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WISCONSIN MEDICAL ALUMNI

# NEWSLETTER

VOLUME IV, No. 4

FALL, 1962



## Wisconsin Medical Alumni Newsletter

Published Quarterly by the

### WISCONSIN MEDICAL ALUMNI ASSOCIATION, INC.

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front page pen and ink drawing by gloria welniak

## NEW FACULTY APPOINTMENTS

Dr. William C. Lewis has been appointed Professor of Psychiatry. A Chicagoan, Dr. Lewis received his B.S. and M.D. degrees from the University of Chicago. He interned at St. Luke's Hospital there and served residencies in USPHF Hospital in Fort Worth, Texas and Winter Veterans Hospital in Topeka, Kansas. Dr. Lewis specializes in Psychoanalysis. He is married and the father of seven children.

Named Associate Professor of Psychiatry is Dr. Seymour L. Halleck, who received his B.S., M.D. and Ph.D. degrees from the University of Chicago. He interned at the U.S. Public Health Service Hospital in San Francisco and served his residency at the Menninger Foundation in Topeka, Kansas.

Dr. Harold Edward Fromm is a new Instructor in Surgery. Born in Corsica, South Dakota, he studied at the University of South Dakota and received his M.D. from Northwestern University in 1957. He also received a degree in Pharmacy from South Dakota in 1955. Dr. Fromm interned at Madison General Hospital and served a three year residency there prior to joining the U.W. Faculty.

A new Assistant Professor of Physiology this year is Dr. Richard W. Henniger. He is a native of Alberta, Canada who received his B.S. in Zoology from Brigham Young University, a Master's and Doctorate in Physiology from Oklahoma State University in 1961.

Dr. Ronald R. Kyllonen has been named Assistant Professor of Child Psychiatry. He is a native of Duluth and received his B.A. and M.D. degrees from the University of Minnesota. Dr. Kyllonen interned at Minneapolis General Hospital and served residencies at the University of Minnesota and at the Children's Clinic, Institute of Living, Hartford, Connecticut.

Appointed Instructor in the Department of Psychiatry is Dr. Irvin Cohen who received his M.D. and Ph.D. in Psychology from Columbia University. He was a counter-intelligence investigator with the U.S. Army in 1953-55 and a Clinical Psychology Trainee with the Veteran's Administration in 1956-1962.

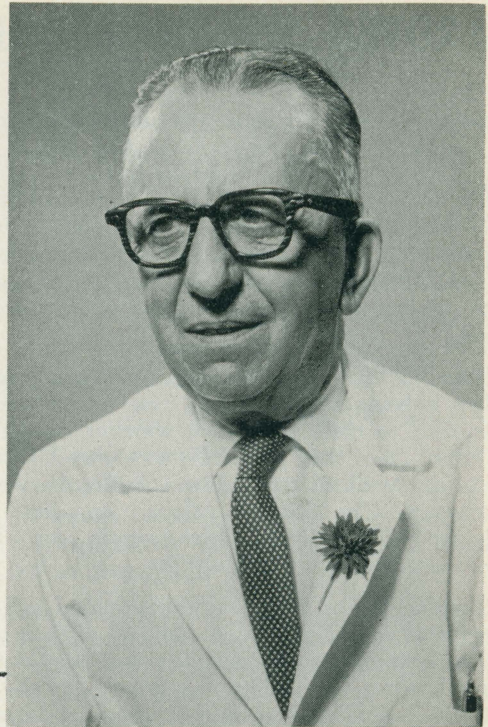
# CLASS OF '66

From Madison and as far away as Hong Kong have come members of the freshman class of 1962. The one hundred-strong incoming students have achieved distinguished grades on the National Medical Admissions Test Scores and as a group hold an overall average of higher than "B." It is the largest freshman class in the modern history of the Medical School. They were selected from four hundred and fifty applicants.

Six of the new class members are women and twelve are married. Of the one hundred, fifteen are out-of-state residents including three students from other countries. One fifth of this year's class participated in the new pre-freshman research program instituted this summer.

Fifteen of the new classmen are sons of Physicians, three have fathers who are Pharmacists, two who are Dentists, one who is an Optometrist and one a Hospital Administrator. There are six sons of Wisconsin Farmers in the new Medical School class. Twenty-three received their pre-medical training at out-of-state institutions, the remainder within the University of Wisconsin in either Madison or Milwaukee.

Welcome, class of '66!



## Dinner Honoring Dr. Meyer

Almost three quarters of the entire resident group dating back to 1944 will be in attendance at a dinner party honoring Dr. and Mrs. Ovid O. Meyer in Chicago on the 2nd of November. Dr. Meyer, Chairman of the Department of Medicine, will be presented with a beautiful tray imported from Denmark. Many members of the Internal Medicine staffs from the University and VA Hospitals will be present for the gala reunion.

