

WISCONSIN MEDICAL ALUMNI

Quarterly

Volume nine, number three · Summer, 1969

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WISCONSIN MEDICAL ALUMNI

QUARTERLY

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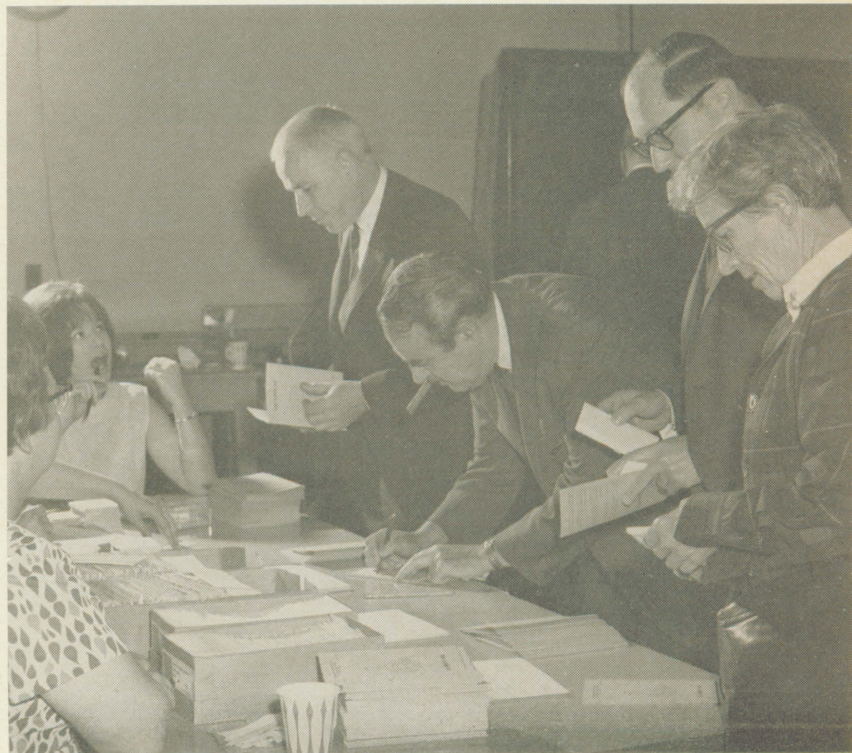
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About the cover

We asked artist Anne Benkendorf to "come up with a cover that has the flavor of Alumni Day." She provided us a rendition that encompasses most of the important segments of that day when Wisconsin-trained physicians from all points of the globe descend upon Madison. This will be the last QUARTERLY work by Anne, who graduated from UW in June. It is a double paradox that she was engaged for the job several years ago when it wasn't even known her father was a physician, and that her last renditions should be printed shortly after her father took office as president of the Association.

Alumni Day 1969



Alumni Day, May 23, 1969, dawned pleasant and clear in Madison but the weatherman had a varied day in store for the hundreds of UW medical alumni who returned for a day of fellowship and enlightenment. After 9 a.m. registration (right) followed by a brief period of getting acquainted with others while enjoying pastries and coffee, the morning session began in 227 S.M.I., that auditorium from classroom days of the past (above).

The initial session included a "welcome", the dean's "state of the union" message, reports by two new department heads, the alumni citation recipient's address, and a business meeting that included election of officers and directors.



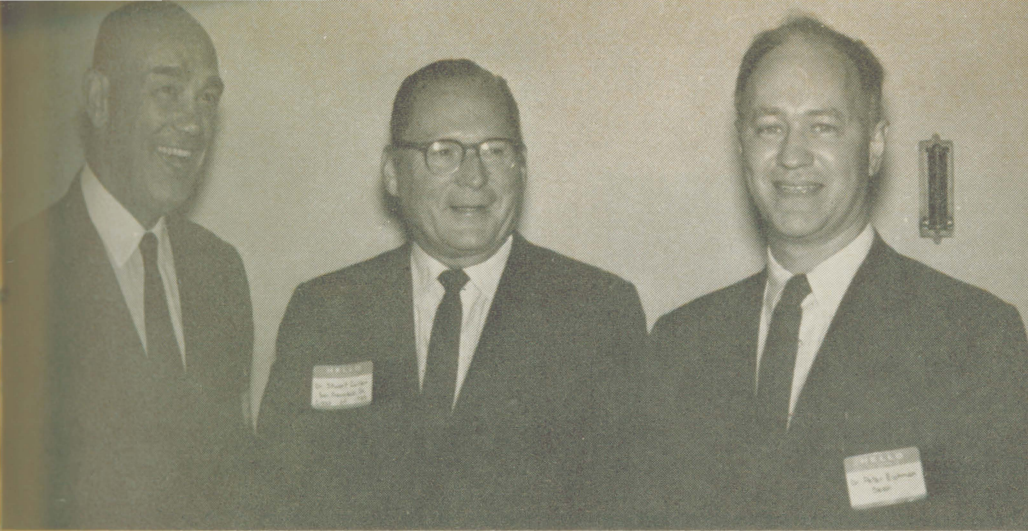
We Honor . . .

"Stuart C. Cullen, M.D., in recognition of outstanding service to medicine and medical education and in appreciation of his leadership in advancing the progress of health, this testimonial is presented upon the recommendation of the University of Wisconsin Medical Alumni Association, Inc., the Faculty of the Medical School and the Chancellor of the University of Wisconsin.

"In witness thereof, it is sealed and signed by the Chancellor of the University, the Dean of the Medical School and the President of the University of Wisconsin Medical Alumni Association, Inc."

— Wording of the Medical Alumni Citation



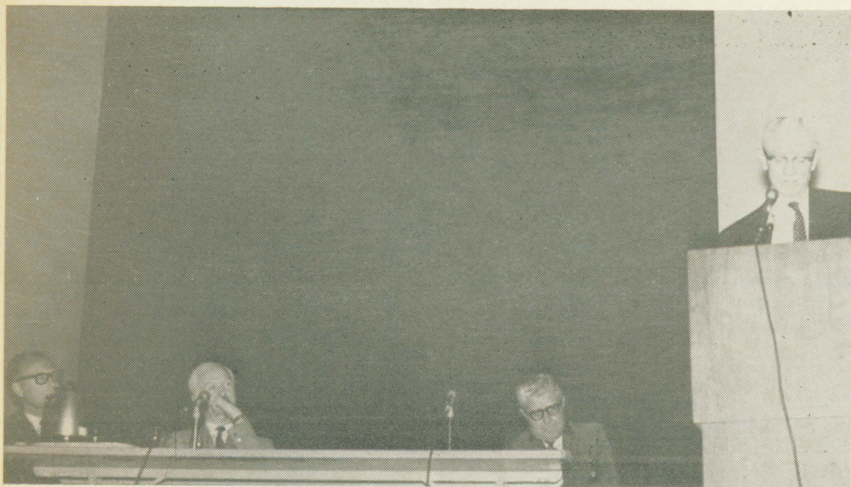


Among the happenings during Alumni Day 1969 were these pictured counter-clockwise, from top of preceding page: Dean P. L. Eichman extended a warm greeting to the returning alumni and in his report appraised the past year's successes, growth and problems. One of two new Medical Center officials who described forthcoming plans for their areas was J. D. Kabler, M.D., (with bow tie) director of the University Health Service, whose facility provides care to some 34,000 students on the Madison campus. (Bottom left) Alumni Association President Richard H. Wasserburger, M.D., '46, (left) discusses the day's program with President-elect Charles Benkendorf, former radiology resident from Green Bay.

A business meeting and election of officers concluded the morning session. Before a catered luncheon was served on the Middleton Medical Library terrace, some informally toured the library. Here, (below) a group chats informally on the second floor of the library. Another participant in the morning program (right) was John Rankin, M.D., '45, who was appointed chairman of preventive medicine during the year and who described activities in his department. (Above) Three of the 100 medical school deans in the U.S. were in attendance at Alumni Day. They were (L. to r.) John Parks, M.D., '34, dean of the George Washington University School of Medicine, Washington, D.C.; Alumni Citation Recipient Stuart C. Cullen, M.D., '33, dean of the University of California Medical School at San Francisco; and UW Medical School Dean Peter L. Eichman, M.D.



Other Alumni Day activities on May 23 included (right) two physicians admiring the UW Medical Center painting by Aaron Bohrod at its second floor Medical Library display site. (Lower left) A catered lunch on the library terrace was served to 247 persons. (Lower right) Storm clouds threatened for a while and it got cooler during lunch but the weather held. In the left foreground is Emeritus Faculty Award Recipient Frank L. Weston, M.D., '23.



The afternoon program included a seminar on "Competitive Sports and Your Child?" Participants included Allan J. Ryan, M.D., UW team physician; James Russell, M.D., '46, surgeon; James Nelson, M.D., '39, Green Bay Packer team physician; and Joseph Jacobs, M.D., psychiatrist. Site for the seminar shifted to the theatre of the Memorial Union and it was "kicked-off" by a color film of the team physician.



In the evening, it was time for good fellowship. A total of 462 physicians, senior class members and their wives attended the banquet. Many, like the couple above, met old friends.



Several classes holding 5-year reunions reserved special rooms to get together before the banquet. Here's a portion of the Class of 1929.



Some of those getting together were closer than classmates, like Charles M. Ihle, M.D., '35, of Eau Claire, and his son, Charles V. Ihle, M.D., '65, of Madison. (Below) The Class of 1939 had a suite reserved before dinner and a portion of its members posed for our camera.



Although it wasn't holding a class reunion, these four members of the Class of 1933, managed to sit together at the banquet.



'Tubular and Peripheral Vision In the Profession of Medicine'

Stuart C. Cullen, M.D., '33, dean of the University of California Medical School at San Francisco, delivered a thought-provoking acceptance address on receipt of the Medical Alumni Citation May 23. Here are some excerpts from his presentation, "Tubular and Peripheral Vision in the Profession of Medicine."

"Those of you who are still connected with this institution or with other schools, either as medical students, post-doctoral students or faculty, are in the active process of education. Others of you who are in active practice are also in a continuing educational process. The approach you take to either the acute or chronic educational effort is conditioned in part by the teaching you are receiving or have received, in part by your colleagues, and in large part by your own desires and interests. In a professional milieu there is a strong tendency to approach and continue one's education on a vocational level.

"The current involvement of schools of medicine in the delivery of health care can be considered also as a tendency to vocationalism. Certainly, actual responsibility for, and participation in the delivery of health care, especially in the ghettos and barrios, could have an impact on the academic balance of a school. Actually, I run a little scared trying to determine how one can walk the tightrope between necessary involvement of some degree in community health and preservation of the traditional academic outlook and atmosphere.

"I will attempt to point out, among other things, that one must resist this tendency to vocationalism in the profession of medicine."

... "An engineering student learns calculus in order to become an engineer. A historian learns medieval Latin in order to read documents. Bronowski learned Italian in order to read papers in mathematics. These are examples of education for a very specific purpose, and since this purpose often helps us earn our living, Bronowski (in 'The Educated Man in 1984,' SCIENCE, Apr. 27, 1956) thinks of this as vocational education."

... "The search for education of a vocational nature seems at times and for many students and physicians to be motivated by a desire for security. One learns mathematics to have a job as a book-keeper at a fixed and regular wage; one learns English not to contribute or communicate, but to qualify for a paying job as a teacher; one aspires to be an engineer to compete successfully for a position with a large company with good wages, fringe benefits, regular vacation and guaranteed retirement; and one learns to be a physician to be assured of good income and prestige.

