary to tell people about an ancient and as yet unspoiled land —probably the last true stronghold of primitive art in the world.

From 1979 to 1984 Dr. Feinstein was associated with the professional corporation of Montgomery, Bowers, Loewenberg, and Hyett, M.D.’s, after which he began the solo practice of obstetrics and gynecology at 1015 Chestnut Street. Active in numerous professional organizations, and busy with his practice, he somehow still finds time to journey to far away places about twice a year in pursuit of his art interests. “I never schedule a trip at a time when one of my patients is due to deliver,” he emphasizes, “and showing visitors through the gallery also has to be arranged around responsibility to my patients, but somehow it all fits together, and my office is even an extension of my gallery!”

in West Pakistan, smallpox eradication in Puerto Rico, Sierra Leone, and Upper Volta, and studies on the treatment of trachoma in Tunisia. Also, in cooperation with the University of Alexandria, Egypt he has made field trips to study the ecology of trachoma and other eye infections in that country. Dr. Vastine is Chief of Ophthalmology at Highland General Hospital, Oakland, California, a consultant and senior at the Medical Research Institute, Pacific Medical Center, San Francisco, and Director of the Lions Eye Bank of the Northern California Transplant Bank.

1967
Stephen Slogoff, 7710 Flax Drive, Houston, TX, has been elected Vice President of the American Board of Anesthesiology. His daughter, Michele, is a freshman at Brandeis University.


1968
Thomas J. Gal, 1480 West Pines, Drive, Charlottesville, VA, has been promoted to Professor of Anesthesiology at the University of Virginia. Dr. Gall has also been appointed to the editorial board of Anesthesia and Analgesia, a leading journal in the specialty.

1969
Garrett E. Bergman, 9 Shirley Rd., Narberth, PA, a Professor of Pediatrics at The Medical College of Pennsylvania, was recently awarded that institution's 1987 Lindbach Award for excellence in clinical teaching. Dr. Bergman has been co-director of the medical humanities program at the college since 1977. He also directs the pediatric hematology research laboratory there.

1970
William J. Lewis, III, 831 Northwinds Dr., Bryn Mawr, PA, has been appointed Chief of the Department of Otolaryngology at Lankenau Hospital. He is also a member of the Executive Committee, and Chairman of the Laser Committee and Medical Review Committee at Lankenau.

Paul M. Selinkoff, 7210 Louis Pasteur, San Antonio, TX writes “My daughter,
Jessica, born while we were living at Orlowitz, is now a freshman at Brandeis University. Makes me feel old!"

Neil O. Thompson, Christian Hospital, Manorom, Chainat 17110, Thailand, wrote while en route back to Thailand to say that the Continuing Medical Education trip to Malaysia in January 1987, and the trip to Thailand last June left him with a desire to return to Thailand to join the team at Manorom Christian Hospital. The team is dedicated to providing high quality care for the needy in Central Thailand, but he notes that the hospital still has a strong need for an obstetrician, a surgeon, an administrator, a pharmacist, and an anaesthesiologist, among others. He comments that the work and lifestyle he has chosen won't bring material wealth, but he looks forward to the personal relationships.

1971

David R. Cooper, 475 Millington Rd., Shavertown, PA, writes "please let my classmates know that I haven't had any more kids, have not been appointed to any position, and if anyone happens to be in the area, I don't want them to look me up. Happy 1981!"

John C. Iacuzzo, 187 Meadow View Rd., Bridgewater, NJ, has been elected President of the Medical-Dental Staff at Somerset Medical Center, Somerville, NJ.

Edward B. Ruby, 1133 Laurel Ln., Huntingdon Valley, PA, recently participated in the meetings of the Pennsylvania Chapter of the American College of Physicians. He was selected as Vice President of the Pennsylvania Endocrine Society.

1972

Richard T. Bell, 2016 Redwood Ave., Wyomissing, PA, was installed as the 109th President of the Berks County Medical Society on January 15th. Dr. Bell is a member of the staff of Pulmonary Medicine Associates, Inc. in West Reading. He serves as a member of the boards of the American Lung Association of Pennsylvania, and the American Lung Association of Berks County.