## Stovall Hall Dedicated

On September 23rd, the Stovall Hall of Health was officially dedicated at the Museum of Medical Progress in Prairie Du Chien. The building is named in honor of Dr. W. D. Stovall, Emeritus Professor of the U.W. Medical School.

Several hundred persons were in attendance for the ceremony, which included speakers from across the nation. Dr. Clifford Lord, Dean of the School for General Study at Columbia University was among those paying tribute to Dr. Stovall. Dr. George M. Fister of Ogden, Utah, president of the American Medical Association was another special guest.

Professor William B. Hesseltine of the University of Wisconsin's History department spoke on the role of Dr. Stovall as an Historian. Dr. N. A. Hill, President of the State Medical Society presented a talk on, "Dr. Stovall-The Dedicated Physician and Medical Statesman."



Dr. W. D. Stovall pictured at the lectern during ceremonies dedicating the Stovall Hall of Health.

## IMPROVED TEACHING TECHNIQUES INTRODUCED

Implementation of several new instructional methods has started with this year's Medical School program. The new teaching principles include a student-advisor system, an evaluation of student performance which includes the withholding of grades and the adoption of an Honor System. Acting Medical School Dean, Dr. Philip Cohen, said the intent of the system, "is to improve teaching and learning in the Medical School."

Under the new program each freshman medical student is being assigned an advisor with whom he is required to meet twice each semester during the first year. Dr. Cohen reported that eighty-five members of the Medical faculty have volunteered to serve as advisors. The Student Affairs Committee will study the progress of the advisor system and submit an evaluative report to the faculty.

A second major aspect of the program includes the withholding of grades. At the end of their third year students will be informed in which third of their class they are ranked. This will help guide the student in planning his internship. During the course of the first three years students will be told if their academic performance is unsatisfactory. It has also been suggested that each letter grade in a course be accompanied by a statement regarding personal characteristics, particularly if the student is exceptional or has significant problems.

This part of the program is intended to be one step in the process of helping to develop a more mature and scholarly attitude on the part of students. It has been the general feeling that prior to this, undue grade consciousness has been a deterrent to the professional growth of students. This has been particularly evident with some students who have just emerged from the competition for admission to the Medical School.

Under the new program, stress will be placed upon informing those students whose work is not progressing satisfactorily. It is expected that no student would be in a "Poor" or "Failure" category at the end of a course due to deficiencies not made known to him during the course. Dr. Cohen said the new and more personal program, "will impose additional responsibilities on the faculty." Prior to the new system grades alone marked the only essential permanent record of a student during his Medical School career. It is hoped that with additional statements and evaluations a broader professional characterization of the student might be possible.

The adoption of an Honor System is effective upon the affirmative vote of two-thirds of the present student body. The Honor System Code was approved by the Medical School Faculty this past Spring. It reads:

### CODE OF HONOR

"In accepting my appointment to the University of Wisconsin Medical School, I subscribe to the following Code:

- I. As a future physician the highest conception of honor and integrity must be evidenced in my daily living and practice. Dishonesty in any form will not be condoned.
- II. Dishonesty in an examination consists in any attempt to receive or give assistance during the examination.
- III. It is my responsibility to enforce the Code and because there will be no proctoring of examinations, should I observe during an examination, any action which in my judgment appears to violate the Code, it is my duty to state aloud that I have made such observation. After this warning should I observe any further apparent violation, I will report the action to the Student Affairs Committee."

The student members of the Student Affairs Committee will by majority vote make appropriate recommendations to the Dean concerning violations of the Code. It was also stipulated that the maximum penalty recommended may be "suspension for one year" for freshman and "dismissal" for all other students. The Code of Honor will be distributed to each incoming student and shall be reviewed at the end of each school year by the Student Affairs Committee.

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## Dean Helen Bunge Honored by National Magazine

The 10th anniversary issue of the national magazine, "Nursing Research" recently paid tribute to Dean Helen Bunge of the Wisconsin School of Nursing. The article hailed Dean Bunge as a pioneer editor of the journal and as a leader in her field.

Miss Bunge was the first editor of "Nursing Research" in 1951. The magazine cited Miss Bunge's courage "to be an editor of a new publication at a time when the profession was far behind in the quantity and quality of research found in the publications of seasoned disciplines and professions." The article referred to Wisconsin's Nursing Dean as "an idealist and a realist."

For its first five years, Dean Bunge served as chairman of the editorial board of "Nursing Research." She is presently a member of its editorial advisory committee. Miss Bunge is a LaCrosse native. She received her B.A. from Wisconsin in 1928 and her doctorate in education from Columbia in 1950.