... "What we hope we can do, among other things, is avoid that student who may be motivated by a desire for security of position or income. There is a strong suspicion that these students are afflicted with a disorder the ophthalmologist calls 'tubular vision', or the ability to perceive only that seen in a small field of vision directly ahead.

"Complete vision includes peripheral vision, or the ability to perceive objects in the periphery in much the same fashion as the radar scope in the nose of an airplane. A student with a tubular look at his education, or a physician with a tubular approach to his practice, would have his attention focused on a limited field and be oblivious to all the fascinating items to which his brain might be receptive if given the opportunity.

"A student (and we all should be students) who takes full advantage of his peripheral vision is more apt to have his brain stimulated and his fund of information enhanced by being aware of the opportunities that exist. A person who exploits his peripheral vision is not necessarily a person who is incapable of focusing his endeavors to the extent that he makes no progress and remains constantly in a state of confusion with no primary objective. It is entirely for the student with peripheral vision to focus his attention and still take advantage of the complete look offered by his wider field of vision."

... "Those who respond (to today by a frantic search for protection) rely upon tradition, upon

authority, upon conformity and association with numbers. They react in somewhat the same manner as flies drawn to fly paper by the large number already stuck on it.

"These are the people who look for security. These are the people who want a job with regular wages, with time off for holidays, with health and accident insurance and retirement benefits, who retreat to the application of one form of therapy, who enjoy the company of others in the same fly paper, and who are willing to let someone else make the decisions and develop the ideas.

"These are the people to whom schools are the means to the acquisition of just that amount of information that will make them marketable prod-



ucts; the Chevrolets, Fords and Plymouths of the human race. These are the people who strive for high grades for the purpose of attracting buyers for their services in the same manner as the chrome and tail fin on the modern production automobile attracts purchasers.

"These are the people with 'tubular vision', whose lives are as channeled and as restricted as is their field of peripheral vision. These are the people who are using our great educational institutions as vocational schools and taking up the time and energies of faculties to the extent that faculty potentials are drained off in the manner that a short circuit in an electrical system drains potential."

... "We hope that we can develop that type of student and practitioner who exercises his periph-

eral vision to the extent that he finds it impossible to ignore the challenges that surround him. We hope we can develop the type of student and practitioner who is not so intent upon security that he has the time, the ingenuity and the curiosity to explore new avenues. We hope we can develop the kind of student and practitioner who learns things in order to learn other things.

"We hope we do not develop the type of student and practitioner who studies only those things that seem to have an immediate application. We hope to develop the type of student and practitioner who recognizes that life is neither black nor white but shades of varying grey. We hope that our students are not depressed, but exhilarated by the changes that take place constantly and that they will be active participants in these changes."

... "One can begin to see, perhaps, that the human desire for security and survival need not be satisfied by the limitation of the learning process to that needed only to obtain the essentials of room, board, books, tuition, fees and \$15 a month, such as in the NCAA scholarship for athletes.

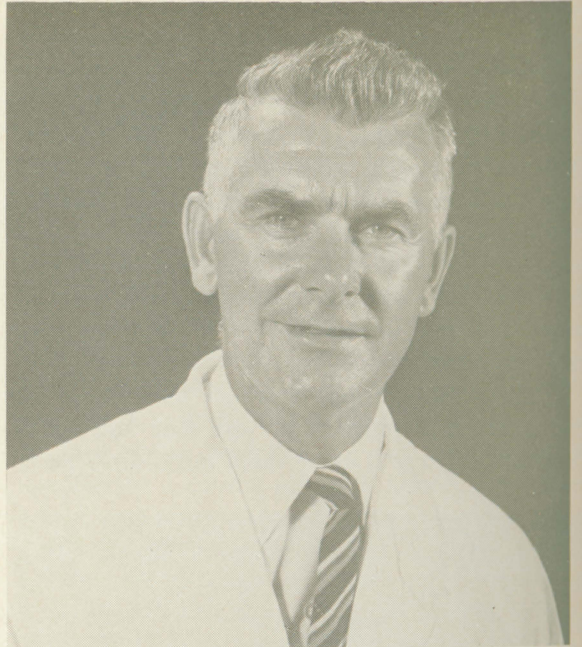
"Security or certainty may be provided most soundly by the continual extension of knowledge, by the exploration of areas that may seem to have no connection with retirement plans, and by exploitation of one's own mind and those of his friends and enemies."

... "I could tell any of our students that they are entering a critical phase of their lives, but it would be critical only for those who fail to comprehend that it is essential for them to broaden their horizons, to unleash their imaginations, to perceive the multitude of things in their peripheral vision, and to search for security and certainty through the testing of doubts, the expansion of information and the recognition of the importance of change.

"For someone who has spent almost 30 years teaching, and who finds this endeavor a most rewarding experience, I am always sincerely humbled in the presence of a group of students whose potential for learning can be compared only to that of a hydrogen bomb in which the process of fission has only begun to ignite the more explosive process of fusion.

"There is much that we all need to do, much that will be expected of us. The least we can do is adopt the critical attitude and use our peripheral vision."

ALUMNI NEWS



President-elect Robert F. Schilling, '43

Schilling is WMA president-elect

Robert F. Schilling, M.D., '43, Madison, professor and chairman of the department of medicine at the UW School of Medicine, became president-elect of the Wisconsin Medical Alumni Assn. at the annual business meeting May 23. He replaces Charles Benkendorf, M.D., who took over the presidency at the annual banquet that evening.

Elected directors of the association for three year terms were Herman H. Shapiro, M.D., '32, of Waunakee, Wisc., and Loron F. Thurwachter, M.D., '45, Milwaukee.

President-elect Schilling has served on the association's board of directors for over five years. President Benkendorf, a Green Bay radiologist, is a Marquette graduate and served his residency at Wisconsin from 1955 to 1958.

Director Shapiro is clinical professor of medicine at the UW Medical School and has been on the faculty since 1934. Dr. Thurwachter is an anesthesiologist who is in solo practice and also is the 1945 class representative. They replace Drs. Leslie Kind-schi, '35, of Monroe, and Schilling, who completed three year terms as director.

Vote to seek new revenue sources

Class representatives of the Wisconsin Medical Alumni Assn. took action in three areas at their annual meeting on May 22. They voted unanimously:

1) That there would be no dues increase at this time but that other avenues of seeking additional revenues be pursued, including sale of advertising in the QUARTERLY and implementation of a life membership plan,

2) That the dues statement include wording that dues are not being raised but that an increase in dues-paying members is necessary to erase an existing deficit, and

3) That the Association move vigorously ahead with the appointment of regional representatives.

The meeting, chaired by Dr. Bernard Lifson, '49, chairman of the council of class representatives,

opened with a color film of Dr. William S. Middleton discussing the history, development and philosophy of the Wisconsin preceptor program. The film had just been completed and was paid for by the Alumni Annual Giving Fund. It will be used to help orient UW medical students, but will be available for general use and a tape of the sound track can be purchased if there is sufficient interest.

Other meeting highlights included:

Urging by Dr. Lifson that appointing dual class representatives and regional representatives be continued.

A report by Dean Eichman that unrestricted annual giving funds were used for: A) remodeling of a teaching laboratory necessary for the new curriculum for which other funds were not available, B) supporting production of the preceptor film, C) providing money for Student Affairs Committee use for worthy projects requested by medical students (student-faculty mixers, guest speakers, athletic equipment, etc.), D) support for two students selected by a faculty committee who presented research results at a national meeting, and E) partial support of travel costs for two students to experience a foreign preceptorship.

Dr. Eichman said a proposed future use of these funds is a modest investment to establish a preceptorship in Nicaragua for teaching and research in public health and tropical medicine.

Annual Giving Program Chairman Dr. Herbert Pohle, '38, gave an interim report (see the accompanying annual business meeting article — Ed.) and said that the program's goals include broadening alumni involvement and participation, stimulate annual contributions, convince alumni that tax-supported institutions have a vital need for alumni support, stress that student protest on campus does not negate need for alumni support and stress that alumni interest and concern are the only prophylaxis against apathy and degeneration that allow a fine school to deteriorate.

The Bahamas retreat/seminar was discussed and concern expressed that for the first time a number of participants had no interest in the educational program (See board minutes: Ed.). Another retreat has been planned for Feb. 14-21, 1970, in Puerto Vallarta, Mexico, and publicity will stress that participation at the educational portions is mandatory. A non-educational retreat also was discussed.

President-elect Benkendorf in his report said that in the coming year, he hopes to organize former

residents by disciplines with a representative for each in the class representative council.

A financial report of the Association showed a deficit of \$6,488.80 for the year. This was mainly due to printing and mailing the 1969 alumni directory (over \$4,500) and production costs for the Bohrod painting reprint, which will be recaptured from sales of the print. An extensive discussion followed on finances and desirability of a dues increase. The resolutions noted above were then made.

Fives and ohs are next

Next year it will be the fives and the ohs, and with Alumni Day 1969 still fresh in the minds of many, plans for 1970 might well be in order. The Alumni Office sends out a suggestion to class representatives that early planning for next year with involvement of other classmates will help to make the reunion a bigger success.

Classes concerned and their representatives are: 1930, Dr. Herman Wirka; 1935, Drs. Garrett Cooper and Mischa Lustok; 1940, Dr. Burnell Eckardt; 1945, Dr. Loron Thurwachter; 1950, Dr. Edwin Huston; 1955, Dr. Eugene Weston; 1960, Dr. Robert Sievert; and 1965, Dr. Norman Jensen.

Alumni day potpourri

Hundreds of interesting, but unrelated happenings occur when almost 500 Wisconsin-trained physicians gather for Alumni Day. Here are a few that have come to light during and after the May meeting:

Four physicians with the title of "dean" attended Alumni Day 1969. In addition to Dr. Peter L. Eichman and Emeritus Dean William S. Middleton of Wisconsin, those present included Dr. Stuart C. Cullen, '33, and Dr. John Parks, '34. Alumni Citation recipient Cullen is at the University of California at San Francisco Medical School and Dr. Parks is at George Washington University Medical School, Washington, D.C.

"If every class had a Jean Lang to solicit funds from the members, the coffers of the Alumni Association would be bulging," said fellow 1959 classmate William F. Schoenwetter, M.D., in a letter from Minneapolis that applauded her efforts.

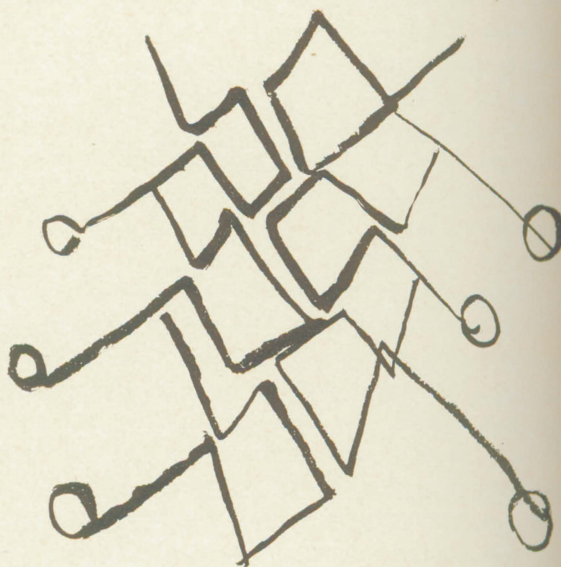
And speaking of 1959, Sandy Mackman, M.D., made the Madison arrangements for a pre-Alumni Day get together at the Madison Club. It was one of several reunions not mentioned in the last issue of the QUARTERLY because arrangements had not been settled by press time in late March. Others were 1939; which had a suite at the Park Motor Inn on May 23, and the class of 1949, which met at the Simon House on May 22. Florian Santini, M.D., handled the '39 arrangements, while Doctors E. I. Boldon, Jr., and Bernie Lifson did the honors for the class of '49.


