Digest of the Philadelphia College of Osteopathic Medicine (Winter 1986)

Philadelphia College of Osteopathic Medicine

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Our tribute
to David Heilig

this Founder’s Day

is one O.J. Snyder

would value

and approve

Knowing that

the greatness

of osteopathic medicine

in the past

and our place

in the future

depend upon physicians

and teachers

like Dave Heilig,

we celebrate the clarity

of his professional vision

and the unfailing warmth

of his educator’s style.

We’ll always need more of both.

J. Peter Tilley, President
The Digest of Philadelphia College of Osteopathic Medicine

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Osteopathic physician, teacher, thought-provoker

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In Memoriam

Coming Events
“Go out and come back in again.”
“Huh?”
“Just go out the door, close it, turn around, and come back in again.”

The first year medical student has just fumbled his answer to several questions put to him in the office of his examiner, David Heilig, DO, and professor of Osteopathic Principles and Practice at PCOM. Heilig is permitting the student to cancel out a poor beginning, and encouraging him to reorganize for a fresh start. When the future DO realizes his professor isn’t joking, he does what he is asked. Now facing Heilig a second time, and with his nerves and thoughts under better control, he provides the answers that Heilig seeks.

Dealing gently with a diffident student comes naturally to Heilig. His teaching style is to lead by question and example—never to apply counter-productive pressure. Never to embarrass. His touch with both students and patients is unfailingly gentle. And effective.

Preferring to watch his students demonstrate their knowledge instead of talk about it, Heilig insists they show him what they know. He wants to see by the way they approach and handle a patient that they have linked all they have been taught into a comprehensive understanding. And when they have shared in some of the insights he has gained in his long clinical experience, he delights in the pleasure of watching learning take place—of seeing in the eyes and face of a student the transient, fleeting light that so often signals new understanding.

One of three words used most often when people talk about Heilig is “gentle.” The other two are “knowledgeable,” and “caring.” He is an expert osteopathic physician and cares deeply about his students, his patients, and about the osteopathic profession. Heilig brings to all his conviction that in the practice of medicine, manipulation is fundamental.

“Many of our physicians,” he says, “think of manipulation as an adjunct, like ultrasound, or aspirin. Or something in addition to treatment. I think of medication for a symptom as the adjunct. What is most important is to maintain the soundness of the body—its structural integrity, its good circulation. That’s basic. It’s thrilling to find more students coming to us with a better concept of what the profession means. And with a better appreciation of the philosophy that the body contains the substances it needs to heal itself—that manipulation can help the body fight infection and recover from the wounds of trauma and necessary surgery.”

Heilig derives his convictions about the efficacy of osteopathic care from his 40 years of practice and his observation of people who have benefited from it.

“Everything I have seen clinically,” he says, “has convinced me of the validity of the osteopathic approach. My personal
Stace Horine, on third-year rotation, observes over-the-shoulder as Heilig updates a patient's history.

Where is the nasium? During mid-term finals, first-year student Jamie Budilov responds to Heilig's questions about facial landmarks.
Positioning a patient for thoracic mobilization. Gently, ever gently.
At home in Drexel Hill with Margot, his wife for 44 years.

Music is vital. Heilig plays guitar, cello, bass. Other interests range from bird watching to microcomputers.

experience has taught me that maintaining normal circulation and blood supply tends to prevent complications. I began to observe this back in the days before antibiotics were widely used. I was making house calls and treating kids with all sorts of infections. The kids responded dramatically to manipulative techniques such as mandibular drainage and lymphatic pump. I often saw evidence of change in their acute state, or the breaking of their fevers. Those children did not develop the complications that used to come with acute infections. My practice was a family practice, and I could often observe two or three generations of the same family. Over the years I began to find that a particular treatment would, for example, affect a patient's blood pressure and the amount of medication he needed for certain other degenerative diseases. Often he could be weaned away from some of the unnecessary drugs he was loaded up with. Soon I realized that the osteopathic approach, because it has so much input into the nerve and blood supply of the various parts of the body, can help all manner of disease. Of course, people in middle age often come to the physician with conditions that are not reversible. And sometimes manipulation has a palliative effect. But the true significance is its ability to prevent the pathology—the causative factors in degenerative diseases.

Heilig has been honored as physician and teacher. In addition to the O.J. Snyder Memorial Medal of January 25, 1986, he has received several of the most prestigious awards the profession can confer— including the Christian K. and Mary F. Lindback Award for Distinguished Teaching, in 1977, and the AT. Still Medallion of Honor from the American Academy of Osteopathy, in 1978. In 1984, Heilig was a Northrup Memorial Lecturer. He is both a fellow and a past president of the American Academy of Osteopathy, and a member of The Advisory Board for Osteopathic Specialists of the AOA. He serves as a consultant to the National Board of Osteopathic Examiners, and has just completed a term as chairman of the Board of Fellowship of the American Academy of Osteopathy.

In 1985 Heilig was given the George W. Northrup award in recognition of exceptional service to the osteopathic student and profession.

Heilig first joined the teaching staff of OMCP in 1944, as an assistant in anatomy. He became a clinical assistant in osteopathic principles and practice in 1946, and instructor in 1950, when he was named assistant professor and acting chairman of the OPP department.

In 1952 he was made chairman, a post in which he served for three years. Finding that administrative duties took too much time from his greater interest of treating and teaching, he chose to resume full-time practice in 1955. He continued to teach part-time until 1975, when he became a full-time professor. Heilig was named vice-chairman of the OPP department in 1981. He is also chairman of the Committee on Implementation of the Osteopathic Philosophy, and a member of the PCOM Admissions Committee.

