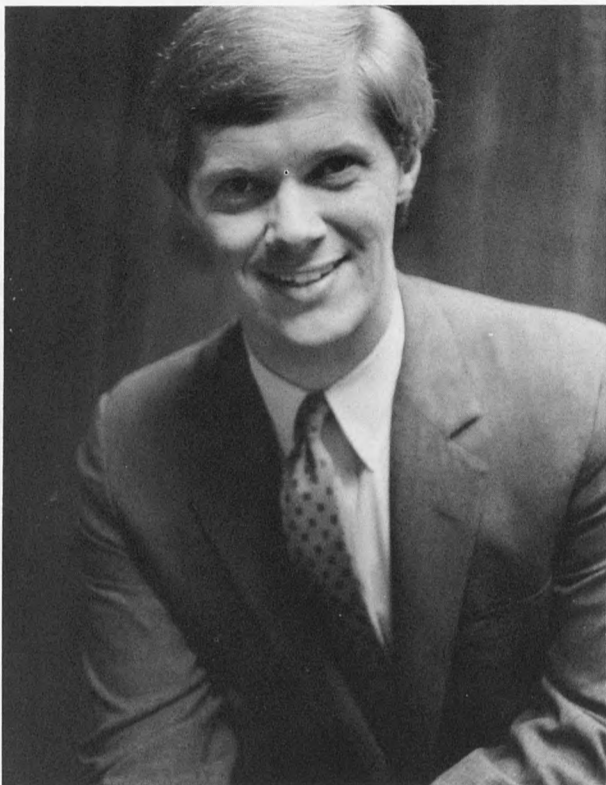


BULLETIN

Barnes Hospital, St. Louis, Mo.
January 1989, Vol. 43, No. 1



Dennis A. Holter, vice-president for development

Vice-presidents named for development, finance

Dennis A. Holter has been named vice-president for development and Randall J. Combs has been named vice-president for finance at Barnes Hospital. Both positions report to the senior vice-president for finance.

As vice-president for development, Mr. Holter is responsible for overseeing all activities related to the development of charitable funds for various hospital needs. This area includes all gift and grant solicitation efforts, special events, capital campaigns and direct mail efforts. In this capacity, Mr. Holter will work closely with the external relations committee of the board of directors.

"One of my primary goals is to build a good working relationship with the Barnes Auxiliary, which has a history of tremendous achievement," Mr. Holter said. "I plan to develop various strategic plans for fund raising, including public, private and state support for Barnes."

Mr. Holter brings to Barnes more than eight years of experience in the development of charitable contributions, most recently as senior director of development at the University of Missouri at Columbia, where private support increased by 10 percent annually during his tenure. He previously held the positions of director of development at Idaho State University, executive vice-president for the Idaho State University Foundation, and director of annual giving at the University of South Dakota in Vermillion.

Front cover: Cozy and warm in the arms of an employee in the Barnes special care nursery, little Robert Cody Nichols looks too sleepy to pay much attention to his "The Birth Place Barnes" hat. All babies born at Barnes during December received the red and green knit caps.



Randall J. Combs, vice-president for finance

A graduate of the University of South Dakota at Vermillion with a bachelor of arts degree in mass communications, Mr. Holter also holds a master's degree in education from Idaho State University.

As vice-president for finance, Mr. Combs directs the hospital's financial organization by overseeing the activities of all financial and accounting departments. His areas of responsibility include general accounting, costs and budgets, reimbursement, financial analysis and patient accounts.

Mr. Combs comes to Barnes from St. John's Mercy Medical Center in west St. Louis County, where he served as vice-president of financial operations. He had joined the St. John's staff in 1983 as controller and was named a vice-president in 1987. His past experience also includes four years as a senior accountant at Peat, Marwick, Mitchell & Company.

Mr. Combs holds a bachelor of science degree in business administration from the University of Missouri at St. Louis. He is a certified public accountant and a member of the Healthcare Financial Management Association.

Barnes and SLU enter ambulance joint venture

Barnes Hospital and St. Louis University Medical Center's Abbott Ambulance have entered into a joint venture to form a not-for-profit metropolitan ambulance service.

