1844-1994



Our Medical Heritage





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Section 1

The History of the Lancaster City & County Medical Society



Chapter 8 The History of the Lancaster City & County Medical Society

1944-1994

The year 1944 was not a good year for the Lancaster City & County Medical Society. Sixty-one of its members were in the Armed Forces while those who were left behind tried to serve Lancaster's medical needs with a third the usual number of physicians and nurses. The invasion of Normandy took place that year. Lancaster was just recovering from a 1943 smallpox scare that responded to a massive vaccination program sponsored by the Medical Soci-

ety and all five Lancaster County hospitals.

Dr. Charles P. Stahr, who distinguished himself as a medical officer in World War I was serving as Secretary-Treasurer of the Medical Society. As in all volunteer organizations, the secretary is the key officer who maintains the organization's continuity. Under his tutelage the Society's minutes were typed instead of hand written and a part time staff secretary was engaged. Meetings were held at monthly intervals at Franklin and Marshall's Green Room Theatre. Ash trays were available at every seat and the atmosphere was hazy and blue with the smoke of cigarettes, pipes and cigars. At that time all but a few physicians were heavy smokers.

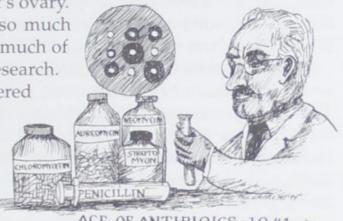
Lancaster's medical service in 1944 was state of the art. House calls were common and expected. The fee was \$5 in daytime and \$10 at night. Office hours were "open" without appointment and often ran until 10 or 11 p.m. The usual schedule was hospital rounds and meetings in the morning and house calls before lunch. Office hours from 1 until 5, a few house calls before dinner, office hours again at 7 until closing, then home unless house calls were still necessary. Most physicians took Wednesday or Thursday off and worked on Saturday.

Dr. Joseph Appleyard was Lancaster's urologist and followed Dr. Stahr as secretary-treasurer of the Society. Very active in organized medicine, he attended every meeting of the Pennsylvania Medical Society as a delegate from Lancaster. Rumor had it that he always carried a catheter rolled up in his hat band to relieve an occasional colleague who, after a night imbibing not wisely but too well, developed urinary retention!

The foundation of Lancaster's medical service; as everywhere in the 1940s, was the GP, the general practitioner; the local medical physician (LMP) of medical school notoriety. The GP did everything. All had admitting privileges in the hospitals and it was the custom to admit the patient on the general practitioner's service who would then call in whichever consultants were needed to help.

Laboratory support was primitive by today's standards but for the 1940s top notch. The complete blood count was a bench test carried out with a counting chamber. A hemoglobin level was a visual inspection using a Haden-Hauser hemoglobinometer. The basal metabolic rate was still part of a thyroid work up. The dip stick was not yet on the market and the Friedman test for pregnancy still required a rabbit's ovary.

Bacterial diseases that caused so much human suffering and controlled so much of our history were responding to research. Prontosil, the red dye, was discovered in the early 40s to have antibacterial activity. Further study produced sulfanilamide, followed by sulfapyridine, sulfadiazine and a variety of other antibacterial agents and then the world shak-

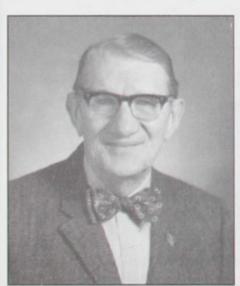


AGE OF ANTIBIOICS-1941

ing penicillin. The control of bronchopneumonia, the old man's "friend," which started with the use of hyperimmune rabbit serum, was completed with the introduction of sulfapyridine and later penicillin.

It is interesting to note that the nation's supply of antipneumococcic rabbit serum was manufactured in Marietta in the Gilliland Laboratories (now Wyeth Labs). They reputedly had a million of the furry creatures making the vaccine. Disposing of them after the introduction of antibiotics was a gargantuan job!

In 1954 the Salk polio vaccine was announced to the public, followed shortly by Dr. Sabin's version of the vaccine, which could be taken orally. Dr. Edgar Meiser had been deeply involved with the control of poliomyelitis in Lancaster for many years. He was now able to direct the medical society as it assisted the community to set up programs for total vaccination against this



Edgar Meiser

dread disease. The vaccine program and effectiveness of the vaccines were so successful that by 1965 Pennsylvania was able to announce that the state was free of polio!

The year 1963 was notable by the fact that the Society added a part time executive secretary to its headquarters staff. At this time the business of the society was being transacted in Secretary Appleyard's office, using his secretary. The regular monthly meetings of the society, as we mentioned earlier, were held around the town. For several years the physicians met in the Green Room Theatre at F & M College. Later the meetings were held in the auditorium of St. Joseph Hospital while the Board of Trustees of the Society met in a conference room at the Lancaster General Hospital.

Notable also in 1963 was the decision of the Milton S. Hershey Foundation to offer Penn State University \$50 million for the establishment of a school of medicine in the town of Hershey. Penn State had wanted for many years to own a medical school and the offer was quickly accepted. The core activity of the school would be to train family physicians, in contrast to the other medical schools whose emphasis was on specialty training.