Heilig's diffident student has been chastened only slightly, and is now considerably wiser. He also has a better chance of reaching his goal of becoming a DO—and joining thousands of others who have been privileged to share in the knowledge and insights of one of the profession's most respected practitioners and teachers.
Spunk smooths tough path

By Jane Harriman

Someday in the not-too-distant future, Violet Alfreda Walker Henighan will take her daughters and check into the Homestead, the very luxurious resort in Hot Springs, Va., where she used to work as a "butter girl."

A "butter girl," she explains, is the rarely tipped servant whose job is to keep butter, rolls and salad dressing flowing in the hotel dining room. The job was rough on the feet, and the fancy, low-cut uniform was uncomfortable, but Henighan, 38, is not bitter about it. Neither is she bitter about working as a laundress, cleaning woman, or any of the multitude of boring and physically draining jobs she's held.

In fact, she's grateful because they were all part of her dream of becoming a physician.

This month, Henighan, now a third-year student at the Philadelphia College of Osteopathic Medicine, has been doing her surgical rotation, observing and assisting in the operating room at Riverside Hospital, Wilmington.

What makes her story remarkable is that she fell in love and married right out of high school in a small town in Virginia. She had two daughters, was divorced, and then, having to support her children single-handedly, went to work as a clerk for the U.S. Postal Service in Baltimore.

"I'd always wanted to be a doctor," she says. As a child she'd known and loved the kindly black family doctor who made house calls, and had delivered her and three of her brothers and sisters at home. One day in July 1979, she says, "I decided, I'm going to try for it."

She quit her job, put the house she'd owned for two years on the market, sold most of her furniture to pay bills, loaded what possessions were left into her father's pickup truck and headed home to Lawrenceville, Va.

Her daughters, Millicent, then 15, and Maureen, then 13, looked up at her, she recalls, and asked, "Is our lifestyle going to change?"

"I said, 'You bet your bippy it's going to change,'"

Today, Millicent is an architectural student at Hampton (Va.) University, and Maureen, who entered college at 16, is a senior dance major at Goucher College in Baltimore.

"They are beautiful girls," Henighan says. "Not picky, and we all have worked three or four jobs at once" to pay for schooling.

Before she could think seriously about medical school, Henighan had the small matter of college before her.

She got a scholarship to St. Paul's College, an Episcopalian college in Lawrenceville, but still had to hold as many jobs as she could to support her daughters and herself. She enrolled in January 1980. By spring of 1983, she had finished four years of course work to get a bachelor's degree, summa cum laude, first in her class, in biology and chemistry.

The college had advised her she was too old to get into medical school, but she said she was determined. "I said, 'I'm going to try until I'm 40.' Then I said, 'No, I'm going to try until I get in.'"

She had lined up a fellowship in public health at an Ohio University, but then she got an acceptance letter from her first choice medical school, Philadelphia College of Osteopathic Medicine.

Of medical school she says, "I've never enjoyed anything so much."

Some fellow students tend to "bitch and moan," and Henighan has had to study until she fell asleep on the floor, only to wake up and study more. She has subsisted for days on a diet of coffee and cola, but, she says, "My attitude is, 'What can I get out of these weeks?'"

"I'm not going to let disliking something stand in the way of my goal of being an osteopathic physician. I don't look at obstacles, I look at opportunities."

At college, "Everything you learn is fascinating," Henighan says, so fascinating that she sometimes finds her mouth dropping open in amazement during lectures.

When she's encountered racism or sexism over the years, she's managed to get past it with that same pragmatism: "Racism IS. Sexism IS. You don't dwell on an 'IS.' You have your mind on your goal,
which is to become proficient in your profession, and you can’t let negatives come in your way.”

When it comes to finances, which could be a real worry for her these days, her attitude again helps. She tried having an outside job her first year in medical school, and found it too much. “I got my first ‘C,’” she recalls. So, she’s had to rely on loans to pay her tuition and living expenses.

Instead of worrying that she only has $10 in the bank, she makes herself envision her account just waiting to be replenished.

She expects to owe between $80,000 and $90,000 when she’s finished her internship and residency, but she will pay it back over the next few years. Her only regret is that, with such a sizable debt to be paid, she will not be able to spend as much time as she’d hoped caring for the poor and the elderly.

She will probably specialize in internal medicine, and would dearly like to intern at Riverside, where she spent an earlier rotation with Dr. Paul Imber in “ear-nose-and-throat” medicine.

“I’ve fallen in love with Riverside and with Wilmington,” she says. “In a small hospital, you get to interact with doctors. The nursing staff is delightful, they really show you the ropes. You get to do a lot of patient care. The patients are people, not ‘the gall bladder in room 414B, but ‘Mr. Jones.’”

The busy life of a medical student means she has no time to date, which she misses, but once she’s through school, she plans to have men in her life once more.

“The most frequent thing I do [for recreation] is read for pleasure. I grew up reading. Some of my worst spankings I got for not doing my work, and getting found away in some corner reading.

But then, a love for books and learning runs in the Walker family. When Henighan was growing up, magazines and books were always in her home, despite the family’s limited means. When her father was in his early 70s he went back to school to get a GED diploma. Her mother went to a community college when she was in her 50s and earned an associate degree in psychology. Henighan’s three sisters and two brothers have all worked their way through school to get bachelor’s or master’s degrees.

The Walker family’s idea of fun is to get together and play Scrabble: “No home in our family is without Scrabble,” she says.

In reflecting on her life, and the distance she’s come, she says, “I think I’ve been blessed. It didn’t have to happen. Here I am, not working, with two daughters in college. . . . I try to give back some of my blessings.”

During the long years as a postal clerk in Baltimore, Henighan says, there were dark days. “But now, I’m genuinely a happy person, secure in my blessings.

“I’ve named my blessing and now I’m claiming it,” that’s what one of my daughters says.”