The ambulance service is designed to be a community-wide resource, providing backup services to local ambulance districts and transfers between hospitals and nursing homes. The joint venture provides an ideal ground companion to the ARCH (Area Rescue Consortium of Hospitals) helicopter service that was established earlier this year by Barnes, The

University Hospital and St. John's Mercy Medical Center.

"The Abbott affiliation enables us to provide a comprehensive, well-coordinated ground support system in addition to the established air service to improve continuity of care when patients are transferred from local communities to Barnes for treatment," said Mark Weber, a Barnes vice-president. "In addition, Abbott will be strengthened by the commitment of another teaching institution to assure the quality of ambulance services provided. The relationship between Abbott and the area's two teaching institutions will create an unparalleled level of expertise in ambulance service."

Abbott Ambulance, founded in 1969 and purchased in 1984 by St. Louis University Medical Center, is one of the largest ambulance services in Missouri.

Assessment center offers gallstone lithotripsy

A gallstone assessment and treatment center being established at Barnes Hospital will house a lithotripter capable of crushing gallstones lodged in the gallbladder itself. When the center opens in February it will be the first in the bi-state area to offer this technology and one of a small number nationwide.

Biliary lithotripsy, considered impossible just a few years ago, uses the same principle as kidney stone lithotripsy, a technology introduced at Barnes in 1985 as a joint venture with several other hospitals. The lithotripter produces shock waves that are concentrated on a target area to crush gallstones without the need for surgery. Most patients receive oral bile salts after lithotripsy to dissolve any remaining fragments within the gallbladder.

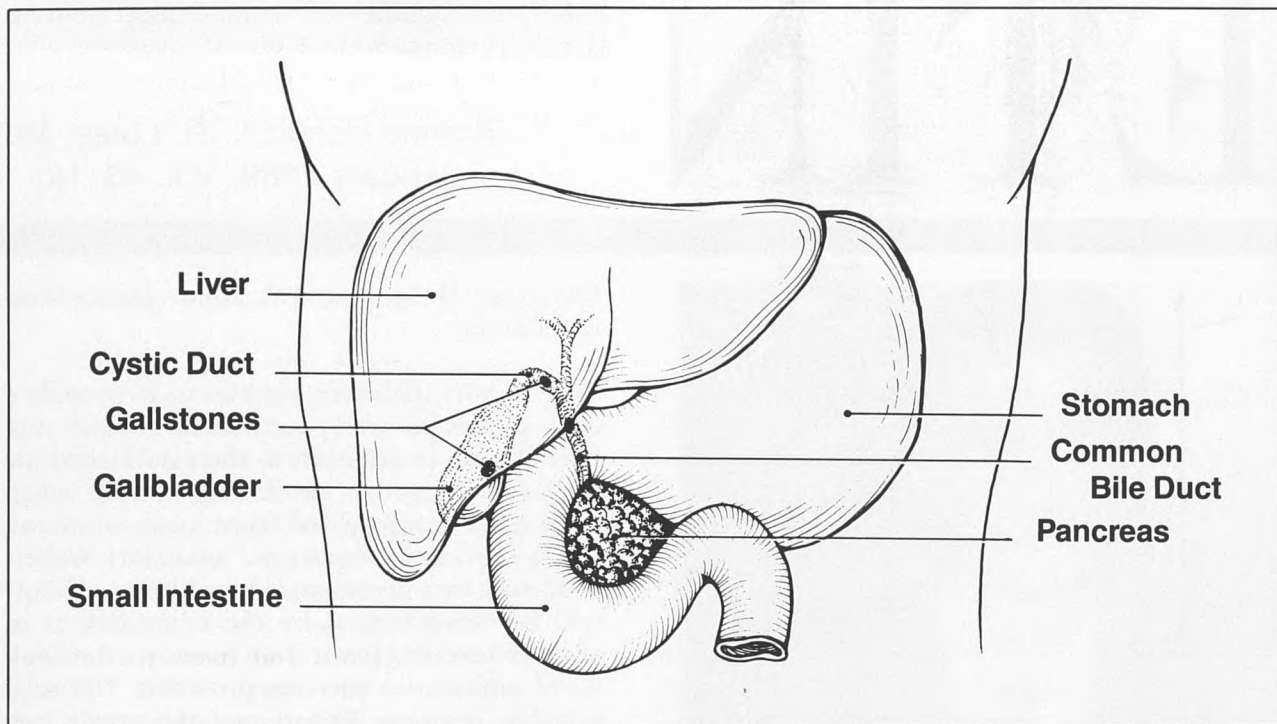
Barnes has been chosen as one of seven centers throughout the United States to conduct clinical trials of the Northgate extracorporeal shock wave lithotripter prior to FDA approval for general use. The other hospitals involved in the one- to two-year study are the University of Southern California in Los Angeles; Mayo Clinic in Scottsdale, Arizona; Graduate Hospital of the University of Pennsylvania in Philadelphia; Sammy Davis, Jr. Hospital in Newark, New Jersey; the University of Oregon in Portland; and the Medical College of Wisconsin in Milwaukee.