At a '34 class reunion decades ago, Dr. Middleton challenged Dr. Einar Daniels to render an aria to entertain the gathering. Without hesitation, Dr. Daniels responded with *La Donna Mobile* and

collected a \$5 bill Dean Middleton held out as an inducement. This year Dr. Middleton repeated the challenge, the inducement now a \$20 bill. Past Alumni Association President Daniels didn't try to repeat the aria, but sang something, collected the \$20, and contributed it to the annual Giving Fund.

The Class of 1944's 25th reunion had a number of highlights. In addition to dinner on May 22 at the Spring Green, 30 miles west of Madison, each member was sent a graduating class picture as an inducement to attend Alumni Day. Marvin H. Olson, M.D., handled the arrangement.

The famous Middleton brown derby, or at least a facsimile, was in evidence at the 35th reunion of the Class of 1934. A Thursday afternoon get together in the McArdle Laboratories 11th floor lounge included a 1934-style lecture by Dr. Middleton.





Association business meeting highlights

Election of a president-elect and two directors, a report on the Annual Giving Program, a financial report and several announcements highlighted the Wisconsin Medical Alumni Association annual meeting on May 23.

President Richard Wasserburger called the meeting to order at 11:30 a.m. and presented a nominating committee report that proposed the following slate: for president-elect, Dr. Robert Schilling, '43, Madison; for directors (two vacancies to be filled), Dr. Robert Senty, '47, Sheboygan, Dr. Herman Shapiro, '32, Madison, and Dr. Loron Thurwachter, '45, Milwaukee.

A call for nominations from the floor produced no response and nominations were closed. Drs. Mischa Lustok, '35, and D. J. Freeman, '52, were appointed tellers to collect and tally the ballots. Results produced the election of Dr. Schilling and of Drs. Shapiro and Thurwachter as directors for three year terms on the board of directors.

Dr. Herbert Pohle, '38, chairman of the Annual Giving Program praised the leadership of three classes that led in percentage of participation as of Alumni Day. They were: Class of 1959 with 58% (Drs. Jean Lang and William Schoenwetter), Class of 1944 with 56% (Dr. Arthur Scherbel), and 1943M (Drs. William Gilmore and Robert Schilling). Dr. Pohle stressed that alumni loyalty and support are vital ingredients for a great medical school. The Annual Giving Campaign, he said, cannot be viewed a success unless participation increases yearly, regardless of increased dollar totals.

As of today, 876 contributors have given \$40,494, compared with the 1966-67 total of 467 and \$20,771

at the same period. This year's goal is a participation increase to 55% or 60%. In future campaigns, an earlier start and increased class representative activity with regional representative help will be sought.

Copies of the financial report were distributed by Executive Director Ralph Hawley. He said there is a current deficit of \$6,000 because of production costs for the directory and the Bohrod print, but that income from the Bohrod reproduction should reduce this substantially.

The Council of Class Representatives at its annual meeting yesterday recommended to the Board of Directors that dues not be increased at this time, but that an effort be made to increase income by stimulating more alumni to become dues payers, by sale of advertising in the QUARTERLY and by implementing a life membership program.

President Wasserburger urged all alumni to purchase copies of the Bohrod print. They are available now.

Dr. William S. Middleton has been selected to receive the Distinguished Teaching Award by the senior class and will express his appreciation at the evening banquet. A call for new business produced none, so the meeting was adjourned at 12 noon for luncheon on the Medical Library Terrace.

Activities, participation discussed

Here are highlights of the April 11 Medical Alumni Assn. board of directors meeting, held at the Madison Club: Present were President Wasserburger, Doctors Freeman, Lifson, Pohle, Santini, Schilling, Sivertson, Weston, Dean Eichman, Mr. Hawley and Guest Mr. W. Pohle.

An initial press proof of the Bohrod reproduction was displayed and very favorably received by the board. Final prints will be available in a few weeks. Well over 100 orders have been received. Copies of the Alumni Day programs were distributed and the only open area was one participant in the sports seminar.

Dr. Pohle expressed disappointment with the Annual Giving Program. While the \$28,493 contributed to date is ahead of last year's total, there are over 300 fewer participants. Dr. Pohle urged leadership by class representatives, special representatives be used to provide leadership in areas of high alumni concentration, that the severe budget cut by the legislature and the need for support be conveyed to members, and that the Alumni Giving Program be judged a success only if the number of contributors increases annually.

The nominating committee consisting of Dr. Lifson as chairman with Drs. Freeman and Pohle

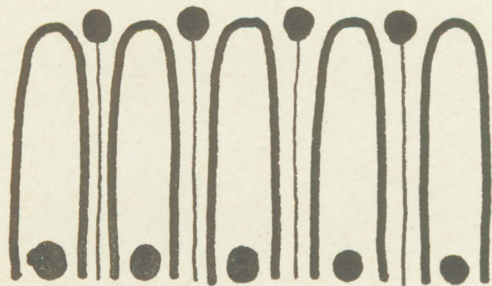
brought forth recommendations for a president-elect and two directors to replace Drs. Lesile Kind-schi and Robert Schilling, who have completed three year terms. Proposed nominees will be contacted.

The Bahamas retreat held last February was critiqued. For the first time, there was a problem of sparse attendance by some participants at the educational sessions. Mechanical problems also were discussed. It was agreed that the retreat be continued next year and that publicity should make clear the serious educational effort of the trip. This year's retreat was self-supporting.

Past President Weston, director of the deferred giving program, opened discussion on the program to encourage bequests and other deferred gifts to the Medical School. The University of Wisconsin Foundation has offered its expertise and a brochure describing tax advantages of various giving options is being prepared. Dr. Weston asked for suggested guides for donors, and possibilities included a chair in family medicine, name professorships to honor distinguished and beloved teachers, and other projects directly related to teaching.

The alumni must be kept aware that there is a need for a more solid operating budget to maintain the strength of the Medical School. Discussion led to the Medical Center Building Program status and the impact of the legislative cut. It was agreed that the alumni body should be candidly informed of both in the form of a letter from President Wasserburger.

Support from Annual Giving Funds for disadvantaged students who might be admitted to a new program has been requested by Dr. David T. Graham, chairman of the admissions committee. The program could lead to an M.S. degree and/or admission to the Medical School. The board gave



unanimous support for the dean's use of unrestricted funds for aiding disadvantaged students as the need arose.

The possibility of a dues increase was discussed. Dues income since 1962 has increased from \$8,400 to \$18,400 while expenses have gone from \$6,000 to \$22,300. This year's deficit has been caused by



increased QUARTERLY costs, the Alumni Day deficit, costs of expanded services and special projects like printing the directory. The board supported a dues increase and the topic will be placed on the agenda for the class representatives meeting.

It was suggested that the election ballot include a provision for indicating the size of an Alumni Association dues increase.

Wolf, Jaramillo top resident teachers

A Wisconsin alumnus, Dr. Frank L. Wolf, '64, was one of the two recipients of the 1969 distinguished teaching by a resident awards on June 6. Also receiving the \$250 award presented by the Wisconsin Medical Alumni Assn. was Dr. Francisco Jaramillo.

The honor is voted annually by members of the senior class and presented at the house staff recognition ceremony. Dr. Wolf, a resident in surgery, interned at Harrisburg (Pa.) Hospital. Dr. Jaramillo, a native of Columbia, is a resident in urology.

Wisconsinites meet in New York

Alumni in the New York City area and those attending the A.M.A. convention in that city were enjoying a Wisconsin Medical Alumni dinner as this issue came off the presses. The dinner was being held July 15 at the New York Athletic Club for alumni and spouses.

Program plans included showing the 1930-31 film that has rare, informal shots of well-remembered medical faculty members. The film was presented to the association by Dr. Fred Hodges, '19, last year. A senior member of the Medical School faculty also was to informally report on developments in Madison. Judah Zizmor, '34, was in charge of local arrangements.

ALUMNI CAPSULES

F. H. Zimmerman, M.D., '28, Watertown, Wisc., physician and surgeon for 40 years, recently retired.

Members of the Wood County (Wisc.) Medical Society in January elected J. J. Suits, M.D., '46, Marshfield, president, and N. W. Arendt, M.D., '52, Wisconsin Rapids, vice president.

CAPT C. T. Doudna, '36, retired from the U.S. Navy Medical Corps Feb. 27, 1969. His present medical activity is confined to serving as part-time house physician to the California Angels baseball club at Anaheim Stadium.

Dr. Albon W. Overgard, '31, recently began a "second career" after 37 years in Stanley, Wisc. At age 65, he "decided to take life easier" and joined the VA Hospital staff at Fort Snelling, Minn., where he examines veterans and estimates disability.

Appointed professor and chairman of pediatrics at the Chicago Medical School/University of Health Sciences was Aaron Grossman, M.D., '40. He has been on the CMS faculty for over 20 years.

Bernard Herzog, M.D., '66, is now taking a surgical residency from C. B. McVay, M.D., in Yankton, S. Dak., and also is teaching part time at the U of South Dakota in Vermillion.

Because of the alert efforts of Army Capt. James E. Schuster, '67, of Milwaukee, a spreading epidemic of bubonic plague in a Vietnamese village was quickly arrested. After a report by a military patrol, Dr. Schuster and a medic traveled to the village and administered antibiotics. In a 2-week period, another 1,500 villagers were immunized.

Norbert C. Barwasser, M.D., '33, a Moline, Ill., dermatologist,



Joseph A. Resch, M.D.

recently was elected president of the Iowa-Illinois Central District Medical Assn.

Among the four names added to the Madison Sports Hall of Fame at its 7th enshrinement dinner June 4 was Dr. Carl S. Harper, '16. An All-American basketball player in 1914, he also was All-Western guard in

1913 and 1914. Dr. Harper, who is 77, was Madison's first doctor to practice obstetrics and gynecology.

Dr. Joseph A. Resch, '38, professor of neurology at the University of Minnesota, recently was the author of two articles on stroke in the May 5 issue of *Modern Medicine*.

Recipient of St. Norbert College's (DePere, Wisc.) 1968 Alma Mater Award for vocational success and outstanding service in Christian life was Green Bay surgeon Thomas J. Beno, M.D., '46.

Dr. Jerry Petasnick, '62, on July 1 was appointed associate professor of radiology at the Loyola Stritch School of Medicine in Chicago.

Two alumni were mentioned in a March 24 article on the child-adolescent unit at Winnebago State Mental Hospital near Oshkosh, Wisc. Dr. Darold A. Treffert, '58, hospital superintendent, and Dr. Richard B. Stafford, '61, were quoted in the story entitled, "Hope Rises for the Mentally Ill."

Dr. John Parks, '34, dean of the George Washington University Medical Center, Washington, D.C., has been elected a Fellow of the British Royal College of Obstetricians and Gynaecologists.

A desire for public service again has taken Joseph P. Springer, M.D., '48, from Durand, Wisc., to an economically depressed area of the south, where he is assistant professor

of Tufts University's project to Mound Bayou, Miss. In 1965 he served aboard SS HOPE and in 1966 he went to Vietnam as a civilian M.D. under AMA auspices.

□

After finishing his internship at San Francisco General Hospital, Dr. Michael H. Levin, '68, this month began his residency in psychiatry at the Langley Porter Neuropsychiatric Institute, San Francisco.

□

Charles R. Vavrin, M.D., '62, now at the U.S. Army Hospital, Heidelberg, Germany, in January was certified a diplomate of the American Board of Orthopedic Surgery.