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Hand and microsurgery, a sub-specialty of orthopedics, is the latest addition to OMCP's burgeoning catalogue of special capabilities.

Supplying the skills that have helped make the growth possible is Elliot Ames, DO, clinical assistant professor of orthopedic surgery specializing in hand and microsurgery. Ames came to OMCP last September to end an 18-month search by the orthopedic department for a DO with training appropriate to a growing need.

Ames is a 1974 graduate of the College of Osteopathic Medicine and Surgery, University of Osteopathic Medicine and Health Sciences, Des Moines, Iowa. He interned and served a 4-year residency in orthopedic surgery at Kennedy Memorial Hospitals, University Medical Center, Cherry Hill Division, Cherry Hill, NJ.

His training included an advanced year of study as a Christine Kleinert Fellow in hand surgery at the University of Louisville School of Medicine. Previously he served a year-long fellowship in hand surgery at Wayne State University School of Medicine, in Detroit.

Ames is one of relatively few university fellowship-trained hand surgeons practicing in the Philadelphia area. His goal is to establish a high quality, sophisticated practice of hand surgery and microsurgery. And as a DO, he prefers to do it within the osteopathic community.

From 10 to 15% of the cases handled by OMCP involve the hand or other extremity. Without a specialist to provide that care, hand surgery formerly had to be referred to other hospitals in the Philadelphia area. Ames' appointment has enabled those cases to remain in-house.
Ben Rubin and the Victory Over Smallpox

Benjamin A. Rubin, Ph.D., professor of microbiology and public health, has worked in radiology, immunology, chemistry, endocrinology, genetic pathology, virology—and is author or co-author of more than 150 publications. Ask him what he does, and he will tell you that he is an immunologist. Probe further and you will learn that he made an historic contribution to the World Health Organization's successful campaign to rid the world of smallpox.

The most recent recognition for that work came to Dr. Rubin last September, when he was named by the New York Patent, Trademark and Copyright Law Association to receive its Inventor-of-the-Year Award. In 1981 he had been given the John Scott Award, for the same invention, by The Philadelphia Board of City Trusts. Both awards honored Rubin for having made a major contribution to the public health and welfare.

Anyone seeing Rubin's invention, and ignorant of its significance, would wonder what all the fuss was about. A simple two-inch needle tipped at one end with two sharp tines. Later to be described technically as a bifurcated vaccine needle, it became the instrument that made possible the defeat of a disease that had scourged mankind for most of recorded history. Costing a fraction of a cent to make, technically foolproof and reusable, it was an innovation at the right place, at the right time, for the right price.

According to Rubin, inventing the needle was almost an afterthought, secondary to a more urgent need to develop a better smallpox vaccine for use in the World Health Organization's 1967 plan to eliminate smallpox from the world. The campaign required that 1,780,000,000 vaccinations be given to as many persons in 30 countries during the succeeding ten years. But several obstacles stood in the way. One was the lack of an economical and efficient method of vaccination. Another was the inadequate supply of an appropriate vaccine. The traditional liquid vaccine was unreliable, unstable, and had a short shelf life. A longer lasting freeze dried vaccine had been developed by the Lister Institute in London, in 1939. But huge quantities of a more easily produced version of it were needed for the start of the smallpox eradication effort. Wyeth Laboratories, in Radnor, Pa., was working on it. Rubin was manager of biological development there, spearheading the development of a new process that would produce the

At the same time Rubin was developing the bifurcated needle, Wyeth was perfecting methods of dispensing and storing freeze-dried vaccine. He first experimented with one-pronged needle. Then it occurred to him to use a two-pronged needle that would retain...
quantities needed. He was testing new
administration techniques with various tex-
tures. It occurred to him that a
piece of wire might be particularly
appropriate for the capillary activity of a loop, and it might also be used at
the same time for scarification. He first tried
grinding down the loop end of a sewing
needle. This led to a system in which a piece of
wire was cut to the right length, then stamped
to give the fork the shape and dimensions that
Benjamin A. Rubin,
Ph.D: immunologist,
professor of microbi-
ology and public
health at OMCP,
inventor of the bifur-
cated vaccine needle.
The bifurcated smallpox vaccine needle. Providing for scarification, precise dosage, portability, each cost the WHO $0.006 and was reusable.

Shirt-pocket weapons in the war on smallpox: a supply of Rubin’s needles and a few ampules of lyophilized vaccine.
would hold exactly one mg. of water by capillary. It was later found to hold more vaccine than water because of its greater viscosity.

The history of invention records many occasions when a happy accident contributed to a successful result. And Rubin's confidence in his device soared as the result of such an accident at Wyeth.

It happened during the routine vaccination of staff members who were working with the new vaccine. The latest version of Rubin's needle was being used to administer it. A doctor who had just used one of the needles to vaccinate a lab worker tossed it into a wastebasket. At that moment a nurse reached into the same basket to retrieve a note she had discarded. The falling needle brushed against her wrist and she was vaccinated. When Rubin noted the event, a second vaccination by so fleeting a contact from a needle that had been used, and which retained only a fraction of the vaccine it first carried, he knew his device was foolproof.

The jet injector had been the first choice of the W.H.O. vaccination program, but at $1000 a copy it was too expensive. It weighed 12 pounds, broke down often, and required an inventory of spare parts. It also tended to frighten many of the primitive peoples on which it had been used, making others reluctant to cooperate.

Clearly, a cheaper, more portable and less complex device was needed if the project were to succeed—one that was portable and cheap, would never break down, and was capable of being operated by anyone who had only the briefest training in its use.

Rubin's needle, when he offered it to the W.H.O. in 1967, proved to be the perfect device. Costing only 6/10 of a cent, it was certainly cheap. And portable. Now, a vaccinator could take a day's supply of several hundred needles into the field with him while the previous day's supply was being sterilized. With a pocketful of the improved, freeze-dried vaccine, which had a shelf life of a year and remained stable at temperatures ranging up to 115 F, he was self-contained and could travel any distance for any length of time.