The gallstone assessment center will include specialists in surgery, gastroenterology and radiology, and will have a full range of treatment alternatives available so that each patient referred to the center can be offered the most appropriate treatment. In some cases that will be lithotripsy, in some it will be medication and in some it will be surgery or endoscopic manipulation. The assessment team is led by Drs. Nathaniel J. Soper and James M. Becker, gastrointestinal surgeons, Dr. Steven A. Edmundowicz, gastroenterologist, and Dr. Bruce McClellan, radiologist.

(continued on page 2)

Gallstone lithotripsy

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Gallstones can remain in the gallbladder for years without causing any symptoms, but serious problems can occur if the stones move into the common bile duct. The biliary lithotripter can break up the stones in the gallbladder.

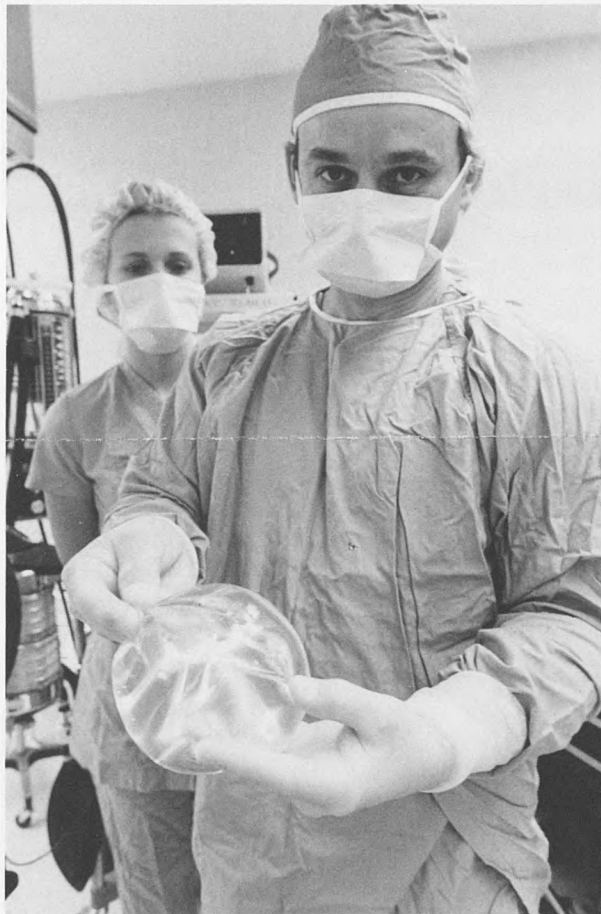
Dr. Soper points out, "Biliary lithotripsy is being evaluated and not all patients will be suited for it. Some patients may prefer lithotripsy over surgery because of the minimum recovery time. For others, surgery will remain the treatment of choice despite a several week recovery period."