Alan S. Friedman, One Baycrest Court, Margate, NJ, writes: "Sheila and I and our three children, Eric, 14, Rachel, 10, and Jason, 4, are happily living in Margate.

Arlen D. Meyers, University of Colorado School of Medicine, 4200 E. 9th Ave., Box B-210, Denver, was one of 19 otolaryngologist-head and neck surgeons to receive the Honor Award of the American Academy of Otolaryngology-Head and Neck Surgery at its 91st annual meeting in September. The award recognizes those who have contributed service to the Academy without remuneration, such as presentation of an instruction course or scientific paper or participation on a continuing education committee or faculty.

1973

Peter R. Hulick, 1333 Old Saybrook Rd., Lancaster, PA, has moved with his family from Lynchburg, VA. He will be setting up a new practice of Radiation Oncology and will be joining St. Joseph's Radiology Associates in Lancaster. He writes that he, his wife Mary, and their son, Peter James, are all excited to be back in southeastern Pennsylvania.

Gary J. Levin, 1500 Cardinal Drive, Coatesville, PA, is Chief of Ophthalmology at Brandywine Hospital and Trauma Center. He has recently completed construction of his new 12,000 sq. ft. office building in Thorndale, Chester County. He says "All the planning was well worth it." Dr. Levin and his wife, Susan, have two children, Eric, age 9, and Stephanie, age 7.

Arnold F. Traupman, 1019 Prospect Ave., Bethlehem, PA, has been joined in the practice of general ophthalmology by William J. Kitei, 75.

1974

Joseph R. Berger, 6460 S.W. 109 St., Miami, FL, is a tenured Associate Professor of Neurology and Internal Medicine at the University of Miami School of Medicine. He is the project director and principal investigator of a recently awarded program project from the National Institute of Neurological, Communicative Disease and Stroke to study the neurological complications of AIDS.

Joel M. Brown, 3405 Therodumn Dr., Plano, TX, writes that he and his wife, Sharon, and their two children, Jennifer, 13, and Jeremy, 10 are living in Plano, a north Dallas suburb, where he is in private practice.

William A. DiCuccio, 1020 New Jersey Ave., Box B-210, Butler, PA, has been named President-elect of the Medical Staff at Butler Memorial Hospital. Dr. DiCuccio, a family practitioner, is also Medical Director of the Sunnyview Home.

Victoria A. Gillis, 1366 Hillsdale Dr., Monroeville, PA, writes that she has a new baby, Charles Edward Hall, born April 17, 1987. She also has a new job, Emergency Room Physician at Mercy Hospital in Pittsburgh.

Michael H. LeWitt, 1128 Cymry Dr., Berwyn, PA, and his wife, Lynne, are the parents of a son, Jeremy Noah, born January 8, 1988.

William M. Schulman, 1493 Parkside Dr., Lakewood, NJ, and his wife, Barbara, announce the birth of a son, Julian Michael, on March 5, 1987.

Barry S. Stein, 16 Wildflower Rd., Barrington, RI, writes that he, his wife Natalie, and their three children are alive and well in Rhode Island. He has recently been named to the editorial board of two journals: Lasers in Surgery & Medicine, and the Journal of Endourology. He sends regards to all of his friends.

Steven L. Weinstein, c/o Dept. of Neurology, Stanford University Medical Center, Rm. C-390, Stanford, CA, has been awarded a $25,000 Merritt-Putman Clinical Research Fellowship for a study entitled "Early Post-Ispemic Seizures in the Newborn Infant." Through continuous EEG and video recordings of infants Dr. Weinstein hopes to "better define the natural history of hypoxic-ischemic injury leading to a seizure and potentially identify neonatal intensive care interventions which are likely to impact on seizure occurrence." Dr. Weinstein is a resident in pediatric neurology at Stanford University.

1975

William J. Kitei, 1313 Center St., Bethelhym, PA, is practicing general ophthalmology with Arnold F. Traupman, 73. His second son, Paul Michael, was born March 14, 1987.

Mary Louise Kundrat, 4929 Bayard St., Pittsburgh, and husband Larry Wickerham are the parents of a son, Andrew Lawrence, born May 22, 1987.