But the most immediate effect on the smallpox eradication project was to expand the available supply of vaccine. Because the needle picked up only 0.002 milliliters of fluid, an ampule of vaccine that could previously serve to vaccinate only 25 persons could now accommodate 120. The world supply of vaccine had been quadrupled.

At first thought to be usable for 20 vaccinations, one needle was used 172 times in a special test in Alexandria, Egypt. Within 12 months of being introduced, sixty million needles had been distributed. Twelve years later, on May 8, 1980, the World Health Assembly unanimously passed a resolution declaring that the world and its people had won freedom from smallpox. It recommended that smallpox vaccination be stopped in every country, except for investigators at special risk, and that no country should require vaccination certificates from international travelers.

Rubin retired from Wyeth and joined the faculty of PCOM in 1984, as professor of microbiology and public health.

Rubin's teaching and lectures are designed to help today's medical student prepare to function within radically changing national attitudes toward health care and its practitioners. His goal is to provoke thoughtful attention to the effects on medical practice of national health plans, and to the need to structure medical education in a way that will minimize the possibility of malpractice, with its disruptive influence on the health care system. Rubin also brings to students his special expertise in devising public health measures that can speed the work of eliminating contagious diseases.

The immunologist is a consultant to the Congressional Oversight Committee for Health and Human Services, which is now developing a program to improve vaccines used against pediatric diseases. It has made the eradication of measles, the number one killer of children in third world countries, its first priority. The Committee's immediate concern is to develop a measles vaccine that will have the same reliability, portability and stability of modern smallpox vaccine. With that accomplished, the Committee will seek to similarly improve the MMR and DPT multivalent vaccines now used against the most prevalent childhood diseases.

When a new measles vaccine is created, a cheap, disposable injection device will be needed for a worldwide measles eradication program. Dr. Ben Rubin, inventor of the tool that helped make the elimination of smallpox possible, is already at work on an injector that could make measles, like smallpox, a medical case history.
Three substantial gifts have been received by PCOM in recent weeks as the efforts of the college's development office begin to bear fruit. They include two one-time gifts and an annual grant, according to Mark C. Ebersole, PhD, vice president for resource development.

The Benjamin and Mary Siddons Measey Foundation has added PCOM to its group of institutions which benefit from its medical student scholarship program. An initial grant of $10,000 for the 1986-87 academic year, and further anticipated annual grants of unspecified amounts, make this commitment especially gratifying, Ebersole said. The Measey Foundation, located in Media, Pa., was established by attorney William Maul Measey to honor his parents. It supports medical education in the Philadelphia area.

A gift of Philadelphia Electric common stock, valued at approximately $12,000 has been given to PCOM by alumna Frieda Oshever Vickers, DO, '39, and her husband James G. Vickers.

"Such unrestricted gifts can be mutually beneficial," Ebersole said. "While they provide direct support to PCOM, they also allow donors to channel disposable assets to a personally cherished institution and to receive favorable tax considerations."

A $10,000 gift to PCOM has been received to establish a lead trust to honor George H. Guest, DO, chairman of the department of psychiatry. An anonymous donor has suggested that persons wishing to add to the trust contact Dr. Ebersole and make their contributions accordingly. The trust will help fund scholarship grants through endowment.

A $1,000 gift has been received to establish the Dean Arthur M. and Belle B. Flack Memorial Award. Proceeds from the trust will be awarded to a member of the graduating class selected as most proficient in the practice of internal medicine.

Ted Eisenberg, DO, Philadelphia—participated in the Second Annual Jefferson Hand Rehabilitation Meeting in November, presenting the management of extensive tendon and nerve injury of the wrist. He also lectured at the 58th Annual Clinical Assembly of Osteopathic Specialists in San Diego on tissue expansion for breast reconstruction. He was elected secretary-treasurer of the Plastic & Reconstructive Surgeons Section of the American College of Osteopathic Surgeons.

R. Michael Gallagher, DO, Moorestown, N.J.—lectured recently on pediatric headaches at a symposium sponsored by the National Migraine Foundation and Holy Cross Hospitals in Silver Spring, Md., and at a symposium in Greenwich, Ct., sponsored by the National Migraine Foundation and Greenwich Hospital.

Cecil Harris, DO, Philadelphia—clinical professor and chairman emeritus of the department of neuropsychiatry, was awarded the distinguished service award at the Osteopathic Organization for Neurology and Psychiatry annual conference.

Albert M. Honig, DO, Doylestown, Pa.—presented a paper at the World Psychiatric Association Regional Symposium in Athens, entitled, "Auditory Hallucinations in Affective Dis-
orders.” Another entitled, “Rehabilitation Efforts in China,” was given to a joint session of the American Osteopathic College of Rehabilitation Medicine, the American College of Neuropsychiatrists and the American Osteopathic College of Preventive Medicine, November 10 in Atlanta.

Sherman N. Leis, DO, Bala Cynwyd, Pa.—spoke at the National Convention for Osteopathic Surgeons meeting during the Clinical Assembly of Osteopathic Specialists on “One Stage Operation for Penis Reconstruction.”

Arthur C. Schenck, DO, Erie, Pa.—recently was elected secretary of the Pennsylvania chapter of the American College of Utilization Review Physicians at its annual seminar in Hershey. He is clinical assistant professor of general practice, and at Millcreek Community Hospital in Erie, maintains sub-specialties in cardiology, cardiovascular disease and minor plastic surgery.

Arthur J. Sesso, DO, Philadelphia—has been chosen to receive one of seven Achievement Awards sponsored by Merck, Sharp & Dohme, presented at the San Diego meeting of the Clinical Assembly of Osteopathic Specialists in October.