Gallstones affect approximately 20 million people in the United States. The typical patient is a woman over age 40, who has had children and is somewhat overweight. Gallstones are often asymptomatic and may remain undetected. However, gallstones sometimes become impacted in the gallbladder or the ducts into which it empties, causing painful inflammation or cholecystitis. The lithotripter at Barnes will be capable of breaking up stones in the gallbladder.

Current treatment for gallstones is cholecystectomy, or removal of the gallbladder. However, alternative therapies may be chosen, depending on the type of stone (cholesterol or pigment), size and number of stones and severity of pain. Treatment for patients with acute cholecystitis frequently requires a cholecystectomy. Cholecystectomy is the second most common type of abdominal surgery and requires a hospital stay of five to seven days followed by a recovery period of four to six weeks.

To be considered as suitable candidates for treatment with the Northgate lithotripter, patients must be older than 18 years, have symptomatic gallstones greater than 4 mm. in diameter in the gallbladder, and not be acutely ill or suffering from serious unrelated illnesses. Lithotripsy is expected to be indicated for about 15 to 30 percent of all patients with gallstones. Initially, patients will remain in the hospital for 48 hours following lithotripsy and will undergo followup studies to assess the effectiveness of this new therapy.

Dr. Soper envisions the center as a referral service to help area internists, general practitioners, surgeons and gastroenterologists manage their gallstone patients more effectively. Communication systems are being installed that will facilitate access to the center by referring physicians and speed up the flow of information back to those physicians following assessment of their patients. Quick access is available to physicians through Barnes' toll-free referral number, 1-800-392-0936.



Traditional breast implants, such as the one displayed by Dr. Young, have a density similar to that of bones.

New model for breast implant being developed

A new prototype for a breast implant that allows x-rays to penetrate it, thus improving the quality of mammography and making it easier to detect certain small breast tumors in women, is being developed by Barnes doctors in collaboration with Washington University's Mallinckrodt Institute of Radiology (MIR). According to Barnes plastic and reconstructive surgeon Dr. V. Leroy Young, the model must now be further tested in the laboratory prior to application to the Food and Drug Administration (FDA) for approval to begin clinical trials.

"Implants in no way increase a woman's risk for breast cancer, and do not interfere with normal tactile breast examination," Dr. Young said. "What we have found, however, over the last several years as mammography has become increasingly valuable in early detection, is that the low dose x-ray cannot penetrate the implant.

A radiolucent implant would relieve any such concerns."

The silicone substance used in breast implants can make it harder for radiologists to read mammograms and detect tumors. In a recent interview in the *St. Louis Post-Dispatch*, Barnes and MIR radiologist Dr. Judy M. Destouet said the problem has been that "breast implants have the same density as bones. In using implants, we're asking x-ray machines to penetrate something as dense as bone, and that's impossible. So to be absolutely certain, we need a biocompatible breast implant that's radiolucent—which means it will allow x-rays to penetrate it completely."

According to a panel of advisers to the FDA, about two million women have had silicone breast implants, with about 130,000 more getting them each year. Most of the implants are for the enlargement of the healthy breast while the rest are for breast reconstruction after mastectomy. The implants consist of thick envelopes filled with silicone gel, saline or a combination of both.

23-hour admission program expands

A wider variety of medical services is available on an outpatient basis due to recent expansion of Barnes' 23-hour admission program. The program, which began in October 1987 under the direction of the Barnes nursing service, is designed to provide optimal care to outpatients whose conditions warrant further observation after surgery or for evaluation prior to inpatient admission. The 23-hour admission program is less costly and usually more convenient for the patient than an inpatient hospital stay.

The program, which was originally developed for patients requiring eye-related procedures on an outpatient basis, now allows outpatients to also receive certain types of genitourinary, chemotherapy, obstetrical and cardiac catheterization services. The 23-hour registration begins from the time the patient is registered in outpatient surgery or the admitting department. For example, if a patient registers at 8 a.m., he or she will be discharged from the hospital by 7 a.m. the next day. If the patient has to stay past 24 hours because of his or her medical condition, the patient will be admitted as an inpatient.