# PKU FILM RELEASED

An important new medical motion picture, "PKU Mental Deficiency Can Be Prevented," has had its premiere showing at the University of Wisconsin on September 26th. The film was produced under the supervision of Dr. Harry A. Waisman of the University Medical School's Department of Pediatrics.

The film is designed for special showing to physicians and medical personnel. It explains how preliminary tests to detect PKU in babies may be performed in doctors' offices. The film demonstrates a simple technique required in making the test.

Unless detected soon after birth and treated at an early stage, serious mental retardation results in the PKU baby. PKU is the result of an inability of some infants to metabolize or completely digest a component of protein, phenylalanine. When incompletely metabolized, an excess of some of its products, chemicals known as phenylketones, builds up in the blood of humans.

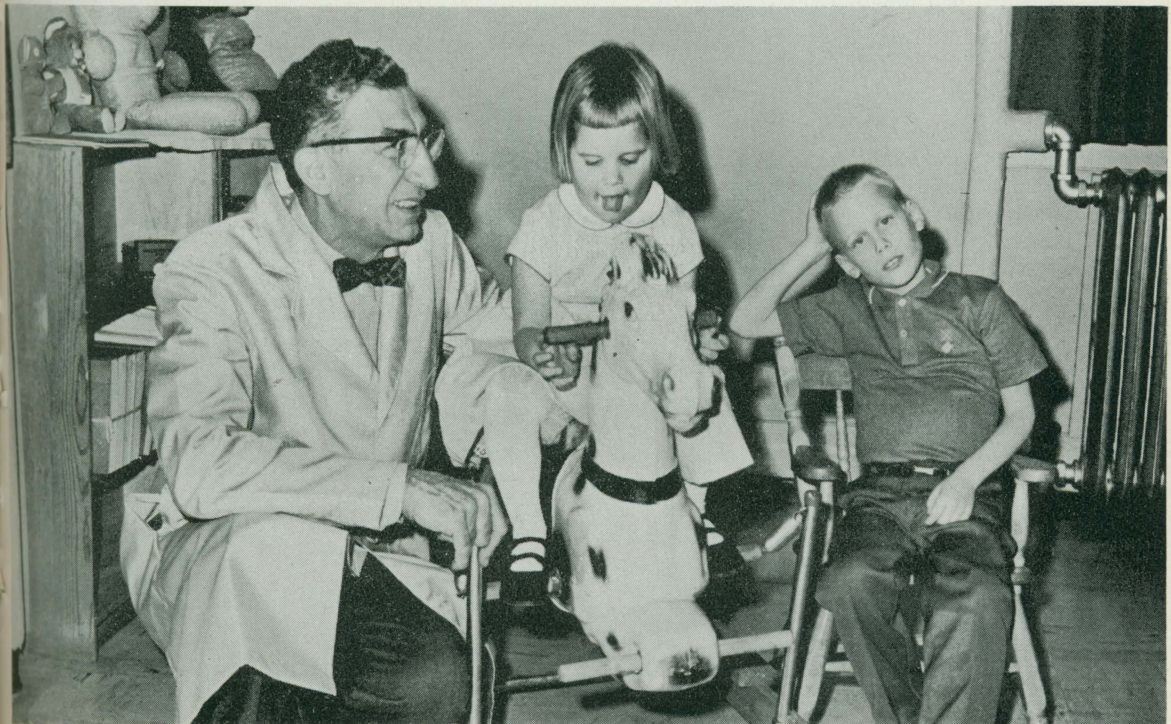
The film emphasizes that testing for PKU must become as routine and as standard for general practitioners and pediatricians as shots for polio, small pox and diphtheria.

Researchers at the University of Wisconsin Medical School and elsewhere are still trying to learn specifically what causes the defect in metabolism and why it produces mental retardation. Dr. Waisman and collaborators doing research on the problem at the U.W. Medical School are active in a program of testing in some Wisconsin hospitals. They are seeking to learn more about the disorder and how PKU can be prevented by early detection.

When discovered, children afflicted with PKU, are placed on a restricted diet from the first weeks after birth. With such treatment they can grow normally without mental retardation. The film vividly pictures in one family the resulting status of children *with* and *without* treatment.

The film is available for physicians and professional medical groups without charge. It is a 14½ minute, sound, black and white motion picture which was produced under a grant from the Ames Company, a pharmaceutical firm. Interested medical people should contact that firm at Elkhart, Indiana for requests of the film.

Dr. Harry A. Waisman of the University of Wisconsin Medical School's Department of Pediatrics, with Kay and Keith, whose case histories are presented in a new motion picture.