□

Dr. Fred A. Fosdal, '64, finished a 3-year Army tour in March and has returned to University Hospitals, Madison, to complete his final year of residency in psychiatry. He served at Letterman Hospital and for the last two years was chief of psychiatry at Hunter Army Airfield, Savannah, Ga.

□

Navy LT Jerome A. Behrens, '66, in April was awarded the Bronze Star medal with Combat "V" for three separate acts of bravery and leadership while a medical officer attached to the 3rd Marine Division in Vietnam last year. He is from Greenwood, Wisc.

□

Dr. Hartwell G. Thompson this summer will become associate dean and professor of neurology at the University of Pennsylvania. The former UW faculty member currently is at the West Virginia U. Medical Center.

After he completes his urology residency in August, Dr. William Nuesse, '62, will go into private practice in Rockland, Me.

□

Merel H. Harmel, M.D., has been named professor and chair-



Jerome A. Behrens, M.D.

man of anesthesiology at the University of Chicago School of Medicine. He did post-graduate training at Wisconsin.

□

Members of the Green County (Wisconsin) Medical Society recently elected Dr. John M. Irvin, '45, president, and Dr. William E. Hein, '54, vice president.

□

Claude D. Davis, Jr., M.D., '67, has received the Navy Achievement Medal for performing an emergency craniotomy on a dying football player who had suffered an acute subdural hematoma. Since no other equipment was available at the time, the operation at the Atsugi Naval Air Station, Japan, was performed with a Stryker cast saw. The player returned to full duty.

Dr. Alfred J. Coron, '65, of Milwaukee, recently opened an office in Watertown, Wisc.

□

Re-elected to a second 4-year term in the Florida State Senate recently was David C. Lane, M.D., an intern and resident, 1952-57. He is chairman of the welfare committee and resides in Fort Lauderdale.

□

Dr. Henry J. C. Schwartz, '65, was released from the Navy at Pearl Harbor, Hawaii, and in June entered internal medicine residency at Milwaukee County General Hospital.

□

Certified in anatomic pathology last November, Ray E. Shenefelt, M.D., '63, recently left Dartmouth College for Cincinnati. He is a research associate at Children's Hospital Research Foundation and an assistant professor of research pediatrics at the University of Cincinnati College of Medicine.

□

Five alumni ran into each other on recent ski trips to Aspen, Colorado. They were Drs. William Flader, Richard Rewey and Thomas Stram, all class of '64; Robert Obma, '65; and Thomas Josephson, '66.

□

William T. Russell, M.D., '46, Sun Prairie, Wisc., is president of the Fort Atkinson University of Wisconsin alumni club.

□

Dr. Roy Hertz, '39, is joining the Population Council as associate director of the biochemical division. He has been chief of the reproduction research branch, National Institute of Child Health and Human Development, Bethesda, Md. He is a

recipient of the Wisconsin Medical Alumni Citation and in April received the 1969 Ann Langer Cancer Research Foundation Award.

□

Warner S. Bump, M.D., '23, chief of staff at St. Mary's Hospital, Rhinelander, Wis., and oldest UW Med School preceptor from the point of service, recently was honored by associates for his 40 years as a physician in Rhinelander.

□

Dr. Richard B. Anderson, '47, has been appointed a research fellow at the Harvard Medical School and currently is associated with the Boston Children's Hospital Medical Center. He had been a pediatrician in Madison until January, had been president of the Madison Art Association and a member of the City Audi-

torium Committee for almost two years.

□

Married on Jan. 31 were Mary M. Herman, M.D., '60, and Lucien J. Rubinstein, M.D., both in the pathology department at Stanford University, Palo Alto, Calif.

□

Necrology

We regret to report the following deaths:

Dr. Archibald Lauerman, '11, in West Bend, Wisc., Apr. 23, 1969.

Dr. Thomas S. Englar, '14, Washington, D.C.

Dr. Vincent W. Koch, '15, in Janesville, Wisc., Mar. 5, 1969.

Dr. Benjamin H. Schlomovitz, '16, in Milwaukee, Jan. 12, 1969.

Dr. Charles A. Meyer, '22, Seattle, Wash.

Dr. Robert B. Montgomery, '22, Urbana, Ill., Jan. 23, 1969.

Dr. Guy K. Tallmadge, '26, Milwaukee.

Dr. Gorton Ritchie, '27, in Milwaukee, May 24, 1969.

Dr. Hobart A. Burch, '29, Elmyra, N.Y., Dec. 8, 1957.

Dr. James D. Walsh, '29, Oak Park, Ill., in 1968.

Dr. Bradford B. Crandall, '34, Mystic, Conn., in New London, Conn., Mar. 13, 1969.

Dr. Walter F. Kammer, '37, Muncie, Ind., in May 1969.

Dr. Vernon C. Stehr, '37, Piedmont, Calif., Nov. 9, 1968.

Dr. Byron C. Wheeler, who was an intern and resident in medicine, Terre Haute, Ind.

Dr. Ellis A. Canterbury, '40, in Peoria, Ill., Mar. 29, 1969.

Dr. Jack J. Teplinsky, '54, Skokie, Ill., in March 1967.

Bohrod U.W. Medical School Painting Order Form

Executive Director
Wisconsin Medical Alumni Association
333 N. Randall Avenue
Madison, Wisconsin 53706

Please reserve _____ true color reproductions of U.W. Artist-in-residence Aaron Bohrod's Medical School painting. I understand that the reproductions will be three-quarter size (approximately 18"x24" plus border) and are suitable for framing. A limited quantity will be numbered and autographed by the artist and will sell at \$25 each. Please send me: (Please Print or Type)

_____ Bohrod reproduction(s) at \$15 each..... \$_____

(number)

_____ reproductions, numbered and autographed at \$25..... \$_____

(number)

Total enclosed..... \$_____

Name _____

Address _____

City and State _____ Zip _____

(Please make checks payable to Wisconsin Medical Alumni Assn. Painting)

Puerto Vallarta and Mexico City
Feb. 14-21, 1970

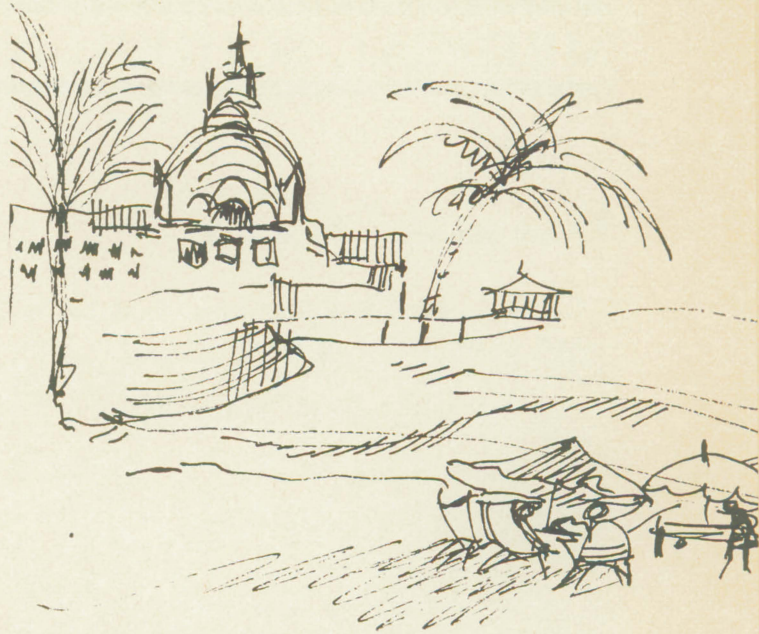
Eighteen hours of top-notch, up-to-date professional instruction . . . 2,000 miles south of the Midwest on Mexico's sunny Pacific coast in the middle of February . . . air transportation to the resort area, Mexico City and back . . . deluxe hotel accommodations and meals. That's what we'd call "palatable post-graduate medical education."

That's also a thumbnail description of the fourth annual Alumni/Faculty Retreat to Puerto Vallarta, Mexico, with a stop in Mexico City. The dates are Feb. 14-21, 1970, and the cost is the same as 1969 . . . \$999 per couple and \$688 for an individual.

Faculty members include Dr. Raymond Chun, neurology and pediatrics; Dr. Benjamin Glover, Jr., psychiatry; Dr. Donald Korst, medicine; Dr. Sanford Mackman, surgery; Dr. Arthur Siebens, rehabilitation medicine and pediatrics; and Dr. Richard Wasserburger, medicine. They will discuss such topics as anticonvulsants, drug interactions, management of chest trauma, problems attendant upon brain damage, identification and therapy of coronary artery disease, and acute and chronic paraplegia.

After the lectures, where attendance will be mandatory, there will be many activities to fill the sun-filled hours for both the physician and his wife. And for six of the seven days there'll be the warm Pacific breezes to make the Puerto Vallarta beaches a February paradise.

On the return flight there's a one day and night stop-over in exciting Mexico City.



Included in the tour fee will be round trip air transportation from Chicago to Puerto Vallarta on Mexico's West Coast, then return by way of Mexico City to Chicago. Accommodations will include rooms with private baths in deluxe class hotels for six nights in Puerto Vallarta and one night in Mexico City. There will be breakfast and dinner each day at your Puerto Vallarta hotel. Retreat members will take care of their meals in Mexico City. Transfers to and from hotels in Mexico and portorage tips for two pieces of luggage per person also are provided.

Make sure you and yours are among the 60 persons to be included on this retreat sponsored by the Wisconsin Medical Alumni Assn. Register early by using the form below.

Register Now — 4th Alumni/Faculty Retreat

Name _____ Address _____

City & State _____ Zip _____

For registration or further information please return this form to: Wisconsin Medical Alumni Association, c/o Mr. Ralph Hawley, 333 North Randall, Madison, Wisconsin 53706.

_____ Registration

_____ Further Information

Enclosed is a check for _____ to cover:

_____ Couples Registration Fee \$999.00

_____ Individual Registration Fee \$688.00

MEDICAL SCHOOL NEWS

Death guidelines set at UW

Guidelines for determining when death has occurred to aid physicians involved in organ transplants were approved by the UW Medical School faculty and the University Hospitals Board this spring.

The guidelines were developed by the Medical School's Committee for Review of Clinical Research and Investigation Involving Humans, chaired by O. O. Meyer, M.D., professor of medicine. Over six months was spent in their development before presentation to the faculty and hospitals board. The guidelines:

GUIDELINES FOR CRITERIA FOR ESTABLISHING DEATH IN POTENTIAL ORGAN DONORS

I. The determination of death in organ donors should be made by no less than two physicians who are not involved in determining the suitability of the donor and who are not members of the surgical team performing the transplant.

II. The time of death shall be determined by the physician(s) who attend(s) the donor at death and, if none, the physician who certifies the death.

III. The presumptive cause of death should be determined and if the decision involves irreversible coma or cerebral death, the fact of death should be ascertained by scientific evidence which in the opinion of the physicians making the determination is current, acceptable and adequate.

IV. Acceptable scientific evidence forming the criteria for determination of cerebral death in the presence of heart beat and relatively normal blood pressure, whether or not artificial means are used to maintain the circulation of oxygenated blood, shall include:

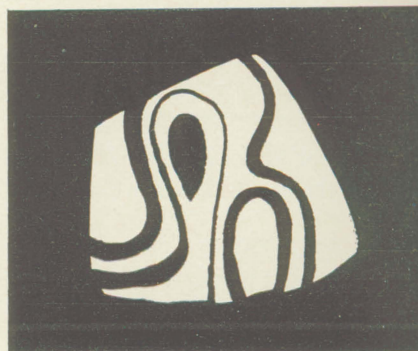
1. Unconsciousness and total unresponsivity to stimuli which are normally intensely painful.
2. Absence of spontaneous movements for an observation period of at least one hour.
3. Absence of reflexes which involve cranial nerves. The pupils must have dilated and be nonreactive.