Edward S. Schulman, 911 Bonapart Ct., 9th & Manning Sts., Philadelphia, has been appointed Associate Professor of Medicine and Director, Division of Pulmonary Medicine at Hahnemann University. Dr. Schulman was an Assistant Professor of Medicine at Jefferson from 1983 to 1987 and served as medical director of Jefferson's Pulmonary Function Laboratory. In his new role at Hahnemann, Dr. Schulman will continue his NIH support research on human lung mast cells and their relation to pulmonary disease.
Arthur Sitelman, 7 East Orangewood Avenue, Phoenix, AZ, has been Chief of Pathology and Medical Director of the Clinical Laboratory at Phoenix Memorial Hospital since June 13, 1987.

1976

David C. Brock, 1633 Colony Dr., Wyomissing, PA, returned to private practice in September 1987 at Bernville, PA, with his former partner. He is also teaching part-time at the Reading Hospital and Medical Center Family Practice Program.

Bruce J. Rosen, 22 Cedar Hollow Dr., Wallingford, PA, writes that he and his wife, Karen, Diploma School of Nursing '76, are the parents of a son, Jason, born October 24, 1987.

Melissa Reidy Spevak, 135 Beaconfield Rd., Brookline, MA, married Philip Spevak, M.D., on September 19, 1987. He is a pediatric cardiologist at The Children's Hospital, Boston, and Melissa is a pediatric radiologist at the University of Massachusetts Medical Center in Worcester. Classmates Nancy Satur Lortscher and Monica Morrow attended the wedding.

1977

Jeffrey S. Adam, and Wynn Wygal Adam, 321 Shady Crest Dr., Kettering OH, have moved to Dayton, Jeff's hometown, where Jeff has joined his brother in the practice of E.N.T. Wynn has joined a group of ten radiologists and is now working full-time. Their children are Tom, 8, Stewart, 5, and Becky, 3. Wynn notes that Margaret M. Dunn and Virginia Chalfant Wood are also in the Dayton area.

Leigh Baltuch, 684 Pinebrook Dr., Virginia Beach, VA, writes that he and his wife, Linda, are happy to announce that son Daniel now has a baby sister, Rachel, born October 21, 1987.

George E. Connerton, 145 N. 6th St., Community General Hospital Pathology Dept., Reading, PA, was recently installed as Secretary of the Berks County Medical Society.

John V. LaManna, R.D. 4, Box 4314, Mohnton, PA, and his wife, Debra, have recently celebrated the birth of their first child, Meredith Eileen.

Eric J. Michael, 19 Orchard Place, Little Silver, NJ, has a new position as Chief, Section of Neonatology, in the Department of Pediatrics at Monmouth Medical Center, 300 Second Ave., Long Branch, NJ.

Brent R. Noyes, 24 Yellow Pine Ct., Wilmington, DE, and his wife, Susan, announce the birth of Jillian Elaine on October 29, 1986, and report that she is growing fast!

Fred Teichman, 108 James Rd., Lewisburg, PA, writes that he and his wife, Lynn, play golf at the Bucknell Golf Club. Lynn received the Golf Digest Most Improved Golfer Award this year at their club. Watch out LPGA!

1979

Larry J. Kachik, R.D. 1, Box 160 Commodore, PA, was recently board certified in emergency medicine. He is currently the Director of Emergency Services at Indiana Hospital, Indiana, PA. He writes that he is still racing a stable of harness horses and enjoying every minute of it.

Richard W. Ziegler, 404 Brentwood Rd., Havertown, PA, has joined Chester County Orthopaedic Associates in West Chester working out of Chester County Hospital.

1980

Lawrence P. Bressler, 2991 Schoolhouse La., Philadelphia, has been appointed to the staff of the Department of Medicine-Nephrology at Doylestown Hospital, and will also be in private practice in Doylestown.

Marianne T. Ritchie, 619 College Ave., Haverford, PA has been appointed an Instructor in Medicine at Lankenau Hospital.

1981

Terry Ann Clouser, has been appointed an Instructor in Emergency Medicine at Lankenau Hospital.