There are no age limits for the program and all healthcare insurance plans to date cover the program. To learn more about the Barnes 23-hour admission program, call the pre-admitting department at (314) 362-1167 weekdays between 8 a.m. and 4:30 p.m. or Saturdays between 8 a.m. and noon.

Volunteers sought for dermatitis study

Researchers at Washington University School of Medicine are seeking volunteers to participate in a study testing a new treatment for atopic dermatitis (AT), a chronic itchy rash that often appears behind the knees, in the creases of the elbows or around the neck.

To be eligible for the study, participants should be over the age of 18. Women volunteers should be postmenopausal or unable to have children because of a tubal ligation. Volunteers will apply the test drug to their rash three times a day and will be seen weekly for no more than six weeks. Call (314) 362-2643.

New program focuses on OB patients

Providing transportation to Barnes Hospital for women with high-risk or problem pregnancies is the purpose of a new program under the direction of Barnes women and infants services. Women experiencing pregnancy-related problems who live within a 150-mile radius of Barnes may be transported, by ambulance or by ARCH helicopter if necessary, to the hospital for medical treatment upon recommendation of the patient's doctor.

"The program was created as part of Barnes' ongoing commitment to provide excellence in healthcare services to the region," said Barnes maternal transport coordinator Judy Wilson. The program offers on-location workshops to inform labor and delivery staffs at community hospitals and health centers about the state-of-the-art services at Barnes for women with problem pregnancies. Referring doctors are kept informed about their patients' conditions.

Doctors may reach a Barnes perinatologist to discuss a patient at the perinatal hotline number, (314) 362-6747. Patients may call (314) 362-MOMS for more information about the program.



Kathleen Garst (right) meets with nursing office receptionist Jeanette Gericke.

Garst named director, critical care nursing

Kathleen Garst, R.N., has been named director of critical care nursing at Barnes Hospital. Her management responsibilities include overseeing the medical, trauma, burn, surgical, respiratory, neurosurgery and cardiothoracic intensive care units, acute dialysis and the bone marrow transplant unit.

Ms. Garst comes to Barnes following 10 years at St. Louis Children's Hospital, most recently as director of general nursing care and pediatric intensive care. Other former posts she held at Children's Hospital include director of general nursing care; manager of patient care; nursing instructor in pediatrics, and staff nurse in intensive care.

She received her bachelor of science degree in nursing from the University of Missouri at Columbia in December 1977. Ms. Garst also earned a master of science degree in nursing administration from St. Louis University in May 1987.



Gloria Harris joined Barnes Hospital as a clerk in the nursing office in 1968. "I was very fortunate that the kidney I received from my brother was so compatible," she said.

Barnes employee marks transplant anniversary

This past holiday season was extra special for Gloria Harris, clerk/typist in the Barnes nursing office. In December she celebrated the 20th anniversary of her kidney transplant.

"It's amazing to think it has really been that long," Gloria said. "I remember that day so clearly—December 3, 1968. That was the day Dr. William Newton transplanted a kidney from my brother, Robert, into me. The transplant gave me a new lease on life and I've been doing well ever since." Ms. Harris began her fight against renal (kidney) failure in 1964.

"I was having terrible pain in my abdomen and I noticed blood in my urine," she said. "I came to Barnes Hospital for tests and learned I had a non-malignant cyst on one of my kidneys that was causing my problems. Barnes doctors removed the cyst around Christmastime that year, but my kidneys continued to deteriorate. I had iron shots, began a low-salt diet which I still maintain, and took other medication to combat it, however. Renal failure runs in my family.

"In 1968, doctors told me I would have to go on kidney dialysis or else have a kidney transplant. Kidney transplantation was a very new procedure at Barnes at that time, and I was frightened by it. But I thought it would be better than the dialysis machine."

Ms. Harris battled urinary tract infections in the months following the operation. She will be on anti-rejection medication for the rest of her life. "I'm very happy with my life. You won't see me outside playing football or anything really strenuous like that, but I'm only moderately restricted in the kind and amount of activity I can do. My brother is doing very well, too."