# RADIATION TO THE PUBLIC

by John R. Cameron, Ph.D. Associate Professor  
of Radiology and Physics

(Editor's Note: Due to the great and growing concern about radiation, we have asked Professor Cameron to write the following article for the information of Alumni members. He is a recognized authority in his field and has written and spoken frequently on the subject.)

The recent renewal of bomb tests by the United States and Russia makes it worthwhile to review the known facts and assumptions involved in evaluating the hazards to the public from ionizing radiation. There has been no "break-through" in proving or disproving the dangers from small amounts of radiation to large numbers of the general population. It is very unlikely that satisfactory proof will ever be firmly established for either view. The problem of radiation to the public has been receiving more press coverage and several eminent groups have issued reports on the subject.

The National Academy of Sciences—National Research Council published a report to the public in 1960 entitled, "The Biological Effects of Atomic Radiation." The Federal Radiation Council appointed by the President to advise him on matters of radiation has published three reports dealing with radiation and fallout. In April, 1960, the U.S. Department of Health, Education and Welfare began publishing a monthly report entitled, "Radiological Health Data," containing up-to-date information on fallout and other related problems.

## SOURCES OF RADIATION

Man receives ionizing radiation from three different sources: (1) Natural or background radiation, (2) Medical radiation such as X-rays and radioisotopes and (3) Fallout radiation from bomb tests. Ionizing radiation is characterized by its ability to tear atoms and molecules apart electrically. In the process molecules may be changed into smaller molecules or be deformed. If this happens to enough molecules in a living cell it may result in the death of the cell or worse, the cell may continue to divide with changed characteristics. If the cell is a reproductive cell it may produce a mutation which might appear in a later offspring. Another alternative is that the cell may become malignant. Neither of these alternatives is very likely and much research remains to be done on learning the mechanisms involved in such changes. The evidence that large amounts of radiation can produce mutations as well as cancer is well established. The question of a "safe" lower limit where neither of these effects occur is still not resolved and at the present time many scientists in this field recommend the prudent assumption that even small amounts of radiation can be harmful.

## RADIATION RISK

It is difficult to make good estimates of the dose of the risk to an individual from fallout or a medical X-ray. Essentially all of the available evidence comes from experiments on mice and fruit flies. There are, however, some data now available on humans from studies of survivors of the Nagasaki and Hiroshima bombs as well as from individuals who had received X-rays for therapy when they were young. For example, children who had their thymus gland treated with X-rays have a much higher incidence of thyroid cancer than other individuals. It should be remembered, however, that cancer of the thyroid is relatively uncommon and the risk of thyroid cancer even for individuals having received X-ray therapy is very small compared to many other risks involved in daily living. The main point, I think, is that even though the risks are small for a single exposure, because of the large number of individuals involved, it is prudent to reduce radiation exposure to the public whenever possible. For example, the risk from a single dental X-ray would be exceedingly small but in Wisconsin approximately 4,000,000 dental X-rays are taken each year and the chances of one or more individuals in that group having harmful effects are quite good.

## UNITS TO MEASURE RADIATION

The units used in measuring radiation to the body are the roentgen (r), the rad and the rem. All of these units have essentially the same value when they are used to measure radiation from fallout or x-rays. They are all measurements of damage to the body. The rem is the preferred unit and often a smaller subdivision of the rem is used. The millirem is equal to 1/1000 of a rem. For example, background radiation amounts to about 1/10 of a rem or 100 millirem per year in Wisconsin. Fallout is currently much smaller than background but because of its variable nature it is better to average it over a longer period of time. Over a thirty year period average whole-body radiation from all testing through 1961 will be between 60 and 130 millirems or less than 5% of the radiation received from background radiation during the same period. Further testing, of course, increases the exposure. Medical X-rays are generally restricted to a portion of the body and quite variable in the amount of radiation given to a patient. For example, a conventional chest x-ray gives the back about 100 millirem, an X-ray of the hip involves several rem and a fluoroscopy examination may be more than ten rem. A dental X-ray given to the cheek about one rem but a defective film may give five times that amount.

It is also necessary to have a unit to measure the amount of radioactivity in radioisotopes or fall

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## First Refresher Courses Held; List Future Meeting Dates

The first of five specialized symposia and the first of seven short courses for general practitioners planned by the U.W. Medical Center have been held with great success. The first of the symposia was held August 23rd-25th and dealt with Cancer Chemotherapy. Dr. Fred J. Ansfield, Associate Professor and Dr. James M. Price, Professor, both of the Cancer Research Division, were chairmen for the sessions. One hundred and seventeen physicians, researchers and medical personnel were in attendance for the two day session.