4. A completely flat (iso-electric) brain wave recording employing at least twice the usual gain and no brain wave responses to sensory stimuli.

5. Absence of spontaneous breathing. If artificially ventilated, absence of respiratory effort when the artificial ventilation is discontinued for a trial period of three minutes. (Due care should be taken to insure that the patient if on a mechanical respirator has not been over-oxygenated or unduly hyperventilated so as to reduce the pCO₂ below normal during the 10 minutes preceding the trial.)

6. All of the five conditions described earlier in this guideline must persist unchanged for at least 24 hours (48 hours in cases of known or suspected intoxication with central nervous system depressants.) In cases of brain injury where there is such gross anatomical damage visible on physical examination or craniotomy as to indicate that the brain is irreparably damaged, extruded, divided or destroyed, the period of observation for the persistence of the conditions described in Nos. 1, 2, 3, 4 and 5 may be reduced to one hour.

V. In all cases in which artificial ventilation is employed, the pronouncement of death, based on the foregoing criteria, shall be made before artificial ventilation is permanently discontinued.



Nellen elected UW regent president

Dr. James W. Nellen, '39, was elected president of the University of Wisconsin board of regents at its June 13 meeting. Dr. Nellen, from Green Bay, is an orthopedic surgeon and is physician for the Green Bay Packers professional football team.

A Madison native, Dr. Nellen is 55. He was a football player at Wisconsin in the early 1930s and received both his bachelor and medical degrees at UW. He has been on the board of regents since 1964.

Shortage limits Wisconsin freshmen

Qualified Wisconsin applicants to the U.W. Medical School will be turned away for the first time because of a lack of facilities to accommodate them. This was announced to the faculty at its April meeting by David T. Graham, M.D., chairman of the admissions committee, who pointed out that 10 to 15 "otherwise qualified" state students would not be admitted to the class of 1973.

The school is geared to take an entering class of 104. Admissions have been closed out with 100 Wisconsin and four out-of-state residents as members of the class. A total of 351 Wisconsin persons applied for a place in the class, 12½% more than last year, Dr. Graham said. In screening applicants from Wisconsin, he said, 10 to 15 persons who would have been accepted last year had to be turned down this fall.

The number of otherwise highly qualified applicants being rejected hasn't been this high in 20 years, Dr. Graham said. A larger number of bright

college graduates is one reason for the turn away. But with Wisconsin well below the national average in number of physicians per 100,000 population, the inability to accommodate them is particularly significant, he said.

"The state can't have more doctors if it doesn't provide the facilities for training them," Dr. Graham pointed out. He referred specifically to the proposed \$120 million U.W. Medical Center planned for an area west of the Madison campus near the Veterans Administration Hospital.

"We just cannot provide for them in this (present) site," he said. Next year's turnaway of qualified state students could reach 25, according to Dr. Graham, and if the new center were built, there would be enough eligible, qualified students to fill it.

Memorial for Mrs. Middleton accepted

University of Wisconsin regents on May 9 accepted two "living memorial" funds. One of them, totaling \$1,740 from friends of Williams S. Middleton, M.D., dean emeritus of the UW Medical School, was given in honor of the late Mrs. Middleton who died June 7, 1968.

The fund in honor of Mrs. Middleton is to be used as a memorial loan fund for nursing personnel. Mrs. Middleton was a graduate of Madison General Hospital School of Nursing. She was a nurse at the Student Health Service at University Hospitals before World War I, and later served in France at Base Hospital 22. During World War II she was in charge of the Red Cross home nursing program and recruited nurses for the Army.

New hope for Parkinson sufferers

University of Wisconsin Medical Center physicians are using a new medication that may provide hope for sufferers of Parkinson's disease.

"Levodopa has been known for some time," explains Dr. Keith Bogart, assistant professor of neurology. "European physicians used the drug in very small doses, but only recently have American doctors used the immense doses needed to treat parkinsonism."

Dr. Bogart, a resident at UWH during 1965-67, explains that levodopa works by supplying the dopamine deficit in the brain. This lack causes the shaking and ashen expression characteristic of parkinsonism. The brain cannot use dopamine injected directly. Levodopa is a simpler compound which the brain makes into the dopamine it needs.

Wisconsin is one of 24 U.S. medical centers using the drug. Still in a semi-experimental clinical stage, levodopa is only available in limited quantities. With a long waiting list, Wisconsin has only enough to treat 50 patients. "We have to carefully select patients to receive the drug," Dr. Bogart says. "Those with very mild or extremely severe parkinsonism will be treated with other drugs. Because parkinsonism usually strikes older people, many cannot be given the drug because of heart trouble, high blood pressure, diabetes or other conditions. The drug could be harmful in their cases."

Given orally in capsule form, levodopa has brought improvement to more than 75% of the patients receiving it. Because each person reacts differently, the drug's effect must be carefully monitored and supervised.

Dosages are gradually increased during treatment until the therapeutic level is reached. Present studies indicate that the drug's beneficial effects are not lost when the body becomes tolerant to the large doses needed to treat parkinsonism.

Dr. Middleton, 35 students honored

William S. Middleton, M.D., emeritus dean of the UW Medical School, received the 1969 Distinguished Teaching Award at the school's honors convocation May 22. Dr. Middleton was selected to receive the award by senior student balloting. The honor, along with a \$1,000 stipend, is presented annually by the Wisconsin Medical Alumni Association.

Thirty-five students received awards and grants. One of them, Andrew B. Szumowski, a Med 2 from Kenosha, received two awards. Students cited were:

Charles Russell Bardeen Award — Andrew B. Szumowski, Kenosha. Guro Bjornson Scholarship



Emeritus Dean William S. Middleton prepared to make a few acceptance remarks as he was presented the 1969 Distinguished Teaching Award at the annual Honors Convocation.

Award — David D. Norenberg, Neenah. William J. Bleckwenn, Jr. Award — John E. Woodford, Racine. The Borden Award — John V. Temte, Madison. The Drs. Joseph Dean Award — Miss Dorothy J. Ganick, Boston, Mass.

The Evan and Marion Helfaer Awards — Robert M. Bumsted, Janesville; Patrick K. Keane, Appleton; Daniel D. Kane, Jr., West Allis; Daniel N. Wochos, Denmark; Daniel E. Hathaway, Madison; Mrs. Mary Kirk Sawyer, Monroe, La.; Tom D. Ivey, Mineral Point; Leslie A. Leppla, New Berlin;

Discover virus like some cancers

"What's up Doc?" has an answer. "From wild cottontails."

A newly discovered virus very much like that connected with some human cancers lives in the rabbits. This Herpesvirus will not live in any other animal.

Harry C. Hinze, Ph.D., assistant professor of medical microbiology at the UW Medical Center, began working with the virus about two years ago. With a special Conservation Department permit, Dr. Hinze and his colleagues have trapped the cottontails throughout Wisconsin. Cottontail rabbits will not live and reproduce in captivity, Dr. Hinze explains, unless they are given large pens simulating their native haunts. Dr. Hinze is building such pens on farms near Fond du Lac.

The Herpesvirus found in the rabbits is of the same family as a virus associated with Burkitt's lymphoma, a form of cancer usually found in children of tropical and sub-tropical Africa. It also appears in New Guinea, Europe and the U.S. Burkitt's lymphoma, a quick growing malignancy, is usually fatal within one year if not treated. Some drugs have successfully brought permanent disease regression for some Burkitt's patients.

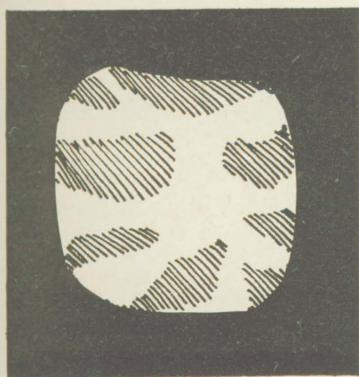
In children, the disease spreads quickly throughout the body, most often causing a large tumor to appear on the neck or face. Research indicates, however, that when it strikes adults the results may often be similar to infectious mononucleosis. Dr. Hinze's work indicates that the same is true with the virus growing in his rabbits. In both cases, the disease affects lymph nodes and spreads throughout the body, as well as showing the malignancy and mononucleosis-like differences between young and adult rabbits that appears in humans.

"This virus is very specific," Dr. Hinze says. "The virus we see in humans with Burkitt's lymphoma will not grow in any other organism. Now, with this Herpesvirus in rabbits, we have a model suited to laboratory study. We can control the conditions it needs to grow and carefully study the results."

Dr. Hinze, who delivered a paper on his preliminary work with the virus at the 68th annual meeting of the American Society for Microbiology last year, discussed his progress at this year's meeting in Atlantic City, May 4-9.

Kenneth W. Feldman, Newton Highlands, Mass.; Robert H. Jacqmin, Green Bay; and G. F. Splittgerber, Oshkosh.

The Dorothy and Charles Inbusch Award — Lawrence G. Tomasi, Ferndale, Mich. The Pfizer Laboratories Medical Scholarship — Stephen W. Rutter, La Crosse. The Lewis E. and Edith Phillips Award — Mrs. Mary E. L. Wilson, Kokomo, Ind.; William E. Smith, Beaver Dam; Peter W. Schmitz, Elm Grove; Thomas P. Laughren, Madison; Michael J. Ansfield, Shorewood; Wayne J. Pietz, St. Ger-



main; Thomas J. Pauly, La Crosse; and Andrew B. Szumowski, Kenosha.

The James M. Price Award in Cancer Research — Samuel M. Cohen, Edgerton. The Radiology Case of the Week Awards — Douglas E. Thomson, Mt. Horeb, and Karl T. Wickstrom, Clare, Mich.

The Roche Award — Craig G. Stien, Stevens Point. The University of Wisconsin Foundation Awards — Stephen A. Bernsten, Skokie, Ill.; Paul E. Sandstrom, Springfield; David L. Davis, Reedsburg; and Stanley B. Chung, Kowloon, Hong Kong. The Upjohn Award — Miss Mary B. Metcalf, La Crosse. The Ralph M. Water Medical Scholarship — William B. McHugh, Pittsburg, Pa.

The Class of 1969 Scatters to Internships

Members of the UW Medical School Class of 1969 recently arrived at their internship assignments and many of the 94 find themselves in unfamiliar locations. Nineteen of the new doctors will serve residencies in California, 14 in Minnesota hospitals, nine in New York and seven in Wisconsin.