Robert Sherman DO, Allentown, Pa.—recently was elected to the American College of Osteopathic Surgeons’ board of governors. A specialist in clinical and surgical urology, he is Allentown Osteopathic Medical Center’s medical staff chairman; at PCOM, he is an assistant clinical professor of urology.

John Simelaro, DO, Philadelphia—spoke in October to an American Lung Association lecture series in York, Pa., on “Pulmonary Function Testing.” He is chairman of the pulmonary medicine division, department of internal medicine.

Stephen D. Smith, DMD, Philadelphia—will sponsor the 1986 Hawaii International Symposium on Craniofacial Pain, TMJ Disorders and Rehabilitative Dentistry, in conjunction with PCOM, at the Hyatt Regency Hotel, Maui, with 24 hours CME credit, March 23-28.


WITH A FLOURISH AND A SNIP, Vice Chairman of the Board Glenn J. Hoffman formally opened the newly refurbished 3-West Medical floor of OMCP in a ceremony December 1. The occasion also celebrated the creation of the Medical/Surgical Intensive Care Unit in the space formerly occupied by the old CCU and Shock & Trauma Unit. Lending a hand from left are Professional Staff Director Daniel L. Wisely, DO, President J. Peter Tilley, DO, and Associate Hospital Administrator Joseph Flamini.

Now you can see Osteopathic’s new spirit on billboards featuring “Medical Excellence With the Personal Touch.”
Something of Honor

By George E. Hatzfeld

"I truly feel that it is a privilege and not a right to become an osteopathic physician, and I feel we should all return something of honor to the profession, rather than be parasitic."

Raymond J. Saloom, DO, 1930-1985

With these words in 1971, Raymond J. Saloom, DO, issued his own prescription for professional life, at a time when sticking up for osteopathy and the general practitioner had slipped from fashion.

His untimely death November 19 in a car accident left friends, patients, professional and political associates, and his community, numb with shock. He was 55.

As one of the leading osteopathic family practitioners in Pennsylvania, he had exercised his "privilege" repeatedly and well. His roots in medicine and in professional integrity ran deep. Quietly, patiently, Ray Saloom had helped change public perceptions, political persuasions and professional attitudes. He would be missed in many circles.

When he received his degree at PCOM in 1960, Ray Saloom left the theory of medicine and headed west to a small community and its hospital, Bashline Osteopathic Memorial, 40 miles north of Pittsburgh, and the town of Grove City, population 8,312. There he completed his internship in general practice, with an emphasis on obstetrics.

"From the beginning, he was delivering, forceps and everything," one friend recalls. "If you wanted lots of supervision you could go somewhere else. If you wanted experience, you chose Grove City." Ray Saloom chose Grove City because he liked the area, and he and his wife Mary settled down in nearby Harrisville, where a gas station, a grocery store and the village's 944 citizens all bade the doctor and his family welcome. There the couple reared five children, all boys.

But neither Harrisville nor Grove City's United Community Hospital, successor to Bashline Osteopathic Memorial, could contain Ray Saloom.
The hospital named him chief of staff and later, acting chief of obstetrics. He was named to the hospital board in 1979, and a year ago appointed to its corporate reorganization subcommittee.

From this base of operations, Dr. Saloom mounted professional and political campaigns, carried on an impressive practice in family medicine, used his analytical insights to aid a wide assortment of medical organizations, and became an important advisor to government agencies and to the "Blues" of western Pennsylvania.

A fellow practitioner, remembering how the Butler County physician became involved in government disability cases, tells the story of Ray Saloom and the bureaucrats. "Ray never forgot anything," he said, "and his expertise came from his ability to use common sense. He could strip a problem down to its basic parts while everybody else was busy reading encyclopedias or forming committees."

The doctor went on to describe an early interview between Dr. Saloom and a group of government officials in Washington. They were looking for a physician who could decide the merits of foreign and domestic disability cases. Charts from a dozen cases were presented to Dr. Saloom. "Give me an hour," he told the officials. "I'll be able to give you the disposition on these."

The government interviewers were incredulous. "Those cases would take us weeks," they said. "You can't do it."

An hour later, a triumphant Ray Saloom handed over the documents with his rationale for each one. Every case was accepted as he presented it. And for many years to come government disability cases were submitted routinely to Dr. Saloom for review and disposition as a medical officer with the Civil Service Commission, and he was proud of his record of fairness and consistency.

Professional peers regarded Ray Saloom as a great analytical resource on the fiscal aspects of medical associations. He began his long list of organizational treasurer's positions as treasurer of the Philadelphia chapter of Phi Sigma Gamma osteopathic fraternity in 1960. As his fame and reputation grew, he was asked to help associations and societies across the state and throughout the profession gain monetary stability. At the time of his death, 10 national and state medical groups had named him to key financial positions, and non-medical institutions sought his advice as well.

He had been named "General Practitioner of 1977" by the American College of General Practitioners of Osteopathic Medicine and Surgery, and they repeated the honor in 1984. Also in 1977, he won the Frederick Solomon DO Award of Merit from the Pennsylvania Osteopathic General Practitioners Society. He served as president of the ACGPOMS after his election in 1982.

The Pennsylvania Osteopathic Medical Association knew Ray Saloom as president, secretary-treasurer and as chairman of its bureau of organizational affairs, its committee on government rules and regulations, and its committee on finance. He also sat on the legislative and executive committees.

In 1980 he received the organization's Distinguished Service Award, after serving as chairman of POMAs District Nine the previous four terms.

Prior to 1973, Ray Saloom spoke frequently about the profession monitoring its own activities, especially with the advent of Medicare and Medicaid. When the Government established PSRO to review Medicare and Medicaid utilization, the country doctor from Western Pennsylvania climbed into the thick of it.