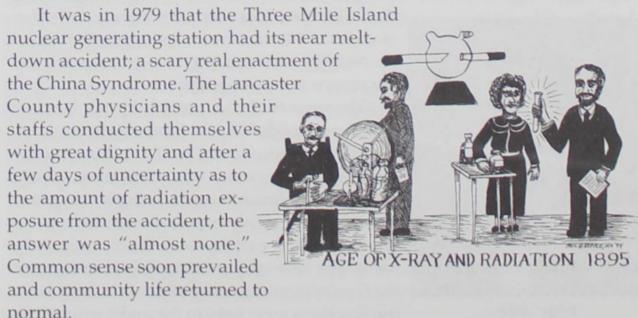
The Lancaster City & County Medical Society provided Hershey with several physicians to serve as charter members of the medical school faculty. Thomas Leaman was named professor of Family Medicine and chairman of the department. Hiram Wiest of East Petersburg and Robert Bauer of Intercourse accepted professorships in the same department. Lancaster physicians along with the American Academy of Family Physicians played an impor-

tant part in the recognition of the importance of family medicine.

In 1973, Dr. Paul Ripple became president of the Medical Society, followed by Drs. William Ridgway and Roland Loeb. All three leaders believed the times called for a strong and active organization. Dr. Ripple directed his energies to the Edward Hand Medical Heritage Foundation; Drs. Ridgway and Loeb were more involved in the administrative affairs of the Society and after serving in turn as president, took turns as secretary-treasurer. Later Dr. Loeb separated the treasurer's job from the secretary and took on the additional post of editor of the society's bulletin. Dr. James Frederick Young was the first treasurer to serve in the post. With Dr. Ripple as art editor, the bulletin was enhanced by his great cartooning skills.

Under the direction of Drs. Ridgway and Loeb, many changes were instituted in the medical society. A full time executive secretary, Mrs. Janice Dunlevy, was employed and enlarged office space rented from the Lancaster

Medical Bureau.



The Cobalt Theratron 80 was installed in 1970 and the first linear accelerator in 1973, both in the Lancaster General Hospital. Radiology departments were present in Lancaster hospitals as early as 1903. Twenty years later, both hospitals, St. Joseph and the General, had skilled specialists in charge, Drs. Robert Schwab and Henry Davis respectively. The most powerful machine available was the 200 Kilovolt unit that was used both for imaging and therapy. Those who are old enough to remember those two-room departments complete with darkroom, stand in awe at today's computerized axial tomography (CAT) scanners, magnetic resonance imaging (MRI), sonographs and other equipment.

Another by-product of the times were the first tentative steps to closer relations between allopathic and osteopathic physicians. The Lancaster Academy of General Practice was the first to recognize that all physicians faced similar problems and presenting a united front was the only way to go. They issued an ongoing invitation to the Lancaster Osteopathic Medical Society to attend all their scientific meetings.

In 1965, Dr. Edgar Meiser was again called to serve in an epidemic. An outbreak of salmonella infection tested the skills of the sanitation board. It turned out that the source was Lancaster's Queen Dairy. One of its workers on the bottle filling line was a carrier and he was infecting the milk before the bottles were capped. Removal of the worker ended the epidemic.

The year 1965 was eventful for another reason. Lancaster's own Dr. James Z. Appel was elected President of the American Medical Association. He was

only the second Lancastrian in the history of the AMA to be so honored. Installation would take place in New York during the annual meeting of the American Medical Association. To honor its native son the Lancaster City & County Medical Society rented a bus. Every seat was shortly filled by members and their spouses. A great time was had in the big city. Another event that year that was to have a tremendous effect on the practice of medi-

have a tremendous effect on the practice of medicine was passage of Medicare, a government plan for the medical care of the elderly. To honor Harry Truman, President Lyndon Johnson and his en-

tourage traveled to Independence to sign the legislation. Significantly, no representative of physicians' organizations was invited. Dr. Appel, as president of the AMA issued a

statesman's request to all physicians that, now that Medicare was law, physicians should cease all opposition and do their best to make the system work.

DR. JAMES Z. APPEL

The April 1977 meeting was held at Luther Acres to honor the society's oldest living member, Elizabeth Bricker, age 100 years. She was truly a pio-

neer. Taking her pre-medical work at Penn State, Dr. Bricker graduated with 33 other women from Woman's Medical College of Pennsylvania in 1903. She went first to Wernersville Mental Hospital; worked there for several years before coming to Lititz where she practiced for the remainder of her career. She died in 1979, age 102 years.

Professional liability problems were having a major impact on Pennsylvania physicians and the Lancaster City & County Medical Society could not avoid being affected. There were essentially two insurance companies in Pennsylvania: Argonaut, supported and endorsed by the Pennsylvania Medical Society and Medical Protective Company of Indiana. For physicians uninsurable for any reason there was the Joint Underwriting Authority (JUA) controlled by the Pennsylvania Insurance Commissioner. Argonaut was threatening to leave the state in a few months leaving many physicians uninsured thus forced into the JUA. To forestall this the Pennsylvania Medical Society proposed establishing a separate corporation called the Pennsylvania Medical Society Liability Insurance Company (PMSLIC). Each member of the PMS was assessed \$250 to provide the initial financing of the company. Argonaut did, in fact, leave the state and PMSLIC was launched and on its way.