Alumni in several areas of the country have been helpful in assisting the young intern in his transition between the medical school and his assignment. Perhaps other Wisconsinites might like to look up members of the Class of 1969 in their areas. Here they are:

ALABAMA

Gorman, Jeffrey D.
Carroway Methodist Hosp.
Birmingham

ARIZONA

Gries, Harold E.
Good Samaritan Hospital
Phoenix

Grossklaus, Jon E.
Good Samaritan Hospital
Phoenix

Kaupie, Robert C.
Good Samaritan Hospital
Phoenix

Page, George E.
Maricopa Cty. Gen. Hosp.
Phoenix

Parry, Rodney R.
Good Samaritan Hospital
Phoenix

CALIFORNIA

Bumsted, Robert M.
San Joaquin Gen. Hospital
Stockton

Christenson, Richard H.
L.A. County Gen. Hosp.
Los Angeles

Holden, Gene V.
Memorial Hosp. of Long B.
Long Beach

Josse, John W.
Highland Gen. Hosp.
Oakland

Junk, Marlen F.
St. Mary's Hosp. & Med. Ctr.
San Francisco

Kafura, Peter J.
Highland Gen. Hosp.
Oakland

Kane, Daniel D.
David Grant U.S.A.F. Hosp.
Fairfield

Karras, Thomas J.
San Joaquin Gen. Hosp.
Stockton

Keane, Patrick K.
San Joaquin Gen. Hosp.
Stockton

Lescher, Mary A.
Harkness Comm. Hosp.
San Francisco

Lins, Robert J.
French Hospital
San Francisco

Marciando, Richard J.
San Joaquin Gen. Hosp.
Stockton

Randecker, Harold H., Jr.
Harkness Comm. Hosp.
San Francisco

Rensink, Michael J.
U.S. Naval Hospitals
San Diego

Stalheim, Alan J.
L.A. County Gen. Hosp.
Los Angeles

Stephenson, Gary M.
Orange County Gen. Hosp.
Orange

Stone, Richard
Presby. Pacific Med. Ctr.
San Francisco

Turbey, Wilson J.
Harbor General Hosp.
Torrance

U, Kwei Sang
Presby. Pacific Med. Ctr.
San Francisco

CANADA

Holmes, Russell E.
McMaster Univ. Clinic
Hamilton, Ontario

COLORADO

Burger, Loren C.
Denver General Hospital
Denver

Gasser, Thomas J.
Presbyterian Hospital
Denver

Norgard, Michael J.
Fitzsimons General Hospital
Denver

Palm, Robert A.
Presbyterian Medical Center
Denver

FLORIDA

Olson, Roy A.
Naval Hospital
Jacksonville

HAWAII

Burgdorf, Walter H. C.
Tripler General Hospital
Honolulu

Machigashira, Harold T.
St. Francis Hospital
Honolulu

ILLINOIS

Boyes, John A.
Univ. of Illinois Hosp.
Chicago

Segal, Marshall B.
Univ. of Ill. Res. & Hosps.
Chicago

IOWA

Bender, William L.
St. Luke's Methodist Hosp.
Cedar Rapids

KANSAS

Kasuboski, David A.
Univ. of Kansas Med. Ctr.
Kansas City

KENTUCKY

Larson, Thomas O.
U. of Ky. College of Med.
Lexington

MARYLAND

Iacolucci, Joseph P.
U.S. Naval Hospitals
Bethesda

Olson, Carl E.
Public Health Service Hosp.
Baltimore

Paulsen, Frederic L.
U.S. Naval Hospitals
Bethesda

Rumack, Carol M.
University Hospital
Baltimore

MASSACHUSETTS

Temte, John V.
Boston City Hospital
Boston

MICHIGAN

Gailans, Ivars J.
Henry Ford Hospitals
Detroit

Lathrop, Thomas P.
Hurley Hospital
Flint

Naus, Peter J.
McLaren General Hosp.
Flint

Oettinger, Joseph T.
Blodgett Memorial Hosp.
Grand Rapids

Radke, Jan R.
Henry Ford Hospital
Detroit

MINNESOTA

Abler, Ronald L.
St. Mary's Hospital
Duluth

Ahrlin, Hollis L., Jr.
St. Luke's Hospital
Duluth

Brick, Daniel L.
St. Luke's Hospital
Duluth

Cooley, Charles J.
St. Luke's Hospital
Duluth

Dannenberg, Lee L.
St. Paul-Ramsey Hosp.
St. Paul

Foltz, Alexander S.
St. Luke's Hospital
Duluth

Goff, Steven K.
St. Mary's Hospital
Duluth

Hathaway, Daniel E.
Univ. of Minnesota Hosp.
Minneapolis

Hoard, Robert E.
St. Paul-Ramsey Hosp.
St. Paul

Hussa, John F.
St. Luke's Hospital
Duluth

McKichan, John M.
St. Paul-Ramsey Hosp.
St. Paul

Myers, Robert K.
St. Luke's Hospital
Duluth

Napgezek, Marvin R.
St. Paul-Ramsey Hosp.
St. Paul

Srenock, Thomas
St. Paul-Ramsey Hosp.
St. Paul

MISSOURI

Adams, John M.
Menorah Medical Center
Kansas City

NEW YORK

Cohen, Norman E.
Lenox Hill Hospital
New York City

Favaro (Asperheim) Mary K.
Albany Med. Center Hosp.
Albany

Goldenberg, Don L.
Lincoln Hospital
Bronx

Hansen, John P.
Highland Hospital
Rochester

Krembs, F. Gregory
Veterans Admin. Hosp.
New York City

Marcus, Eric R.
Bellevue Hospital Center
New York City

Piper, Kenneth W.
Strong Memorial Hosp.
Rochester

Sebastian, James A.
Naval Hospitals
St. Albans

Wickstrom, Karl T.
Mary Imogene Bassett Hosp.
Cooperstown

NEW HAMPSHIRE

Woodford, John E.
Mary Hitchcock Mem. Hosp.
Hanover

OHIO

Belfiori, P. Thomas
Mount Carmel Hospital
Columbia

Price, David L.
Akron City Hospital
Akron

Vrobel, Thomas R.
Cleveland Metro. Gen. Hosp.
Cleveland

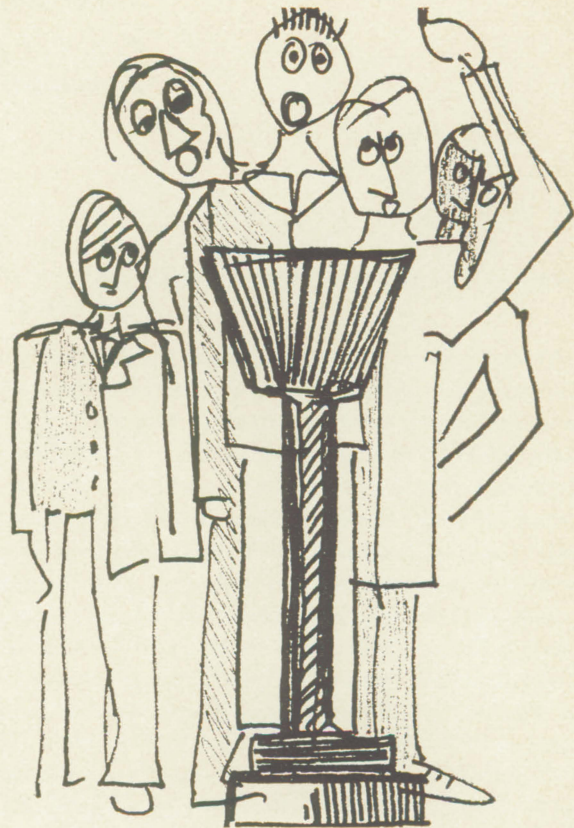
PENNSYLVANIA

Himathongkham, Thep
Philadelphia General Hosp.
Philadelphia

TEXAS

Jenkins, Paul G.
Parkland Memorial Hospital
Dallas

Quisling, Ronald G.
Parkland Memorial Hospital
Dallas



Weber, Richard W.
Brooke General Hospital
San Antonio

Werner, David P.
Deaconess Hospital
Spokane

UTAH

Kurten, Timothy
Latter-Day Saints Hospital
Salt Lake City

WASHINGTON

Cuene, Sarann
Children's Orthopedic Hosp.
Seattle

Haselow, Robert E.
King County Hospital
Seattle

Krueger, Bruce R.
Deaconess Hospital
Spokane

Martin, W. Bradford
Providence Hospital
Seattle

Mikkelsen, Michael K.
Public Health Service Hosp.
Seattle

WISCONSIN

Budzak, Kathryn S.
Madison General Hospital
Madison

Gibson, Gail F.
University Hospitals
Madison

Kliese, Kenneth A.
Madison General Hospital
Madison

Loynd, Graham F.
Lutheran Hospital
La Crosse

Metcalf, Mary B.
Madison General Hospital
Madison

Stopple, John A.
Lutheran Hospital
La Crosse

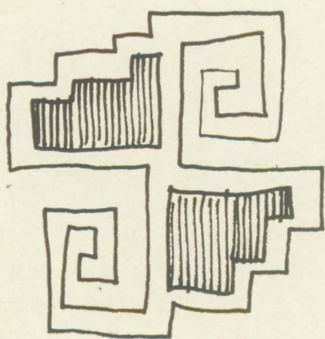
Usow, Barry H.
Mt. Sinai Hospital
Milwaukee

Group reports on experimentation

As man delves ever deeper into the mysteries of life, medical science is finding the line between treatment and experiment increasingly blurred.

An international group of medical scientists and clergymen meeting in Switzerland last fall issued a report favoring "the establishment of local, regional and/or national committees" to deal with the ethical aspects of experiments with humans. Local committees should not include members of the local research teams. (Editor's note: The University of Wisconsin Medical School has such a committee, composed of 14 members, that oversees investigation involving humans.)

Dr. Van R. Potter, professor of oncology and assistant director of the McArdle Laboratory at the UW Medical Center, was chairman of the group discussing guidelines for human experimentation ethics at the September conference. It was sponsored by the Ecumenical Institute and was organized and directed by Dr. H. R. Weber, associate director of the institute.



"We decided that it's very important to create a social climate that attaches increased importance to these ethical ideas," Dr. Potter said. "After all, they are only suggestions and have no legal force."

The September 1968 revision of the original ethical code, the 1964 Declaration of Helsinki, stressed "that

the standards as drafted are only a guide to physicians all over the world. Doctors are not relieved from criminal, civil and ethical responsibilities under the laws of their own countries." The report suggested that each country should publish its own ethical guidelines in accordance with its laws and customs, but in the absence of such guidelines, the Declaration of Helsinki or its modification could be relied upon.

Jointly considering the human experimentation question for the first time, the medical scientists and theologians upheld the Hippocratic ideal that "the healing of the patient under treatment still remains the primary aim." The participants also acknowledged that methods, treatments and medicines can be studied and improved in the course of treatment.

"There are two main kinds of experimentation," Dr. Potter explained, "one which involves high risk in terminally ill patients for whom no cure is known, and the other with essentially no risk, often involving perfectly healthy volunteers." He said that difficult decisions arise because these "extreme cases blend into each other."

No experimentation can be done without the patient's consent, according to the report. If the patient is not qualified to give permission, it must be obtained from those responsible for him. Prior to receiving consent, the physician should explain the experiment to be sure that those giving the consent understand it. This permission may be withdrawn at any time during the experiment, the 1968 report says. If the experiment appears harmful to the patient, the physician should discontinue it.

Despite the problems, the participants' report saw the necessity of such experiments, provided that they are "within limits and subject to ethical safeguards. There is no final substitute for observing human beings to obtain knowledge to be applied to human beings," the report says.

COLUMNS AND EDITORIALS

Personal involvement is needed

BY CHARLES BENKENDORF, M.D. PRESIDENT

GREEN BAY — As your 1969-1970 president, I am honored to have this opportunity to greet the University of Wisconsin medical alumni and also to pledge to you my best efforts to attain the goals set forth by this group.

"Effervescence" and "involvement" are two words that remain with me of the festivities of Alumni Day.

If one word was applicable in describing the University Singers who entertained us during dinner it would have to be "effervescence." Their attire, bubbly presentation, attitudes and smiling faces were in direct contrast to the depressed, morose, unkempt group of students dressed in garish costumes "doing their thing" on the patio of the Union. Quite the contrast! But this is the ferment that causes the effervescence.

The graduates of this great medical school and those of us who either interned or received specialty training at the University Hospitals formed many close ties to the institution, especially to the men who trained us. We, the alumni, incurred a lasting debt to the University of Wisconsin Medical Center and should become involved with the Center as some token of repayment. Greater involvement, principally by participation in the Annual Giving Program, will help the school to maintain quality and more importantly will demonstrate that we are grateful and that we really care.

