

THE RHODE ISLAND MEDICAL JOURNAL

The Official Organ of the Rhode Island Medical Society
Issued Monthly under the direction of the Publications Committee

VOLUME 1
NUMBER 1

PROVIDENCE, R.I., JANUARY, 1917

PER YEAR \$2.00
SINGLE COPY, 25 CENTS

FIFTY YEARS AGO, OCTOBER 1959

In the 8th Annual Arthur Hiler Ruggles Oration, “New Knowledge for Better Mental Health,” Jack R. Ewalt, MD, Professor of Psychiatry, Harvard Medical School, reported on a national survey conducted by the Joint Commission on Mental Illness and Mental Health. “We wished to find out what people did when they become unhappy, worried, mentally ill or otherwise troubled...” Surveyors asked a sample of people where they sought help: “... people who seek help for personal problems tend to have a psychological orientation to life...they are introspective and self-questioning.” The major national crises (threat of atomic fallout, high taxes, housing shortage) “that are reportedly causing our society great tension and stress, appeared as an important source of worry in a very small number of people. People seem to derive their satisfactions from rather mundane things...their families,...children... community activities.”

Jose M. Ramos, MD, Director of the Arthritis Clinic, Newport Hospital, contributed “The Value of Infiltrations in Cases of Subacromial Bursitis Due to supraspinatus Tear.” “Too frequently the physician gives the shoulder a casual survey and resorts to the time-honored diagnosis of ‘bursitis’ without actually determining the real cause of pain.” Reviewing the records of 36 patients with acute subacromial bursitis due to supraspinatus tear, Dr. Ramos found that “...the primary consideration should be given to the acute bruise section. The treatment of the tendon should be secondary and follow at an interval of 4 to 5 days.”

Stuart Willis, MD, from the North Carolina Tuberculosis Sanatorium System, delivered “The Case for Forcible Hospitalization of the Recalcitrant Tuberculous Patient” at the 52nd annual meeting of the RI Tuberculosis and Health Association. In North Carolina’s system of 4 hospitals, staff assumed that the AWOL patient (“After Women or Liquor”) “has problems at home or is fed up with hospital life.” Staff urge the patients to return, but eventually a recalcitrant patient can be arrested, sentenced to the prison domain of the state Sanitarium.

At that same meeting, Sidney H Dressler, MD, Medical Director, National Jewish Hospital, Denver, presented: “The Case Against Compulsory Isolation of the Recalcitrant Tuberculosis.” Dr. Dressler called it “unnecessary as well as a misapplication of police authority in the hands of those whose training and backgrounds should make them regard this as repugnant.” He estimated that 1 to 3% of patients were recalcitrant.

Edwin Dunlop, MD, Assistant Medical Director, Fuller Memorial Sanitarium, contributed “Depression: Treatment of Office Patients with Phenleazine [Nardil].” He reported on 50 patients: 82% had complete recovery from their depression; their side reactions were controlled by adjusting the dosage.

TWENTY-FIVE YEARS AGO, OCTOBER 1984

Touissaint A. Leclercq, MD, FACS, FICS, Robert E. Knisley, MD, Richard P D’Amico, MD, and Joseph Di Benedetto Jr, MD, in “Evaluation of Transsphenoidal Hypophysectomy in the Management of Metastatic Breast Carcinoma,” reviewed the literature and discussed their experience with 30 cases. “The most favorable candidates have a history of previous response to hormonal manipulation.”

Christopher Ehmann, MD, Dennis B. Kruss, MD, and Charles B. Kahn, MD, in “Pituitary Hyperthyroidism: Report of 3 Cases,” noted: “This unusual clustering...probably represents a heightened awareness and the availability of TSH assay.”

Kemi Nakabayashi, Sarah C. Aronson, Michael Siegel, William Q. Sturner, MD, and Stanley M. Aronson, MD, reported on “Traffic Fatalities in RI, Part III: The Role of the Motorcycle.” They reviewed data on 109 motorcycle fatalities, concluded: “More data are needed to evaluate the impact of alcohol and helmets.”