Ms. Harris joined Barnes Hospital as a clerk in May 1968. "I started here just a few months before my operation, so I celebrated a double

anniversary in 1988," she said. She is currently under the care of Barnes general surgeon-in-chief Dr. Charles Anderson, who has performed hundreds of kidney transplants since joining Barnes Hospital in the 1970s. Dr. Newton, who died several years ago, performed the first kidney transplant operation at Barnes in 1963.

"Gloria is truly a remarkable person," Dr. Anderson said. "At the time her surgery was performed we had a success rate of only 50 percent at one year. Now, because of more refined procedures and better drugs, the success rate has climbed to nearly 90 percent."

Theda Guzman, R.N., Barnes kidney transplant coordinator, remembers Ms. Harris' surgery. "Gloria was the 13th kidney transplant patient in what was at the time the five-year history of the Barnes kidney transplant program. I still keep tabs on her. As kidney transplant surgery has progressed, more and more procedures have been performed at Barnes. We did 110 kidney transplants in 1987 alone," she said. A total of 930 kidney transplants have been performed at Barnes.

Researchers urge caution on Alzheimer's drug THA

A clinical study of the drug THA for the treatment of Alzheimer's disease has received renewed interest because of a special case reported in the *Times of London* last month. The newspaper said that Nobel laureate Archer Martin, 78, himself an Alzheimer's patient, had shown some improvement after taking the drug. But researchers here are cautioning against over-optimism and emphasizing that, to date, the drug appears to offer only a minor improvement of symptoms for some patients.

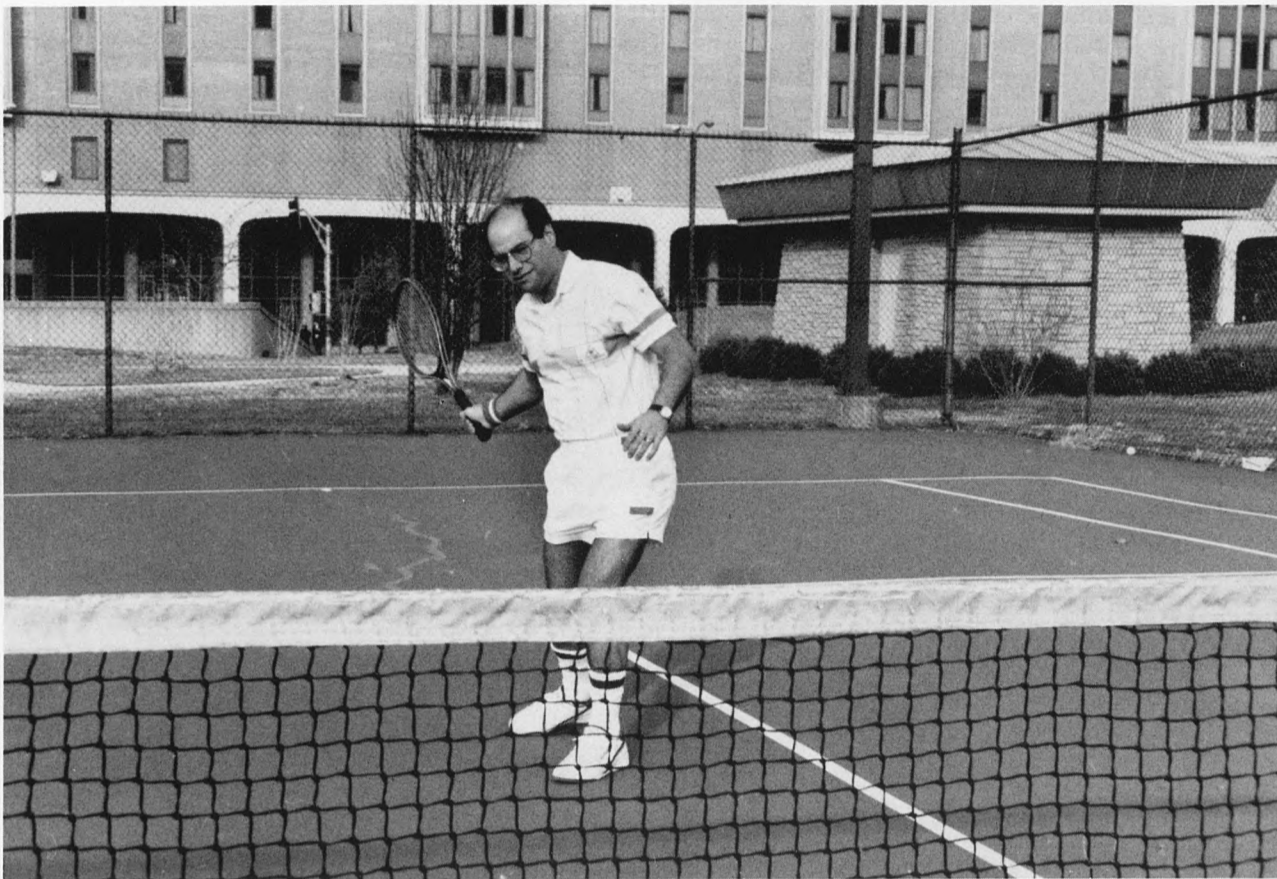
The Alzheimer's Disease Research Center here is one of 17 in the United States conducting clinical trials of THA, tetrahydroaminoacridine. Dr. John Carl Morris, Barnes neurologist and chief investigator, said the trial was funded by the National Institute on Aging in 1987 after a report of effectiveness by an investigator in California.