He completed two terms as a member of the National Advisory Council of Professional Standard Review Organizations, chaired the Midwestern Pennsylvania PSRO, sat on the board of the American Association of Professional Standards and Review Organizations, and was a national lecturer on PSRO activities.

Increasing regulation of medical practitioners and health care institutions at both federal and state levels, as well as the threat of national healthcare legislation made Ray Saloom decide to run for Congress in 1978. He lost the election, but gained his opponent for a friend. By raising the new Congressman's consciousness on the issues, Dr. Saloom helped defeat the pending legislation, and in the end, converted his Democratic rival to run later as a Republican. Politics makes strange bedfellows, Ray Saloom had to agree.

Around the dining room table, waiting for his funeral services to begin, friends from POMA, the hospital, political constituencies, PCOM Alumni Association, of which Ray Saloom had recently taken yet another job as board member, and his community, spoke with admiration and awe.

A hospital board member offered: "He was the most important man in the county. They loved him. He had offices here, in a very small town, but he had one of the largest practices in the state. And he still made house calls."

A medical association official said: "His power was in the friendship of giving, not in taking. People owed him, but they didn't owe him grudgingly. A very powerful guy, behind the scenes, who gave, rather than took."

Listening to them, it becomes obvious that Ray Saloom's enormous influence had come through the systems he chose to become part of, and thus to change. Osteopathic organizations at the national and state level would survive and flourish, because of his fiscal insights and organization. The early monstrosity of professional review by government agencies was tamed, perhaps, by his willingness to become part of the process.

Ray Saloom's radical idea was to work for change and growth within the system, but to keep his osteopathic heritage. In practicing that principle, he spoke for the mavericks in medicine, cloaked in the traditional garb of an association officer or a Blue Cross steering committee member, winning through reason and diplomacy what none of them might gain in a lifetime of harangue: respect.
1935
William H. Lodge, Hershey, Pa.—recently completed 50 years of medical practice, all on East Chocolate Avenue. With more than 1,500 deliveries without a maternal fatality, he is one of Harrisburg Osteopathic Hospital's original staff members.

1950
William A. Somerville, West Milford, N.J.—honored November 15 for his “major contributions to the area”, including special police work for 30 years, civic and medical organizations, among which are the West Milford Well Baby Clinic, which he founded and maintains.

1952
Paul W. Herr, Quarryville, Pa.—PCOM preceptor for 15 years and general practitioner for 30, he leaves his practice to become assistant professor of general practice in osteopathic medicine at West Virginia School of Osteopathic Medicine at Lewisburg. A veteran of 2,000 deliveries and years as a deputy coroner for Lancaster County, his work in poverty medicine led to membership on the county housing and redevelopment authorities.

1954
Richard M. Bachrach, New York, N.Y.—presented a paper entitled, “PSOAS Relationship to Dance Injuries,” to the American Osteopathic Academy of Sports Medicine November 10 at the AOA convention in Atlanta. He is consulting physician to the Feld Ballet, Rosalind Newman and Dancers, and adviser to ballet dance company members in the New York City Ballet, Twyla Tharp Dancers, Paul Taylor and Charles Maulton companies. He directs the Danceclinic at the Center for Dance Medicine, of which he is co-founder.

1955
Norman H. Ilowite, Fort Lee, N.J.—has been designated chairman of the dermatology section at the New York College of Osteopathic Medicine. He will program and deliver 24 credit hours of instruction to 130 second-year students. As section chief of dermatology of the Kennedy Memorial Hospital at Saddle Brook since 1968, he is the sole osteopathic member of the North Jersey Dermatological Society.

1956
David Bronstein, Harrisburg, Pa.—has been elected president of the Pennsylvania Osteopathic Medical Association. He chairs the department of internal medicine at Community General Osteopathic Hospital, is a member and Fellow of the American College of Osteopathic Internists, and a Fellow of the College of Physicians in Philadelphia.

Carl Kodroff, Philadelphia—spearheaded the 1985 basketball reunion at PCOM, and his enthusiasm for building this event into an annual affair resulted in his creating and distributing T-shirts (he’s shown wearing one) to the attendees.

Richard K. Snyder, Allentown, Pa.—recently began private practice in Allentown after leaving the post of vice president of medical affairs at Allentown Osteopathic Medical Center, where he had been since 1966. As founder and president of Community Healing Center, he will continue his staff relationship with the medical center.

1958
Albert S. Kroser, Philadelphia—with his wife, Dr. Lila Kroser, recently returned from delivering a series of medical seminars on women’s health issues in the Soviet Union, including the Soviet Central Asian republics. They served
as education leaders for a group of American physicians.

1962
Capt. James H. Black, Oakland, CA — PCOM Alumni Board representative for the military district attended a high-level Department of Defense Health Council Conference recently, discussing medical readiness, options for financing medical care and legislative issues, among others.

Richard Darby, Phoenix, Az. — hosted a conference of Arizona, Nevada and Utah physicians on the topics of “aging and wellness,” at which 700 attendees met in Tucson. He is a PCOM Alumni Association board member.

1965
Ralph C. Lanciano, Jr., Had­donfield, N.J. — recently was appointed chairman of the division of ophthalmology, department of surgery of the University of Medicine and Dentistry of New Jersey/School of Osteopathic Medicine, in Camden.

Robert M. Mandell, Farm­ington Hills, Mi. — currently is serving as president of the Michigan Osteopathic Academy of Orthopaedic Surgeons, 1985-86.

1966
C. Glen Kramer, Allentown, Pa. — has been chosen president-elect of the Pennsylvania Osteopathic Medical Association. A member of the medical staff of Allentown Osteopathic Hospital, he is vice chairman of the department of medicine at Quakertown Community Hospital, and a member of its board of directors.