1982

Ronald J. Brockman, 915 Melrose Ave., Melrose Park, PA, was recently appointed to the Cataract and Primary Eye Care Service of Wills Eye Hospital. Dr. Brockman, a member of Huntingdon Valley Eye Care Consultants, Ltd., is in private practice at the Holy Redeemer Hospital Medical Office Building.


William L. Howe, Jr., will be returning from the Navy this June to join his father, William L. Howe, ’56, in practice in Clearfield, PA.

Denise Crilly McFadden, 138 Carteret St., Glen Ridge, NJ, gave birth to a 9 lb., 11 oz. baby girl, Megan Elizabeth, in September 1987. Denise has finished her fellowship at New York University, and began as a practicing radiologist at St. Vincent's Hospital in New York City in January 1988. She is in charge of CT imaging at the hospital.

David K. Moore, Route 1, Box 10, Sautee, GA, and his wife Ann, are the parents of a son, Michael Andrew, born July 3, 1987. Michael joins Adam, who was two years old in October. David is currently practicing in Cleveland, GA.

Richard A. Nesbitt, 606 Country Club Dr., Bloomsburg, PA, has joined the Geisinger Medical Group practice of Drs. Ernest Campbell, Richard Delp and David Gorby. Dr. Nesbitt completed his residency in internal medicine at Geisinger.

William J. Paronish, P.O. Box 372, Elmora, PA, is practicing family medicine at Miner's Hospital, Spangler, PA, and recently opened a second office in Cherry Tree. He and his wife, Debra, have two children, Kelly, age 4, and William Jr., age 1.

Steven W. Pearson, 1914 Corinth Ave., Los Angeles, CA, will be finishing his Foot and Ankle fellowship in June and will be joining the Orthopedic Group of Santa Barbara in July 1988.

Frans A. Vossenberg, III, 1820 Wightman St., Pittsburgh, is in the first year of a three year fellowship in cardiology at Presbyterian Hospital-University of Pittsburgh. He writes that he and his wife, Karen, and their son, Frans, are enjoying "America's most livable city, Pittsburgh, PA."

Mark L. Zwanger, 27200 Franklin Rd., Southfield, MI, has been appointed Associate Residency Director in Emer-
gency Medicine at Wayne State University Medical School, Detroit Receiving Hospital.

1983

Saul Helfing, 18750 NW Rock Ck Cr 90, Portland, OR, is completing his residency at Oregon State University and will begin a fellowship in emergency psychiatry at the University of Cincinnati in July.

Daniel G. Orr, 14 Rampart Dr., Wayne, PA, has opened the Eagle Family Medicine Center in the village of Eagle, PA. Dr. Orr, who was formerly associated with a family practice group in Conshohocken, is a member of the staff of Chester County and Paoli Memorial Hospitals.

Kemuel Philbrick, 8052 Maple St., Fairchild AFB, WA, writes that after serving as an internist at Fairchild for the past 1½ years he will begin a residency in psychiatry at USAF Wilford Hall Medical Center, San Antonio, TX in July. He and his wife, Beth, are the parents of a son, Ian Wenger, born October 5, 1987.

Irene Raisis and Leonidas Raisis, 1003 Ashbrook Ct., Voorhees, NJ, are looking forward to seeing their old classmates at the fifth year reunion. Dr. Leonidas Raisis will be joining John Hogan, M.D. in the practice of orthopaedic surgery at Christiana Hospital, Wilmington, DE.

1984

David L. Clair, 3595 Post Rd., Warwick, RI, is in his second year of urology residency at Rhode Island General Hospital.

Jesse E. Eisenman, 644 West Eighth St., Dept. of Gastroenterology, Jacksonville, FL, recently announced his engagement to Beth Clair, daughter of Henry S. Clair, '58 and sister of David L. Clair, '84. Beth is an attorney in Jacksonville.

George B. Lisehora, Box 4444, Tripler Army Medical Center, Honolulu, and his wife Tanya ran into Richard W. Tobin, Jr. and his bride, Lisa, in San Diego last October. It is reported that “orthopaedic residency is consuming Rich’s time. He’s three months behind in reading his subscription to Spiderman Comics, demonstrating ‘unprecedented dedication.’”