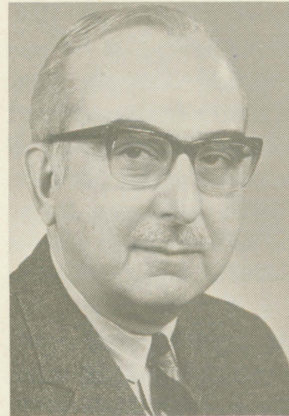
During my tenure on the board of directors I had been privileged to gain considerable insight into the operations, strengths and needs of the Medical School. The School is in a very vulnerable position and many excellent programs are in jeo-

pardy because of fiscal problems at the state and federal levels. The personal involvement of the medical alumni will lessen the medical school's vulnerability.

If you look long enough . . .

BY MISCHA J. LUSTOK, M.D., '35
EDITOR

MILWAUKEE — What a delightful reunion weekend. The class representatives meeting was crackling with the enthusiasm of new ideas and unrestrained criticism of some of the old. The separate gatherings of the honored classes were gay and nostalgic. The older alumni, displaying great fervor, were among the first to summit and graciously bowing to the vicissitudes of years were the first to go home. The next day's program was crisp and engaging. The rain gods were benevolent, and the



luncheon on the Middleton Library mall was a social success. The evening banquet overflowed the accommodations and the spirit of the day (as well as other spirits) warmly welcomed the graduating seniors into the brotherhood. The entertainment was superb, and blissfully long enough to cut short the oratory. A weekend to

remember.

It is always good to renew old friendships and to greet new faces. Within the family of Wisconsin Medical Alumni a common thread weaves the cloth of indoctrination, involvement and ultimately, commitment to a way of life. On the surface the mood was gay, the ardor high, the feeling light and frivolous. But deeper in this humor there was a

flow of an occult but significant dialogue between the alumni and the school. We looked at each other, and soon we began to see. . . .

We became aware of the prodigious task facing the dean and the faculty in promulgating a changing and expanding medical curriculum in an archaic and overcrowded physical facility with an ever increasing demand for more teaching time and larger faculty pitted against a shrinking budget. We understood the essence of the need of our financial support and the need for long term planning of physical expansion. We grasped the necessity of growth to forestall stagnation and the urgency of this requirement.

Then came the revelation, and with it an awareness that we are not ordinary spectators of the scene but fully involved participants in the welfare of this fountainhead of our profession and its striving towards academic excellence. Our financial support is important, but not the only support our school deserves. We became cognizant of our salutary position as an uniquely effective link between our school and the general community, and our singular potential for productive influence.

The dean and the faculty also looked and they, too, began to see. We believe they sensed a prevailing mood among the alumni that was more profound than the supercilious activities suggested. Perhaps they saw us as a troupe of educated, mature and conditioned professionals seasoned in delivery of medical care and weathered by community influences and social-economic forces, whose opinion and judgement may be of value to an academic setting.

Perhaps they saw in us a capability and an expertise in the practice of medicine and the management of disease in its natural setting ornamented by governmental, social, economic and organizational intrusion which may be of significant value if fully harnessed into the movement of the school.

We had a feeling that we were no longer just visitors, but in fact participants in an unfolding dialogue.

We believe that if we continue to look long enough, we will soon begin to see.

A letter to the class of 1969

Dear Class of '69:

By the time you receive this, you will have graduated from medical school, have permanently added the designation "M.D." as a suffix to your name and have embarked on what is one of the great adventures of your life, your intership. The Medical School is sorry to see you leave, the four years having passed rapidly; although to you it undoubtedly seemed like an eternity. Your medical education ranks with the finest and you should be as proud of it as we are of you. You are now fellow alumni and we welcome you to the "club."

A fairly disturbing thing to tell a recent graduate, and something you may not realize at this time, is that now your education really begins. You may resent hearing this after four years in school, but



it's true. Obviously the reason is that in order to be fully educated one needs experience and seasoning. With experience hopefully comes good judgment and this is the main reason we need doctors in the first place.

If it weren't for judgment, computers might be able to practice medicine. Judgment is needed in order to suggest or perform the proper lab test, procedure, or treatment for the patient. And the welfare of the patient is the primary goal of the physician. For doctors are here to help people. That is the name of the game. As Einstein said, "That Man is here for the sake of other Men."

Maintain your sense of humor, but not at the expense of others. Respect everyone, for there is something you can learn from everyone. Medicine is to be practiced with affection, sympathy, and understanding for the patient.

Yet one's objectivity must be retained. At times this may be a fine line to tread. Dr. Middleton has stated that the best physician is the one who gives

the most hope. Remember this. It will prove valuable to you many times in the years to come. Sometimes we become irritable, but this must never be conveyed to patients, for they will interpret it as disapproval. If a patient asks a foolish question or mentions irrelevant symptoms, be patient. He didn't go to medical school and doesn't know what is or isn't important.

Don't ridicule the patient or be haughty. As important as what you know is your manner, friendliness, and attitude. Proper attitude, in your training years, as well as later on, is perhaps the single most significant attribute you can achieve.

Do things willingly and without complaining. Which intern would you appoint to the coveted residency or give the best recommendation — the one who performs an assignment gladly, like it's part of his job (which it is) or one who complains



about the job or worse yet doesn't do it at all? Attitude is everything.

During your internship you will decide what you will be doing during succeeding years. You may spend two years in the armed forces or Public Health Service. This will give you valuable experience and additional time during which you can decide what you will do with your future. Make a decision you can live with. For in medicine, more so than in most careers, you can be happy in your work. And to enjoy your work is one of life's greatest blessings.

Once you've made your decision, be it general practice, research, teaching or a specialty, give it a fair chance. It will probably be the right decision. If it's not, remember that nothing except death is final, and if you were wrong you can always change.

Be skeptical, be a questioner, find the truth. But be patient with your teachers if they do not know all the answers. This is one of the reasons you are here. A Wisconsin man doesn't blurt out his opinion prematurely. Offer it if and when you are asked.

Always listen, look, and learn. Pay attention to your patients. They can teach you a lot. Listen to and observe the great men of medicine at every opportunity. Some of it will rub off. Take care of your body and your health. You will do your best work and enjoy it more if you're alert and rested. Retain your honesty and idealism. If you keep telling the truth long enough, people will find you out. Don't let money be your goal. Your goal is to serve patients and do it well. This will be your greatest satisfaction. Any financial reward is strictly a secondary gain.

Reading the medical literature is for many one of the most difficult tasks. The hardest thing about reading an article is starting. Once you've done that it's all downhill. You'll have your ups and downs and your frustrations. They'll be easier to accept if you're able to keep your sense of humor. You won't be able to please everyone, even though you try.

And you must try, for your ability to get along with people will always be one of the most important criteria that will distinguish success from failure. Maintain your humility. This shouldn't be difficult.

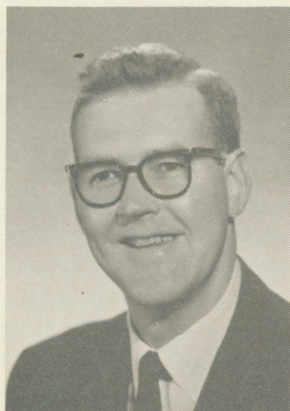
In caring for patients, be conservative. Still one of the best rules to follow is, "First of all, do no harm." No matter what the stage of your career, you will always have a chance to teach someone something, as others are trying to teach you. Take advantage of this opportunity, for the best way to learn is to teach. You will find that with an open mind you will learn something new every day. This is one of the reasons why you will find that you are able to enjoy the practice of medicine more and more each day of your life.

Best wishes,
Donald S. Schuster, M.D., '51
Member, Editorial Board

Northwestern news

BY JAMES H. DAHLEN, '61
NORTHWESTERN CORRESPONDENT

SEATTLE — We were honored by a visit from Dean Peter Eichman, who was the Greater Seattle Wisconsin Alumni Founder's Day gathering March 21. Nearly 100 were in attendance, though physician alums were a small minority. A tour of the new mental retardation research building at the University of Washington Medical Center followed the meeting. Dr. Jan Whitmore, '48, chief of physical medicine and rehabilitation at Harborview Hospital here was able to show a few of our city's highlights to Dr. Eichman prior to the meeting. We welcome him back to resume the tour at any time.



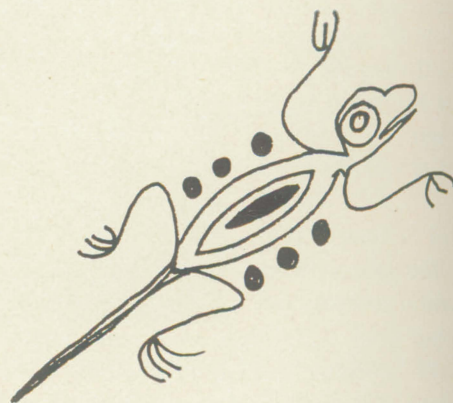
Dr. Timm Zimmerman, '63, is completing a year of running the general medicine clinics at University Hospitals here while pursuing his residency in internal medicine. Also at University Hospitals is Dr. John Chandler, '65, in an ophthalmology residency after spending some time in the U.H.P.H.S. While an undergraduate at Wisconsin, John played some football for the Badgers.

Now for a rundown on last year's grads completing internships in Seattle:

Dr. Dick Ellingstad and wife Mary Ellen plan to return to Wisconsin for the summer, then leave for medical missionary duties in Tanzania under auspices of the Lutheran Church in America. They anticipate taking a new third member of the family to Africa.

Dr. Ralph Simonsen will be summering at Fort Sam Houston, then off to Germany in Army greens. Dr. John Reichardt, in similar attire, expects to see Vietnam firsthand. Dr. Clay Wickham, at Harborview with Dick, Ralph and John, also foresees Army duty.

Dr. Mary Cowles leaves Swedish Hospital here for a position at Mendota State Hospital at Madison. Dr. Brian Moore has grown attached to University Hospitals here, and plans to begin a residency in internal medicine. Drs. John Wegman and Stu Menkin also have sent down tap roots and



are remaining at Children's Hospital for a pediatric residency after straight pediatric internships.

That's the news to date, except for a question to the Medical School administration: Do you realize that you're in our old apartment!! We lived in #207 above Rennebohm's at 333 N. Randall!

(Anyone in the great Northwest who has alumni news can contact Dr. Dahlen at Northwest Professional Center, 1570 N. 115 St., Seattle 98133.)

Mailpouch from Texas

By EDWARD J. LEFEBER, M.D., '36
TEXAS CORRESPONDENT

GALVESTON — The last week in April or the first week of May brings the annual meeting of the Texas Medical Association. I take leave of my practice to attend as a delegate from my county society. Three delightful kaleidoscopic days full of committee meetings, scientific programs, and social affairs with the ever present opportunity to renew acquaintances with former colleagues and students usually follow. Each year as the Texas correspondent for our alumni journal I scan the pages of the annual session program for names of Wisconsin medical alumni, and am rewarded by discovering a few of our alumni listed either as officers, committee members, or speakers.

This year, Dr. Bernard T. Fein, '36, San Antonio, was the general sports event chairman for the general arrangements committee. Under his able directions, tennis, golf, skeet and trap shooting events were enjoyed by many. Dr. Fein is an internist whose subspecialty is adult allergy. At present he is chief of staff at the 504 bed teaching hospital (Bexar County) of the University of Texas Medical School at San Antonio. He is active in organized medicine and is a member of the Committee on Transportation of the Texas Medical Association. I am told by his partner that he is a super tennis player and at present is the holder of the men's single and double championships of the American College of Allergists.