William A. Nickey, Philadelphia — has published a manuscript entitled, “Applying the Principles of the Joint National Committee Reports in Private Practice,” in Primary Cardiology’s special supplement, discussing the treatment of moderate to severe hypertension.

1967
Louis D. Ellis, Philadelphia — has been designated the director of medical education at St. Joseph’s Hospital, Philadelphia. In July, St. Joseph’s will begin an internship program sponsored by PCOM.

1970
Victor L. Flagiello, Kingsville, Tx. — has been appointed to the advisory board of the Children’s Heart Institute in Corpus Christi. He joins several South Texas physicians who help raise funds for the institute.

1971
Gerald F. Robbins, Huntington Woods, Mi. — recently presented a paper entitled, “Common Dilemmas in Seizure Patients,” at the American College of Neuropsychiatrists seminar in Atlanta November 10. He is on staff at three Michigan hospitals and teaches at Michigan State University College of Osteopathic Medicine at East Lansing.

1972
Gerard W. Szczygiel, Erie, Pa. — has established a medical practice in obstetrics and gynecology at Plaza Thirty-Eight Medical Center, Erie, and on a consulting basis at Eastside Medical Center. He has been appointed to the staff at Millcreek Community Hospital, Erie.

1973
James Pritchard, Canton, Oh. — has been named to Who’s Who in the Midwest, and Outstanding Young Men in America, for his professional achievement, leadership and service to the community. He is a staff physician at Doctors Hospital of Stark County, and county coroner.

1974
John M. Ferretti, Erie, Pa. — addressed a special joint session of the 58th annual Clinical Assembly of Osteopathic Specialists on the topic, “Ambulatory Care Center: The Concept and the Need,” October 30 in San Diego. He is medical director of Millcreek Community Hospital, in Erie.

Richard J. Naftulin, Pennsauken, N.J. — has been board certified in Orthopedic surgery by the American Osteopathic Board of Orthopedic Surgery.

1975
Francis X. Blais, Ft. Worth, Tx. — formerly a faculty member at Chicago College of Osteopathic Medicine, he has been named associate professor of medicine at Texas College of Osteopathic Medicine. He is consultant on infectious diseases.


Robert Gordon, Pine Hill, N.J. — has been elected a Fellow in the American College of Chest Physicians. He is a clinical assistant professor of medicine at the University of Medicine and Dentistry of New Jersey/School of Osteopathic Medicine.
Stephen N. Finberg, Phoenix, Az. — has been appointed chief of respiratory services at Humana Desert Valley Hospital. The hospital also has named him chief of medicine for the 1985-86 year.

Francis J. Karcsh, Voorhees, N.J.—has been appointed chief executive officer of the Camden County Health Services Center in Blackwood, N.J. He also has joined the corporate staff of Diversified Health Services of Plymouth Meeting, Pa.

1977

Robert B. Goldberg, Short Hills, N.J.—recently chaired programs at the 90th Annual Convention and Scientific Seminar of the AOA in Atlanta November 10-14. Specifically involved with the Rehabilitation Medicine session, he is assistant to the director, department of rehabilitation, St. Vincent’s Hospital and Medical Center, New York City. He also serves as clinical professor of Physical Medicine and Rehabilitation, PCOM.

John Kenny, Little Egg Harbor, N.J.—has been appointed medical director of Seacrest Village, a nursing care facility recently opened on Mystic Island. He is chief of family practice at Southern Ocean County Hospital in Manahawkin.

1978

David A. Baron, Pasadena, Ca. — recently presented a paper entitled, “Dangerousness to Others,” at the American College of Neuropsychiatrists session in Atlanta November 10. He is a staff member of Los Angeles County Hospital, Norris Cancer Hospital and Doleny Eye Hospital, and is director of Psychiatric Education at the University of Southern California School of Medicine.

William A. Schiavone, Shaker Heights, Oh.—has been elected a Fellow of the American College of Cardiology. Currently, he is staff cardiologist, Cleveland Clinic Foundation.

James A.M. Smith, Camp Hill, Pa.—has joined the staff of Holy Spirit Hospital, Camp Hill, as a member of the internal medicine section. Earlier, he published “Warning Signs of Stroke,” in Woman’s World magazine.


1979

Laurance D. Brown, Philadelphia — has been named to the staff of Lebanon Valley General Hospital, Lebanon, Pa. He also serves on the staff of Episcopal Hospital, Giuffre Medical Center in Philadelphia, and Warminster General Hospital.

Alfred R. D’Angelo, Red Lion, Pa.—has been elected vice president of the Pennsylvania Osteopathic Medical Association. He is a partner in the Dairyland Medical Center and is on the staff of Memorial Hospital in York, Pa.

Nelson P. Kopyt, Easton, Pa.—has joined the Nephrology-Hypertension Associates of the Lehigh Valley, in Easton. A clinical assistant professor in the department of internal medicine at Temple University, he will specialize in kidney diseases and high blood pressure.

William A. Wewer, Steelton, Pa.—has been re-elected president of Steelton’s Community General Osteopathic Hospital medical staff.

George Wolters, West Chester, Pa.— has been appointed director of the emergency department, Riddle Memorial Hospital, Media, Pa. He has completed his residency in emergency medicine at OMCP and has received board certification.
1980

Bruce A. Feldman, Allentown, Pa. — has joined the medical staff of Allentown Osteopathic Medical Center, specializing in cardiology and internal medicine.

Alice McCormick, Honesdale, Pa. — has opened a practice for internal medicine at the Southern Wayne Community Health Center. She is a staff physician of the Wayne County Memorial Hospital. At the health center, she will be associated with other internists and immunologists, including Robert M. Curley, '78, hematology/oncology specialist and her husband.