Gregory D. Mock, R.D. 1, Box 47, Boswell, PA, and his wife Marcia celebrated the first birthday of their fourth child, Emma, on December 9. Their family also includes Colin, 13, Natalia, 4, and Evan, 2. Dr. Mock is completing his last year of family practice residency and planning to go into practice in Davidsville, PA.

Raymond J. Petrillo, 191 Kent St., Brookline, MA, began a three year nephrology fellowship last July at the Beth Israel Hospital, Boston, MA.

Ayn Siegel Zaback, 233 Township Line Rd., Elkins Park, PA, was married to Allan Zaback on July 18, 1987. Dr. Zaback is a resident in psychiatry at Albert Einstein Medical Center. Her husband is Assistant Director of Development at Jeanes Hospital.

Cynthia Coughlin Hanna, 41 Lookout Ave., North Providence, RI, is a third year resident in obstetrics and gynecology at Women & Infants’ Hospital in Providence. She was married in April 1987 to George M. Hanna, Jr., M.D., a cardiologist.

Joseph B. Szgalsky, 102 Red Bank Court, West Deptford, NJ, is Chief Resident at Underwood Memorial Hospital in Woodbury, NJ.

1985

David S. Altman, 402 Laura Dr., Danville, PA, has begun his first year of urology training at Geisinger Medical Center, Danville, PA. His wife, Lisa Altman, D.O., will be completing her pediatrics residency this spring.

Gary E. Fishbein, 6100 Westchester Park Dr., College Park MD, married Jacqueline Shapiro on August 16, 1987 in Wynnewood, PA. He will begin an oncology fellowship at the University of Maryland next July.

Cynthia Coughlin Hanna, 41 Lookout Ave., North Providence, RI, is a third year resident in obstetrics and gynecology at Women & Infants’ Hospital in Providence. She was married in April 1987 to George M. Hanna, Jr., M.D., a cardiologist.

Joseph B. Szgalsky, 102 Red Bank Court, West Deptford, NJ, is Chief Resident at Underwood Memorial Hospital in Woodbury, NJ.

1986

Thomas J. Meyer, 30 E. Elm St., Chicago, IL, is completing his second year of residency in internal medicine at Northwestern University.

Mark J. Pressman, 43J Reading Rd., Edison, NJ, was married June 14, 1987 to Michelle Rein, a health care administrator who is employed by Diversified Health Services, Plymouth Meeting, PA. Dr. Pressman is a first year surgery residency at University Hospital, Newark, NJ.

1987

Obituaries

James L. Fisher, 1918
Died December 24, 1987 at the age of 92. Dr. Fisher was a general practitioner in the Youngstown, Ohio, area where he had practiced for over 57 years. During his lengthy career there Dr. Fisher, in addition to his practice, was a past President of the Mahoning County Medical Society and editor of the Mahoning County Medical Society Bulletin. He has been cited many times by his Society over the years. His sons, Robert, M.D. and James L. Fisher, Jr., and a daughter, Margaret, survive him.

Victor I. Barrows, 1921
Died November 16, 1987 at the age of 93. A native of Vermont, he retired to Holiday Florida in 1980. He is survived by his wife, Lillian, a son and a daughter.

Lawrence F. Corrigan, 1925
Died May 14, 1987 at the age of 89. Dr. Corrigan was an Obstetrician-Gynecologist in the Hazleton, Pennsylvania area.

I. Charles Lintgen, 1925
Died December 14, 1987 at the age of 93. A Clinical Professor of Obstetrics and Gynecology at Jefferson at the time of his retirement, Dr. Lintgen was a member of the medical staff of Methodist Hospital, Bryn Mawr Hospital, Germantown Hospital and Burdette Tomlin Memorial Hospital in Cape May Court House, N.J. For 40 years he served as agent for his Jefferson class. His wife, Elizabeth, and a son, Arthur B., '66, an internist in Abington, survive him.