On October 4th, the first of the short courses was held in the afternoon at University Hospital. Dr. Ovid O. Meyer, Professor and Chairman, Department of Medicine, was program chairman for the session. The afternoon dealt with "Diagnostic and Therapy Problems Commonly Occurring in General Practice."

The post-graduate medical education program is offered through the U.W. Extension Division. Information and registration materials for future courses may be obtained from the Coordinator of the Post-graduate Program in Medical Education, The Wisconsin Center, 702 Langdon Street, Madison 6, Wisconsin.

The four future symposia, dates and program chairmen:

March 7-9, "The Hemiplegic Patient," Dr. Arthur A. Siebens, Director of the Rehabilitation Center and Professor of Pediatrics and Physiology, chairman.

March 21-23, "Advances in Immunology and Hypersensitivity," Dr. Ovid O. Meyer, Professor and Chairman of the Department of Medicine, and Dr. Charles E. Reed, Assistant Professor of Medicine, chairmen.

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Scene at the October 4th half day course for general practitioners. Dr. John Morrissey (r.), Assistant Professor of Medicine, is demonstrating a Gastro-duodinal Fiberscope to Dr. M. V. Overman, '35 of Neillsville. Dr. H. A. Romberg of Oshkosh is at the left. Listening closely in the rear is Dr. C. L. Weston, Tomah, '51.



## *Enlarge Student Research Program; Implement Honors System*

Pre-Honors and Honors Programs have been instituted within the present curriculum of the Medical School. This adds to a longtime tradition of providing medical students opportunities for research.

Under the program there are an enlarged number of student fellowships. In addition, research training has begun on the pre-freshman level with this year's entering Medical School class. Increased opportunities will be provided for research work during the post-freshman summers. Provisions have been made for a special Honors Program curriculum for those students meeting specified requirements.

One aim of the program is to attract more high calibre students. They will be attracted to enter the Medical School for the M.D. degree if they are also given an opportunity to pursue a research program along with their medical courses. Providing a unique combination of research and clinical experience, the program anticipates fulfilling part of the need for the training of M.D.'s for academic positions. Qualified students within the program will be provided a chance to participate in the research of the Medical School staff.

To gain entry into the PreHonors Program, students should have completed their B.S. degree requirements with distinction and with a suitable science major. Outstanding first year medical students may also enter the program. To maintain his participation in the program a student must hold a "B" grade average. Those maintaining a "B" average in all course work during the PreHonors Program for their first two years of Medical School will be permitted to enter the Honors Program in their third year upon approval of the Honors Program Committee.

All students in the program must meet all the minimum course requirements of the M.D. degree. In order to carry out his research, the Honors student will utilize several prescribed blocks of time. These include summers, elective time during the second semester of the second year, splitting research and course time during the second and third years and doing research during the Preceptor quarter.

The programs allow the medical student to pursue a work course designed to gain both the M.D. and M.S. degrees. Under the Honors Program, the Medical School will grant in addition to the M.D. degree based on the regular four year program, an M.D.