It was in late 1979 that the Society minutes note an interest in the old Lancaster County hospital. Once used as an almshouse it is said to be the second oldest hospital building in the country. For many months Medical Society representatives talked to the County Commissioners offering to take over the building. The Society hoped the Commissioners would lease the building to the museum foundation for \$1 a year. In return we would restore the building as closely as possible to its original form, install a medical museum on the second floor and offices and meeting rooms for an "Academy of Medicine" would be on the ground floor. Although we felt several times the Commissioners were on the verge of accepting the Society's offer, it never took place. As this is being written the old hospital building is still used for county offices.

Allopathic-osteopathic relations in Lancaster County received a boost when the American Osteopathic Association withdrew its objections to dual membership with allopathic groups. A discussion of Health Maintenance Organizations (HMOs) presented an opportunity for a joint meeting which was very successful. In 1992 Dr. David Wiley became the first osteopathic physician in the history of the medical society to become its president; a post in which he served with distinction.

1979 saw the establishment of the Louise Steinman Von Hess Medical Education Foundation under the direction of Dr. John Esbenshade. A symbiotic and cooperative relationship was established at once. Through the seminars of this foundation the Lancaster County medical community was able to participate in continuing medical education worldwide in scope. Dr. Henry

Wentz also provided a medical landmark by compiling and publishing a directory of all the physicians of Lancaster County; a "first" for the medical

society and received by the public with great approval.

The Society continued to grow, its administration was increasingly active and its problems also grew. In early 1982, our long time secretary, Mrs. Dunlevy, requested relief from her duties to spend more time on her personal activities. This was granted with regret. Upon her retirement, Dr. Edgar Meiser decided to retire whereupon his secretary and office aide, Miss Sally Sigafoos was offered and accepted the post. In 1985, a computer was installed in the Medical Society office and connected to the State Society in Harrisburg. A telephone answering machine and a fax machine were added later.

A proposal for the development of the first open heart surgery program by the Lancaster General Hospital received the Society's widespread support. In due course, Drs. Laurence Bonchek and Mark Burlingame came to Lancaster to establish and maintain an open heart surgery program whose

high quality is nationally known.

In 1984, the Society turned its attention to cigarette smoking and sent a strongly worded resolution to all the Lancaster county hospitals asking them

to ban all smoking in their buildings.

On the occasion of State Senator Richard Snyder's retirement from government service, the society paid tribute to his unwavering support of organized medicine; a tribute that included his election as the first honorary member of the medical society.

By 1987 the number of patients infected with Human Immunodeficiency Virus (HIV) plus those with full blown Acquired Immune Deficiency Syndrome (AIDS) had reached epidemic proportions and the medical society's minutes showed increasing attention. Not a month went by without editorial reference or a continuing medical education (CME) meeting devoted to this

topic.

Later that same year the medical society developed and launched its "Mini Internship." This was a very ambitious undertaking in which eight non-physicians from the community—movers and shakers—spent two days with a variety of physicians to see exactly how a physician spends his day. Seventy-five physicians participated and the program was enthusiastically received. At the end of the two days the physicians and "interns" had dinner together and certificates were presented to the "graduates." Although the program was worthy of being perpetuated, the tremendous amount of effort required of the volunteers as well as the great expense were simply too much. After the second group—equally successful—the program was dropped.

Two years later the medical society turned its attention to Unified Membership; an agreement with the AMA that the Pennsylvania Medical Society and its component societies would accept as members only those who agreed to belong to all three medical societies: local, state and national. After much



1930 "state-of-the-art" operating room (Photo from the Darmstaetter Collection)

discussion it was agreed that a unified front was vital to the survival of American Medicine and the unified membership proposal was passed. In 1994, a dissident proposal was made in the PMS House of Delegates to reverse unification with the AMA. Unification was maintained by a comfortable margin; including Lancaster's "aye" vote.

Dr. Robert Doe ascended to the presidency of the

medical society in 1993 bringing with him a heightened interest in the legislative process and the medical profession's need to become politically active. Despite some setbacks and opposition from outside the profession, Dr. Doe was able to establish a political action committee which successfully distributed campaign funds to a variety of candidates and also developed the Lancaster County Health Plan designed to improve the management of care for Medicaid (a government plan for medical care to the indigent) patients as well as the uninsured and underinsured populace.

This is the story of the past fifty years. What of the next fifty? Obviously those of us still practicing medicine are inveterate optimists. Our faith in the American people is such that we cannot believe they will permit the government to continue to intrude and destroy the finest medical system the world has ever known. The medical field will continue to attract the best and the brightest. The new



1995 operating room

machines and discoveries will bring improved health beyond our imagination. One thing will not change: the one on one obligation of the physician to care for and do his/her best for the patient.