Roger Murray, 1925
Died August 11, 1987

William B. Barr, 1926
Died November 20, 1987 at the age of 90. He was Chief Emeritus of Allen-town Hospital's Gastroenterology Department. For many years he served as the head of the Gastroenterological Clinic. He served as a Fellow of the American College of Gastroenterology and was honored by his medical community numerous times. In 1976 the Lehigh County Medical Society cited him for his 50 years as a physician.

Alvord Stone, 1926
Died October 2, 1987 at the age of 88. Dr. Stone was a general practitioner in
Tampa Bay, Florida from 1928 until his retirement in 1973. For many years he donated his time to the Children's Home of Tampa, and the Salvation Army Maternity Home at Lake Ellen. He is survived by two daughters and two sons, one of whom is James L. Stone '56.

Jacob J. Levy, 1928
Died March 25, 1987 at the age of 89. He was a resident of Allentown, Pennsylvania.

Evan B. Hume, 1929
Died August 23, 1987. At the time of his retirement in 1978 Dr. Hume was a staff physician and former Chief of Medicine at the Martinsburg, V.A. Medical Center. Earlier he had been a member of the staff of the V.A. Hospital in Beckley, West Virginia. During World War II, Dr. Hume served as a member of the reactivated original Jefferson Unit of the AUS Medical Corps, 38th General Hospital, which was the first U.S. Hospital in Africa during that war. At the time of the Cairo Conference he was Chief of the Department of Dermatology and was asked to see and treat several of the dignitaries attending the conference, among them Mme. Chang Kai-shek. He is survived by his wife, Mary, two sons and two daughters, two step-sons and a step-daughter.

Arnold H. Williams, 1930
Died November 12, 1987. Dr. Williams had been a pediatrician in Laurel, Delaware for 50 years. He was a member of the staff of Milford Memorial Hospital, Nanticoke Memorial Hospital and the Sussex County Health Unit in Georgetown and Laurel. For many years he served with the Edward W. Pyle State Service Center near Roxana. Active in professional organizations, the Delaware Consistory and the Kent & Scottish Rite Club, he was also an accomplished amateur artist. Dr. Williams is survived by his wife, Mildred, and three sons, one of whom is Jonathan L. Williams, '77, Director of the Division of Pediatric Radiology at Jefferson.

Charles W. Bair, 1932
Died October 16, 1987 at the age of 79. Dr. Bair, a physician in the Lancaster County General Hospital area, treated many patients there including smallpox patients, well-baby clinic patients and indigent patients in Lancaster. From 1948, Dr. Bair has been the Medical Director at both the Quarryville Family Health Center. In 1954 he served as President of the Lancaster City and County Medical Society and was named in 1961 the General Practitioner of the Year. He is survived by three nieces.

Stiles D. Ezell, 1932
Died February 23, 1988. Dr. Ezell first practiced in Middletown, New York, prior to accepting his post of Secretary to the New York State Board of Medical Examiners. Dr. Ezell also served as the Associate Secretary of the Federation of Medical Boards and was Editor of the Federation Bulletin. A past President of the Orange and Washington County Medical Societies, he served as delegate to the first world conferences on medical education, one in London, one in Chicago. Dr. Ezell received the Salem, NY Citizen of the Year Award in 1973. He retired to Manchester Center, Vermont in 1987. Dr. Ezell served as Class Agent for his class for many years. Surviving are his wife, Jean, and three sons.

Isaac E. Harris, Jr., 1933
Died May 19, 1987 at the age of 78. Dr. Harris, of Durham, North Carolina, was certified by the American Board of Surgery.

Raymond F. Smith, 1933
Died September 19, 1987. A native of Brooklyn, Dr. Smith joined the staff of Nassau Hospital (now Winthrop University Hospital) in 1936 as Chief Resident, and went on to become Chief of Surgery and Oncology there. He was also active on the surgical staffs of Nassau County Medical Center (Meadowbrook Hospital), Mercy Hospital and South Nassau Communities Hospital. Dr. Smith was a past president of the Nassau County Medical Society, a Diplomate of the American Board of Surgery, and President of the Nassau Division of the American Cancer Society. A lover of the sea and sailing, Dr. Smith was Fleet Surgeon for the New York Yacht Club and a member of the Sewanhaka Corinthian Yacht Club. He is survived by his wife of 50 years, Janith Stewart Kice, M.D., two daughters and a son.