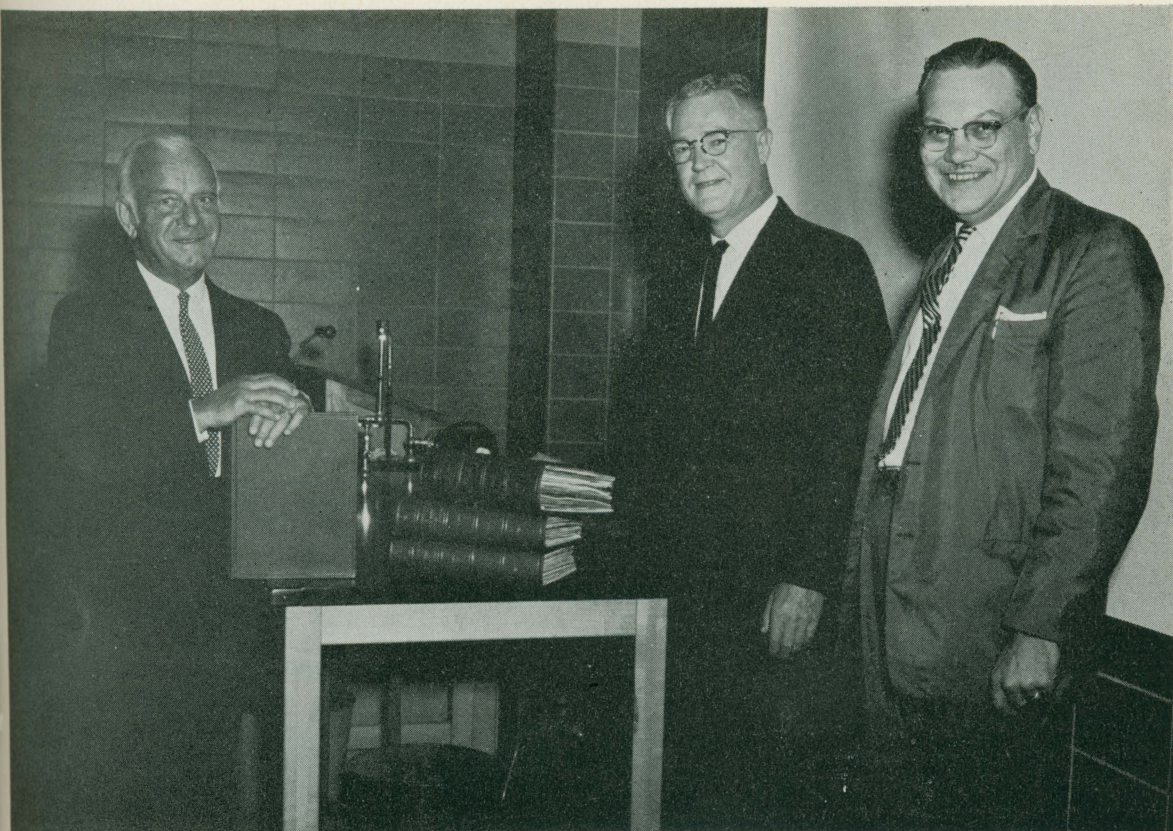
with Honors. The M.D. degree with Honors carries a thesis requirement to be approved by the Honors Program Committee.

Another important facet of the program is the pre-freshman research training which was begun the past summer. One fifth of this year's entering freshman class was chosen on the basis of interest and academic record. Each of the twenty students worked all summer under a Medical School faculty member pursuing research subjects of mutual interest. Some of the projects participated in included studies on enzymes involved in cancer, blood research, brain biochemistry and smooth muscle physiology. Many of the students will be assistants on these long-term projects and some will pursue projects of their own. The pre-freshman summer experience was a rich one for all twenty students, giving them an important experience toward the PreHonors Program.

In addition to the degrees described earlier, a student may elect, with permission of his advisor, to take a program which would permit earning of the M.S. degree while working for his M.D. The M.S. would be granted by the Graduate School. Students in the Honors Program may continue on for the Ph.D degree after completing requirements for the M.D. or the M.D.-M.S. degree.



**Medical student pursuing his research project, shown at an electron microscope.**



Pictured above are (l. to r.) Dr. Hans H. Reese, Dr. Alexander T. Ross and Dr. Francis Forster on the occasion of the first Hans H. Reese Lecture, given on October 5th. Dr. Reese, Emeritus Professor of Neurology, retired on June 30th of this year. Dr. Ross, Professor of Neurology at Indiana University, initiated the series with a lecture on, "Inanition Syndrome in Infants with Hypothalamic Tumors." Dr. Forster is Chairman of the Department of Neurology. Dr. Reese was presented with four impressive volumes of letters and article reprints sent by colleagues from throughout the world.

## RADIATION . . .

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whether or not they have any contact with humans. The basic unit for measuring the amount of radioactivity is the curie. Because this is a large unit, a subdivision of the curie is more often used. For fallout measurements a micromicrocurie or one-millionth of a curie is used. This unit is so small that it takes very special equipment to detect it. Medical tests using radioisotopes often use microcurie quantities—a microcurie being one-millionth of a curie. When machines containing radioisotopes are used in the treatment of cancer thousands of curies are used.

## DEFECTIVE X-RAY MACHINES

Medical uses of radiation differ in two important respects from background and fallout radiation: (1) The individual receiving radiation benefits directly from it and (2) It is possible to reduce the radiation to the public from this source. There is a tendency for the medical profession to emphasize the former and ignore the latter. Unfortunately various surveys in-

dicade that approximately 75% of all medical and dental x-ray units in the United States give unnecessary amounts of radiation to the patient. At the present time only a few states have laws requiring that medical X-ray units meet minimum standards of radiation protection to the patient and operator. I believe the benefit from an X-ray outbalances the small risk involved even from a defective unit. On the other hand, it is ironic that the profession devoted to protecting the health of the public is guilty of endangering it by careless use of X-rays.