1981

Gregory E. Cali, Philadelphia — a Fellow at Kennedy Memorial University Medical Center, Stratford, NJ, has published an abstract in the September issue of Chest, entitled, "Comparison of Chest X-rays, Bronchography and C-T scans of the Lungs for Diagnosing Bronchiectasis." He presented the article at the American College of Chest Physicians Scientific Conference in New Orleans, October 31.

Gerald E. Dworkin, Philadelphia — has been named assistant director of clinical services for the department of physical medicine and rehabilitation at Temple University Hospital.

Joan Orloski, Duryea, Pa. — has joined the medical staff of the Monroe-Noxen Health Center, Noxen, Pa. She will specialize in internal medicine.

Beverly A. Schantz, Lancaster, Pa. — has joined the medical staff of Lancaster General Hospital. She is associated with Anesthesia Associates of Lancaster, Ltd.

1982

Jean Allen, Ambler, Pa. — has joined the Skippack Area Medical Center in family practice. She was instrumental in opening the center last September.

Barry L. Bakst, Narberth, Pa. — has been appointed chief resident in physical medicine and rehabilitation in the joint residency program at Moss Rehabilitation Hospital and Albert Einstein Medical Center, northern division.

Joseph M. Kaczmarczyk, Philadelphia — has won a $1,000 first prize for a paper presented to the 52nd annual convention of American College of Osteopathic Obstetricians and Gynecologists in Coronado, Ca. He is a PCOM resident in Ob/Gyn.

Joseph F. Mussoline, Nesquehoning, Pa. — has begun private practice in Lansford, Pa., after general practice positions at the Family Practice Center in Mifflinsburg and Mt. Pleasant Mills, Pa., Lewisburg and Millmont.

Capt. John H. Polak, North Pittston, Pa. — has been decorated with the Army Commendation Medal while serving with the 2nd Brigade in West Germany.

1983

Mark Delowery, Elkins Park, Pa. — has opened a practice office in the West Valley Business Center, Wayne, for family medicine.

Angelo Mancuso, Farmington Hills, Mi. — recently presented a paper entitled, "Injectable Collagen," at the American Osteopathic College of Dermatology session of the AOA in Atlanta November 10.

Thomas J. Renaldo, Macungie, Pa. — has joined the medical staff of Allentown Osteopathic Medical Center in family practice. He also maintains a practice with the Macungie Medical Group, Macungie.

William S. Spaeth '25, Avalon, N.J. He was emeritus professor and former chairman of the department of pediatrics at PCOM from 1945 until his retirement in 1971. He was honored with the O.J. Snyder Memorial Medal in 1975, while treating his third generation of patients from his practice in Drexel Hill, Pa. He was credited with helping to foster pediatrics as an osteopathic specialty. A fellow of the American College of Osteopathic Pediatricians, Dr. Spaeth served a one-year term as president and chaired the examining board of the organization for 25 years. A firm advocate of manipulative therapy, he was stricken with polio at age 17 and influenza a year later. His physician used only osteopathic treatment to effect complete cures from both diseases. As a result, the young man entered PCOM and became interested in pediatrics through the new dean, Edgar D. Holden, D.O. Upon graduation, Dr. Spaeth organized pediatrics’ post-graduate and residency programs. His students regarded him as a dedicated, knowledgeable teacher, He died June 5, 1985.

Elmer Jenkins, '28, Palm Beach Gardens, Fl., died September 25.

Margaret N. Brown, '30, Haddonfield, N.J., died August 30.

Dorthea Willgoose, '32, Needham, Ma., died September 15. She was 79. Dr. Willgoose was a graduate of Boston College and had post-graduate studies at Buffalo College of Medicine. In general practice in Needham from 1933 to 1967, she established and became medical director of the rehabilitation department of Glover Hospital, a post she held until 1981. As chairman of Needham’s Council on Aging, she developed Needham’s senior adult center as a pilot program for the state in the mid 60s. She was a White House delegate, health consultant for the Department of Elder Affairs, co-author of manuals on health maintenance, and a teacher of gerontology. She was a member of the Massachusetts Medical Society and a Fellow of American Congress of Rehabilitation Medicine.


David J. Evans, '35, Victoria, Australia, died July 25.

John W. Drew, '39, Dallas, Tx., died March 7. He was a member of the corporation.

Ronald A. Mertens, '42, Westwood, Ma., died November 29.


George D. Mansfield, PCOM Trustee, Philadelphia, died November 8. He was 86. He was elected to the board September 15, 1959, and served as its vice chairman until his appointment as Emeritus Trustee on October 13, 1982. A city councilman in Philadelphia for 12 years, he co-founded the Pioneer Salt Company. In 1954, he was appointed chief of the Philadelphia Office of land acquisition of the National Park Service, and was in charge of land acquisition for Independence Mall. He patented a telephone switch that permitted Bell System exchanges to handle calls from Keystone Telephone Company, of which he was solicitor. It also permitted conference calls, and became a worldwide telephone equipment staple.


Milton L. Bluitt, '67, Wynnewfield, Pa., died October 28. He had been on staff at the Veterans Administration hospital at Coatesville for six years, and served as chairman of the subcommittee on human studies. He also was an assistant professor of psychiatry and human behavior at Jefferson Medical Center. He was graduated from Lincoln University.

John H. Gilmour, '76, San Francisco, Ca., died August 11. He was 41. He was on staff at Presbyterian Hospital of the Pacific Medical Center.

Alan Z. Gartzman, '82, Pennsauken, N.J., died October 4 as a result of an automobile accident the day before. He was 30. In practice with his father, N. Harry Gartzman, '52, he served on the staff of Kennedy Memorial Hospital. He is survived by his widow, Carol and children Sheera and Steven.
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<td>January 26-February 2</td>
<td>Post Founders Day CME Seminar</td>
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