James S. F. Wong, M.D., 1933
Died October 17, 1987 at the age of 82. A native of Hawaii, Dr. Wong was a general practitioner in Philadelphia for 55 years, and a staff member at St. Joseph's Hospital. A retired lieutenant colonel in the Army Medical Corps, he was awarded a bronze star for his service in the Philippines in World War II. He is survived by his wife Mary Katherine, two sons and a daughter.

Hugh G. Grady, 1934
Died December 5, 1987 at the age of 78. A native of Philadelphia, Dr. Grady completed his internship and residency at the old Philadelphia General Hospital and then joined the staff of the National Cancer Institute, when it was located at Harvard University. Following service in the Army Medical Corps during World War II, he joined the Armed Forces Institute of Pathology in Washington and completed much of his early research on the classification of ovarian cancer there, publishing a landmark monograph with Dr. Robert E. Scully. In 1957 Dr. Grady resigned his positions as Director of the American Registry of Pathology, and as a professor at Howard University to become the first chairman of the Pathology Department of the New Jersey College of Medicine in Jersey City, then known as Seton Hall College of Medicine. He is survived by his wife Mary, a son and three daughters.

Edmund L. HouseI, 1935
Died January 20, 1988. Dr. HouseI joined the Jefferson faculty as an Assistant Demonstrator in Medicine in 1946 and became Honorary Clinical Assistant Professor in 1975. For many years he served in the hypertension and geriatric clinics, in which he was a pioneer, and contributor to the literature. The Annual HouseI Lectureship in Hypertension was initiated in 1981. A past President of the Philadelphia County Medical Society, Dr. HouseI served for many years on the Board of Directors of Blue Cross and Blue Shield of Pennsylvania. He was also a member of the College of Physicians of Philadelphia, the American Heart Association, and the American Gerontological Society. He served as Agent for his class, and was a member of the Executive Committee of the Alumni Association. Dr. HouseI is survived by his wife, Anne, and two sons.

Louis Small, 1936
Died November 25, 1987. Dr. Small
was a Family Practitioner in the Passaic, New Jersey area. His wife, Sarah, survives him.

**Philip V. Wagner, 1936**
Died December 12, 1987. Dr. Wagner was a general practitioner in New York City.

**David Eckstein, 1938**
Died November 24, 1987. A lifelong Trenton, New Jersey, resident, Dr. Eckstein retired after 22 years of private practice in internal medicine and geriatrics. Following his retirement he served as the senior physician of Meadowlake Retirement Community from 1968-70 and later as its Medical Director until retiring from patient care in 1981. Dr. Eckstein was a former Chairman of the Board of Trustees of the Medical Society of New Jersey and Chairman of its Committee on Biomedical Ethics. A former member of the AMA Committee on Aging, he served as an AMA delegate to the 1971 White House Conference on Aging. A consultant for the Disability Review Section of the New Jersey Division of Pensions and a member of the New Jersey Commission on Legal and Ethical Problems in the Delivery of Health Care, Dr. Eckstein was the recipient of the Governor's Award from the New Jersey Department of Community Affairs on November 12, 1987. Dr. Eckstein is survived by his wife, Eileen and two daughters.

**Isadore Slovin, 1939**
Died July 5, 1987 at the age of 73. Dr. Slovin practiced in Wilmington, Delaware and was an Honorary Clinical Associate Professor of Obstetrics and Gynecology at Jefferson. Active in several professional medical organizations and the author of numerous publications, Dr. Slovin was almost equally well known as a violinist and a violin maker, one of his instruments having been judged best in a 1977 international contest. Dr. Slovin credited his experience as a surgeon with contributing to his skill as a musician. He is survived by his wife, Ann, a son and two daughters.

**Gerald B. Stein, 1940**
Died October 15, 1987. Dr. Stein was active in the practice of radiology until 1985, when he left the specialty to open a group of seven clinics. Widely recognized for his humanity and enthusiasm for life, Dr. Stein was elected to Who's Who in California in 1987. He is survived by his wife of 39 years, Naomi, who continues to operate the clinics he developed.