Various competent committees have made recommendations on "safe" limits of radiation to the general public. The recommendations are all in good agreement that exclusive of background radiation and necessary medical uses, the whole body exposure should not exceed one-half rem per year and that the average gonadal dose over a thirty year period should not exceed 5 rems. The National Committee on Radiation Protection (N.C.R.P.) has used the term, "maximum permissible dose," but the Federal Radiation Council prefers the term, "Radiation Protection

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## *Psychiatric Institute Makes Progress*

The Wisconsin Psychiatric Institute which was revitalized in 1960-61, has made significant gains during the past year. The primary functions of the Institute are training and research in mental health. It is organized on an interdisciplinary basis and the staff includes representatives from the Departments of Genetics, Pharmacology, Biochemistry, Psychology, Sociology and Psychiatry.

During the past year two major research projects have been in progress, supported by N.I.H. grants. One is devoted to the measurement of the process of personality change in the psychotherapy of schizophrenia. The second project is an examination of the relationship between physiological and psychological processes in the course of adaptation.

The Institute has sponsored two major conferences which have drawn nation-wide attendance and interest. One of these, held the past summer was devoted to a consideration of Psychiatry and the Law. In ad-

dition, a course in research methods for workers in the mental health fields was offered under Institute auspices.

In September, Dr. Milton H. Miller was named Director of the Institute succeeding Dr. Robert Rosler who is turning his attention to research activities. Four recent staff additions have been made as the Institute expands its research and educational activities.

In addition to Dr. Miller, the executive committee of the Institute includes Dr. James Crow, Professor of Medical Genetics, Dr. Jack Gilchrist, Professor of Psychology, Dr. Carl Rogers, Professor of Psychology and Psychiatry, Dr. William Sewell, Professor of Sociology, Dr. Robert Parks, Chairman and Professor of Pharmacology, Dr. Harold Borenz, Associate Professor of Pediatrics and Child Psychiatry, Dr. Norman Greenfield, Associate Professor of Psychiatry, Dr. William Fey, Associate Professor of Psychiatry, Dr. Benjamin Glover, Associate Professor of Psychiatry. Dr. Leonard Ganzer, Director of the Division of Mental Hygiene of the State Department of Public Welfare, serves as an ex-officio member.

**Model of the new Cancer Research building. The structure will be built to the immediate south of Children's Hospital and will extend from Randall Avenue to Lorch Court.**



# ALUMNI CAPSULES

Dr. Edward B. Miner, '57, has moved from Indianapolis to Kensington, Maryland and is now associated with the National Institute of Health (N.I.H.) in Bethesda.

\* \* \*

**"You should see the one that didn't get away!" That is the theme of an exciting report from Dr. George H. Kakaska, '53, who recently returned from a trip to Barbados, Trinidad and Dutch Guiana. Dr. Kakaska caught a three foot octopus while skin diving. He describes the coral and game at Barbados as, "out of this world." "Skin diving is surprisingly easy," he writes, "costs amounting to about \$100 for the outfit. No matter how fat you are, floating on salt water is easy." Dr. Kakaska has some special words of advice to those who might run into a shark. He boldly prescribes, "looking directly at them or even charging them" and assures us that the sharks, upon hearing the splashing, "will run—except after a storm when they attack anything moving."**

If readers are not convinced, let them take note that Dr. Kakaska is busy making plans for his next trip to the Great Reef Barrier in Australia. Dr. Kakaska and family are residing in Dallas, Texas.

Completing a military tour of duty, Richard F. Yee, '60, will begin a residency in Gynecology and Obstetrics next year. He is with the 545th General Dispensary, APO 971, San Francisco.

\* \* \*

Dr. C. M. Kurtz, '27, is serving as Hospital Director of the Veterans Administration Hospital in Albuquerque, New Mexico.

\* \* \*

Dr. John W. Truitt, '20, passed away in May after a long lingering illness. Also, Dr. C. J. Brady, '34, of Lake Geneva, Wisconsin. Dr. Vincent Johnson, class of 1927, died unexpectedly this past June at his home in Grosse Point Shores, Michigan.

\* \* \*

Two former Wisconsin medical students are serving as residents at the Presbyterian Medical Center in San Francisco. Dr. Paul Poenisch is a 3rd year resident in E.N.T. and Dr. Don Walters, a 2nd year resident in Internal Medicine.

\* \* \*

James H. Dahlen, '61, is serving a one year residency at Doctors Hospital in Seattle, Washington. His wife, Dr. Nola Moore, '58, is now in private general practice in Seattle.

\* \* \*

Dr. Sanford R. Mallin, '57, has opened an office in Milwaukee.

New members of the Wisconsin Medical Association include: Dr. John J. Brandabur who completed his resident training at University Hospitals and is now practicing internal medicine in Madison; Dr. David J. Ottensmeyer, '59, who is presently in resident training in neurosurgery at University Hospitals in Madison; D. Phillip J. Schoenbeck, '57, who is associated with his father in Stoughton, Wisconsin; Dr. Donald Schwab, '61, now in general practice in Madison.