Another alumnus on this year's program was Dr. William P. Deiss, Jr. '54, chairman and professor of medicine, University of Texas Medical School, Galveston. He was moderator of a discussion on the current status of transplantation given as part of a symposium on cardiovascular diseases.



Some months ago, Dr. Robert F. Schilling, '43, chairman and professor, Department of Medicine, University of Wisconsin, visited with Dr. Deiss at the medical school, Galveston. Another Wisconsin visitor at Galveston on Feb. 18, was Dr. Henry Lardy who was the Robert A. Welch Foundation lecturer. His subject was "Antibiotics That Affect Ion Transport in Mitochondria."

Dr. Harvey C. Slocum, '40, on May 1, returned to the Department of Anesthesiology, University of Texas Medical School, Galveston, as full-time professor. Before his retirement from the military service, Dr. Slocum was director of the Department of Medicine and Surgery, Medical Field Service School, Fort Sam Houston, Texas.

From the 1969 alumni directory may be gleaned much of interest. For example, 109 of the medical alumni practice in Texas. Fifty-eight of these are four year graduates, 34 are former interns or residents, while 17 attended Wisconsin for two years and obtained their M.D. degree from another medical school. Thirty-seven of the 109 are board certified in one of 13 different specialties. Two of these are certified by two boards. Forty of the total group are in either solo, partnership or group practice. Seven are engaged in full-time teaching. Twelve are in one of the government medical services. Six are either interns or residents. Two more have retired. The Wisconsin nucleus represents approximately less than 1% of all Texas physicians.

(Texas correspondent Lefebber would welcome alumni news for his next column. His address is c/o Internal Medicine Associates, 200 University Blvd., Galveston, Tx. 77550.)

Portrait of a new Tucson arrival

By JACKMAN PYRE, M.D. '37
SOUTHWESTERN CORRESPONDENT

TUCSON — Many of you will remember the flaming red head, Liz Grimm. She arrived in Tucson last summer or fall and lost little time in getting started in the practice of internal medicine. Interestingly — to me at least — she took over my old office, abandoned when I took on an associate. Liz was attracted here chiefly because her parents are getting a little old and a little arthritic and a little tired of more vigorous climes.

Liz received her B.S. in P.E. at Wisconsin in 1931; M.S. in anatomy in 1938, and her M.D. in 1943, all at Madison. She did physical therapy at the Children's hospital from 1931 — 1934 and was head fellow at Chadbourne hall and an assistant in P. E. while in medical school to "earn my bread and butter."

She had one year of internship at Philadelphia General and a year of medical residency at General also, before returning to be assistant professor in physical medicine and associate professor of physical medicine about 1944-45. She states that these years were her contribution to the war effort. She then had a year of medical residency at Wisconsin in 1946 and was assigned to Jim Musser's psychosomatic service in 1947. From 1948 through 1959 she practiced medicine with the Billings clinic in Billings, Montana. She speaks about her cabin in the mountains, fishing, hiking, her two horses, skiing, etc.

In 1959 Liz had what she calls her sabbatical year. She spent from February until June in Phoenix attending the American Institute for Foreign Trade, took Spanish, South American area studies, international law; swam, ate Mexican food and lay in the sun. She spent the rest of that year island hopping in the Caribbean with her mother and father, and this included a nostalgic return to Puerto Rico where she had lived six years as a child.

Liz then became director of the health service at Smith college where she spent the years from

1960 to 1968. She especially enjoyed those free summers allowing her concerts, summer theater, the Expo at Montreal, Cape Cod trips, etc.

And now Tucson.

(Doctor Pyre, our Southwestern correspondent, would welcome alumni news at his office, Suite #107, 601 N. Wilmot Rd., Tucson, Ariz. 85711.)

Views from the southeast

By HERBERT C. LEE, M.D., '35
SOUTHEASTERN CORRESPONDENT

RICHMOND — Again mid-summer comes to Southeast, and, as usual, I have practically no alumni news to offer. Our so-called "loyal alumni" just won't write to tell me what they are doing.

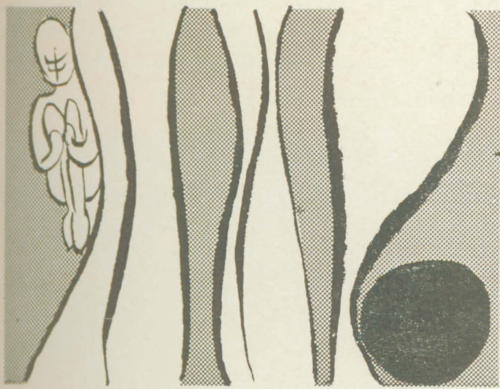
Hence, this becomes much more of a personal column than it should be, and not enough of a report on what our graduates are doing. I have toyed with the idea of writing to each of them personally, but I am not convinced that this would be the answer. Either the alumni are too busy, or too bashful; yet if they read the QUARTERLY I'm sure that they enjoy reading about their classmates as much as their classmates like to read about them.

Our new directory is a "doozy". It is the best I have ever seen, and every one to whom I have talked feels the same way. We are all mighty proud of it. From this directory I could easily ascertain that there are 298 graduates living in this part of the country. There are 61 in Florida, 52 in Maryland, 49 in Virginia, 29 in North Carolina, 22 in the District of Columbia, 19 in Georgia, 17 in Kentucky, 13 in Tennessee, 12 in South Carolina, 10 in West Vir-



ginia, nine in Alabama, and five in Mississippi. This is a sizeable group from which there should be an adequate source of information.

I have had our graduates visit recently. Fred Hegge, '68, is interning with us here at the Medical College of Virginia. From all reports he has done an excellent job, and I am sorry that he is returning to the Midwest rather than stay here with us. He is going to Minnesota in internal medicine. Because of my prolonged illness, I have not had the opportunity to look him up sooner. We also have two Marquette graduates interning here this



year, and the reports on them also have been outstanding. When I was hospitalized in Milwaukee, Dr. Pischota had told me about one of the Marquette boys and what an outstanding student he was. We are glad that he has been here.

It is hard to realize that there is to be a new medical school campus in Madison, yet when one realizes how far the school has advanced in the present constricted location, we can see that it must expand elsewhere to survive.

The Medical College of Virginia is now joined with the Richmond Professional Institute as the Health Sciences Division of the newly formed Virginia Commonwealth University. This is the largest university in the state, and its future is unlimited in size, expansion, number of students, and professional capabilities. We are in the process therefore, of building many new buildings, buying up more and more property, and, like U.W., we have growing pains. I guess all schools are alike.

In view of all the recent publicity about students in Madison, it is reassuring to know that no medical students were involved. I am glad to report that

our medical and dental students here in Richmond have decided that the long hair, beards, moustaches, etc. are unprofessional and they have been abolished. Our students, consequently, look like gentlemen and professional men. It is refreshing to see them, particularly with patients.

Medical education is never stagnant, fortunately. If any of you remember the talk I gave on Alumni Day in 1960, the 25th reunion of the class of 1935, you will note how many of the problems I have discussed have come true. There is still the constant turmoil between clinicians, researchers, teachers, and administrators. Each of the four groups rises and falls like the ideas.

Dumphy last year wrote an excellent short treatise on this subject in the *American Journal of Surgery*. He says that in medical education, "There are four real trouble spots: first, the preclinical scientist is being taken away from the students; second, the strict full-time system is taking the clinical faculty away from the patient; third, the pressures of administrations are taking the heads of departments away from the students, patients, and laboratories; finally, jet travel is taking everyone away from everyone else."

I don't know what the last part has to do with medical education, but the first points are obvious. We seem to be no closer to a solution of all the problems of medical education than we were in 1960. There has been much improvement, yet so much failure. We must all strive to keep the student in constant touch with the clinician. No one will appreciate this more, or gain more from it, than the student. To me, at least, they have always been the most grateful. As long as the politicians control the purse-strings, the harder it is going to be to keep away from the absolute full-time control and the inevitable elimination of the clinician with his years of experience. I trust that all of us will do our utmost to see that this unhappy situation never advances any further.

So much for my lecture for today. Peace!

(Contact Dr. Lee at Box #876, Medical College of Virginia Station, Richmond 23219.)

FROM THE MAILBOX

To The Editor:

My son, Dr. Arthur Lee Hughes, gave my address when he left Wisconsin as he was entering the service. I, therefore, received his copy of the QUARTERLY, which I have forwarded to him in Massachusetts. I took the liberty of thumbing through the magazine and I am so glad I did, else I would have missed the poignant article by Dr. Mischa J. Lustok. I heartily concur with everything he said and I want him to know it. Your journal probably reaches only the select few, but wouldn't it be great if this article could appear in all magazines so it could reach those who need it most.

If possible I would like to have a copy of this QUARTERLY, Volume Nine, Number 2 — Spring 1969. The article entitled "A Way to Protest" is under the section of columns and editorials.

Thank you very much.

Sincerely,
Mrs. Jean Hughes
421 Montgomery Street
Laurel, Maryland

To The Editor:

As always, I read your QUARTERLY (Spring, 1969) with interest, and I am grateful when I find items which arouse old and pleasant memories. You are doing a wonderful job in giving very busy and widely dispersed men a chance to recall their former lives.

Your editorial on "A Way To Protest" is a gem, and I am happy to applaud your quiet eloquence about the hardships of "the good old days." You say it well: We have very little to feel guilty about, and we should "stand proud" because a very great deal has been accomplished. In fact, you know well that many of us, including myself, covered many generations culturally from where we started, and helped to make the world a better place to live. Of course, many immense, complex and unpredictable problems confront us, but they are apparently capable of solution if we want to look hard enough. True, our current value systems placing top priority upon wealth, "success" and competition may need some alteration, but they contain enough virtues to continue our slow trek over the millennia to improve the quality of living and make the world more liveable for more people.

Your writer on Page 21 re: CLASS OF 1933, might have included the names of Horace Getz and myself. Horace was a successful lab investigator in tuberculosis at the Phipps Clinic in Philadelphia for some years. I have lost track of him in recent years.

I am very sorry that I cannot attend the Alumni Day meeting on May 23, because I admire Stuart Cullen as a splendid human being. However, I must attend meetings here in Pittsburgh, including a dinner signaling my retirement for age from administrative jobs as chairman of the Department of Psychiatry and director of the Western Psychiatric Institute and Clinic on July 31, 1969. I can continue as a professor, but am requesting a leave-of-absence for a year, which Ruth and I will spend in Tucson, Arizona, instead of taking the traditional trip-around-the-world.

I hope that all is well with you and yours. I have not seen Joe Shaiken in recent years, but will try to look him up. I do see John Romano from time to time, and enjoy his company.

Cordially,
Henry W. Brosin, M.D. '33
Director, Psychiatry Department
University of Pittsburgh School
of Medicine
Pittsburgh, Pennsylvania

Dear Mr. Hawley:

Congratulations to the Wisconsin Medical Alumni Association on the commissioning of Mr. Bohrod to do the still life of the University of Wisconsin Medical Center. It is superbly done, as is true of all of Mr. Bohrod's works, and the color reproduction is most excellent.

As you know, I'm sure, we have eight of Mr. Bohrod's originals, each in a medical theme, and they delight visitors here and at Prairie du Chien during the summer season. We will appropriately frame the reproduction for display here, and will continue to publicize its availability through your offices.

Sincerely yours,
C. H. Crownhart, Secretary,
Charitable Educational and
Scientific Foundation of the
State Medical Society of
Wisconsin
Madison, Wisconsin