**Edward F. Mazur, 1941**
Died August 3, 1987. Dr. Mazur practiced medicine in South Jersey for 39 years, first as a general practitioner in Riveriside, and then from 1952 until 1980 as a specialist in internal medicine with offices in Camden and Haddonfield. Affiliated with Our Lady of Lourdes Hospital, he was appointed a Clinical Instructor in Medicine at Jefferson in 1975. In addition to his wife, Margaret, he is survived by a son and two daughters.

**James O. Sloss, 1941**
Died July 18, 1987. A lifelong resident of Beaver, PA, Dr. Sloss was a general practitioner there until his retirement in 1978. A nationally known numismatist, Dr. Sloss was a former research associate of the Division of Numismatists of Carnegie Museum. He also served for 40 years as a member of the advisory board of the Rochester Salvation Army. Dr. Sloss is survived by his wife, Sarrann, and two daughters.

**Edward F. Murray, 1942**
Died November 19, 1987. Dr. Murray was the Chief Pathologist and Director of Laboratories at St. Mary's Hospital, Orange, New Jersey until his retirement. A founding member of the National Association of Forensic Pathologists, he also served as Essex County Medical Examiner from 1949-75 and continued to serve as a consultant in forensic cases thereafter. Dr. Murray is survived by his wife, Annabelle, two daughters and two sons.

**Paul R. DeVillers, 1949**
Died August 20, 1987. A general surgeon in Fall River, MA for 30 years, Dr. de Villers was also the Medical Examiner for the Bristol County southern district. Active in professional organizations, he served as Secretary of the Fall River Medical Society. He is survived by his wife, Georgette and three sons.

**Frederick J. Fay, 1950**
Died November 19, 1987 at the age of 67. Dr. Fay, a Rhode Island surgeon for 32 years, spent 35 years at Cranston and moved just two years ago to Narragansett. He was Chief Resident in surgery at Mercy Hospital in Pittsburgh

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**Jo Ono, M.D. '28**
Died January 17, 1988, after a long illness, at the age of 89.

Dr. Ono was an internationally known Otolaryngologist from Tokyo who had a very prestigious career. He was decorated by the Emperor of Japan with the Imperial Decoration of the Third Order of the Sacred Treasurer.

He was honored at the Tenth World Congress of Otolaryngology with a gold medal presented by Padua University. Doctor Ono had been involved for many years in the conception and development of the International Federation of Otolaryngological Societies. This was the first time this award was conferred in the history of the Congress of Otolaryngology.

Dr. Ono was the recipient of the Achievement Award of the Alumni Association in 1976.

His wife, Kim, survives him.
Joseph L. Farr, 1951
Died September 18, 1987. Dr. Farr practiced urology and general surgery in Wheeling, WV from 1965-1987. Earlier he had been a Professor of Surgery at Stanford University. In addition to numerous professional organizations, Dr. Farr was a member of the National Republican Senatorial Committee, and the Republican Congressional Leadership Council. He is survived by his wife, Helen, a daughter and three sons.

Gomer T. Williams, Jr., 1953
Died December 29, 1987, at 58 years of age. Dr. Williams practiced in Southampton, Pennsylvania for 30 years as a general practitioner. A member of the American Academy of Family Practitioners, he was a past President of the Warminster Rotary Club. Surviving are his wife, Carol, his two daughters and two sons.

Henry B. Borska, 1959
Died July 22, 1987. Dr. Borska had been a general practitioner in Oreland, PA since 1962. He also taught at the Pennsylvania College of Optometry. In addition to his wife, Roberta, he is survived by two daughters and a son.

C. Denny Strout, 1973
Died December 9, 1987. Dr. Strout was an Anesthesiologist in the Hershey, PA area. His wife, Ellen, survives him.

Robert C. Garrett, 1976
Died March 18, 1987. Dr. Garrett had been a specialist in internal medicine and pulmonary diseases in New York City. His wife, Kathleen M. Kogut, M.D., 77, is also deceased.

Kathleen M. Kogut, 1977
Died March 18, 1987. Dr. Kogut had been a general surgeon in New York City. Her husband, Robert C. Garrett, M.D., '76, is also deceased.