Nineteen Twenty-one

Frank Bailey Smith, MD, upon his retiring as president of the Kent County Medical Society speaks on the subject of fads in medicine—popular diagnoses and treatments. Among his list he includes: “it was found necessary to put nearly every woman’s uterus into a glass jar, which was the proper place for it; but when found it shortened life, it was only recommended for those who desired no more children or actually had malignant disease.” He also takes note of “fad” diagnoses of scrofula, peritonitis, ossification of the arteries, and distention of the transverse colon—among others. He then focuses on the more recent “yeast fad” that has grown out of an interest in vitamins. He quotes Dr. Hershberg of New York: “Happily there is always at hand a simple, cheap, plain, every-day-and-Sunday-go-to-meeting food, viz., the yeast cake, which contains a liberal supply of vitamins. A fresh yeast cake is certainly an ideal food, if eaten freely, flavored or not, three times a day, before or with meals. In its composition are to be found mineral fertilizers for human use, vitamins, water soluble ‘B’ for sugars, starches and egg-white like stuff.” Drolly, Dr. Smith suggests that, at long last, a near-universal panacea has been uncovered.

In an editorial, the writer laments members of the medical profession who show a certain disdain for erudition. Acknowledging exceptions to the argument, the writer continues: “Do we wish to relinquish our claim to being one of the learned professions? It is true that we cannot all be literary men of the first order, nor can we all discuss literature and the classics with the most erudite of our patients; but we can all, we trust, by a little earnest effort, learn to express ourselves with an approximation of what ‘unity, coherence and force’ upon which our teachers of rhetoric were wont to insist.”

After conveying the warmth of a home-made photograph sitting on a desk, another editorial discusses the Journal of the American Medical Association and the Rhode Island Medical Journal: “So with the two journals, the Journal of the American Medical Association is the formal and foremost journal of the day and you can not possibly afford to be without it, but your state journal is also important. It should be of even more interest to you for it should give you news of your own brother practitioners whose problems and joys are much the same as your own. There should be in it a certain friendly intimacy that you would not expect in a national publication. In other words it should correspond to the home-made picture.”

In a short, light feature entitled “Ether and Lavender: Dissertation on Brains” it is observed that “One of the most singular things about brains is that everyone is sure that he is the possessor of the best,” and “The difference between brains of the human variety and that of the lower animals is that one, by process of educational training has the power of continuity of thought and consecutive thinking; but this must, at times, be proven.”

Fifty Years Ago, March 1961

In a letter to the editors, Dr. A Lloyd Lagerquist writes in response to an editorial in the February issue regarding generic vs trade name drugs. Conducting an experiment on generic prescriptions and cost to patients, he prescribed the generic medication to thirty patients, then surveyed the actual medication they received. In twenty-seven cases, the pharmacist supplied, and charged for, the trade name version while three provided the generic pill but did not charge the patient any less. Dr. Lagerquist does not draw any conclusions beyond his own personal observations, but notes that there is “much more to this problem.”

An editorial notes that forty-thousand patients across America wear medic-alert bracelets. The non-profit Medic-Alert Foundation maintains a numerical card file containing medical information and data on members and is available on a twenty-four hour basis by collect phone call. The editorial closes with: “This then is the dog-tag which worked so well in the Services, prettied up for the ladies and adapted to civilian use. It is a great improvement over the cards so many diabetics have carried and often lost in the past. The Medic-Alert Foundation, for its manifest public service, merits the support of physicians everywhere.

In “Through the Microscope,” it is noted that “more than 5,000 college and university students taking part in the 1960-61 National Intercollegiate Debate program, are currently discussing the proposition: “That the United States should adopt a program of compulsory health insurance for all citizens.” The Health Insurance Institute developed and disbursed an “insurance reference kit” for use by debaters, speech department, and school libraries.

Twenty-Five Years Ago, March 1985

Continuing to address alcoholism in Rhode Island, Thomas Romeo, director of the then-named Rhode Island Department of Mental Health, Retardation and Hospitals, notes that with an estimated 54,000 to 68,000 persons in Rhode Island who are “Alcohol troubled” that the view of alcoholism has shifted from a perception of moral weakness to “a complicated disease process which affects all strata of society.” In “Family-oriented treatment of alcoholism” by Michael Liepman, MD, Ted Nirenberg, PhD, and William T. White, RN, MSN it is further noted from the start that “The comprehensive multidimensional treatment of alcoholism has become an accepted concept only within the recent past. One of the latest innovations in alcoholism treatment has been the emergence of intensive family therapy.”

A special report from The Committee on Impaired Physicians of the Rhode Island Medical Society focuses on those illnesses that tend to be treated inadequately when occurring in physicians such as alcohol and drug dependency, depression, severe anxiety, and other behavioral disturbances. They point out that other “organic illnesses” such as heart disease often receive optimal treatment and do not represent a problem in neglect.