\* \* \*

Dr. Eugene M. Juster, '24, has been appointed medical director of CUNA Mutual Insurance Society, with national headquarters in Madison. Dr. Juster, who retired in September of this year, had practiced medicine in Madison for more than 36 years. He had served as medical consultant for the Society on a part time basis since its inception in 1935. Dr. Juster is a member of the American Academy of Dermatology, the Wisconsin and American Medical Associations. He is a native of Milwaukee.

\* \* \*

Dr. John C. Ellis, Jr., '57, has returned to University Hospitals in Madison as a Clinical Instructor in Gynecology and Obstetrics. He is a Badger native who served his internship at the University of Texas from 1957 to 1958. Dr. Ellis practices at the Quisling Clinic.

## REFRESHER COURSES . . .

(continued from page 7)

April 5-6, "Economic Problems Facing Hospitals," Edward J. Connors, Associate Professor and Superintendent, University Hospitals, chairman.

April 25-27, "Renal Disease in Childhood," Dr. Nathan J. Smith, Professor and Chairman, Department of Pediatrics and Dr. Charles C. Lobeck, Assistant Professor of Pediatrics, chairmen.

Dates, topics and chairmen for the remaining short courses:

January 10th, "Some Common Dermatologic Problems in General Practice," Dr. Sture A. M. Johnson,

Professor of Dermatology and Syphilology, chairman. February 7th, "Topics of Current Interest in the Care of the Newborn," Dr. Nathan J. Smith, chairman.

March 7th, "Some Orthopedic Problems Occurring in General Practice," Dr. Herman W. Wirka, Professor of Orthopedic Surgery, chairman.

April 4th, "Frequent Gynecologic Problems Occurring in General Practice," Dr. Ben M. Peckham, Professor and Chairman, Department of Gynecology and Obstetrics, chairman.

May 2nd, "Common Problems in Ear, Nose and Throat Arising in General Practice," Dr. E. Maxine Bennett, Associate Professor of Surgery, chairman.

# JUST AROUND THE CORNER..

Dr. Frank Weston, Clinical Professor of Medicine and Program Chairman for this year's Fall meeting has announced final plans for the November 10th program.

REGISTRATION	9:00 A.M., Room 140, Bardeen
PROGRAM	9:30 A.M., Dr. Edgar S. Gordon, Professor of Medicine, speaking on, "New Ideas About Obesity"
	10:00 A.M., Dr. Anthony R. Curreri, Professor of Surgery, speaking on, "Cancer Research."
	10:30 A.M., Dr. Alfred S. Evans, Director of the State Laboratory Hygiene, Chairman and Professor of Preventive Medicine, speaking on, "Common Clinical Syndromes of Infectious Diseases."
	11:00 A.M., A brief business meeting.
LUNCHEON	12:15 P.M., Hospital Cafeteria.
HOMECOMING GAME	1:30 P.M., Tickets available for members.

Alumni members who wish to register should send a check for \$2.00 (which includes the noon luncheon) by NOVEMBER 5th!!! Please indicate how many football tickets you will want. The price of tickets for the game is now \$5.00. Mail to the Medical Alumni Office, 418 North Randall Avenue, Madison, Wisconsin. Hope to see you on the 10th!!

## RADIATION...

(continued from page 9)

Guide," for the above recommendations. They also feel that every effort should be made to encourage the maintenance of radiation doses as far below this guide as practicable.

## INSPECTION AND CORRECTION

Because of the recent interest and concern for the amount of radioactive iodine in milk, I would like to clarify some aspects of the problem. The radioactive iodine (I-131) involved is the same as that used for medical studies of the thyroid. It has a relatively short half life of about 8 days. Thus, its presence following any one bomb test is of short duration. The present recommended limits of 100 micromicrocuries per liter averaged over a year are based on a limit of

one-half rem to the thyroid of an *infant* being fed fresh cows' milk. The radiation to children and adults is much smaller because of the larger thyroid gland involved. It should be kept in mind that a dental X-ray can give a considerably larger dose. The milk from Wisconsin has been tested routinely several years and has not exceeded the 150 microcurie level even for a single month and the average for any one year is considerably under that level. I believe we should continue to monitor radioactivity in food but feel that it can be done more adequately in a federal laboratory rather than at a state facility. If we have many thousands of dollars to invest in reducing the radiation danger to the public, we should begin where it can really do some good, namely, the inspection and correction of medical and dental X-ray equipment.

*Wisconsin Medical Alumni Assn.*

University of Wisconsin Medical School

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