There is no cure or proven treatment for Alzheimer's, so the initial reports about THA have raised hopes. Dr. Morris said about 40 percent of Alzheimer's patients participating in the trial at Barnes and Washington University School of Medicine show some improvement in symptoms, but the changes are relatively mild and the final decision about the drug's potential benefit must await completion of the study. He added that THA causes a change in liver enzymes in about 20 percent of patients, who then must stop taking the drug because of the possible risk of liver damage.

Alzheimer's disease affects 10 percent of all people age 65 or older and claims the lives of some 100,000 Americans each year. Victims suffer from progressive memory loss, loss of intellectual powers, personality changes and eventual loss of control of their bodies. About 66,000 Alzheimer's sufferers live in Missouri, half of them in the St. Louis area.

Additional volunteers are sought for the THA study. For more information, call (314) 362-2683.

Beating the



Bill Behrendt plays tennis to stay in shape throughout the year.



Helen Russell enjoys baking during the winter.

We've all felt it. The excitement of the holidays is a memory. The weather makes us wonder if spring will ever arrive again. We're tempted to crawl under the covers until April. The winter doldrums have set in.

The let-down following the busy holiday season and the cold, often gloomy weather can trigger the winter blues for some people, says Barnes psychiatrist Dr. Richard Hudgens. "It's important to stay active during the winter," he said. "When the sun is shining, even on cold days, get out and take advantage of it. Take walks and visit friends."

If keeping active is the key to avoiding the winter doldrums, a sampling of Barnes employees proves that they have found the answer. In fact, many say they are too busy to feel down.

Barnes laundry services employee Jim Hodde is so busy he says sometimes there just aren't enough hours in a day. "I spend these winter evenings and weekends tinkering with my radio-controlled model boats," Mr. Hodde said. "Model-building is a hobby I became interested in many years ago. I used to build model boats, cars and airplanes, just like a lot of boys. I never lost my interest in the hobby, but it's a lot more sophisticated and, yes, a lot more expensive now. I like the boats more than anything else, though." Mr. Hodde builds the boats during the winter from kits he buys at hobby shops, and some of them take months to build. "I built a replica of the battleship *U.S.S. Missouri*, the famous ship on which Japan officially surrendered to the United States at the end of World War II in 1945. It's my prize ship. The fastest boat I have is a radio-controlled World War II vintage PT boat.

"Whenever I feel those winter blahs coming over me, I just go and work on the boats. I think

people need a hobby of some kind to fight that closed-in feeling during the winter," he said.

Phyllis Dickerson doesn't let the winter doldrums get her down either. In fact, she enjoys the winter weather. Mrs. Dickerson, an orthopedic surgery social worker, said, "My husband and our 14-year-old daughter don't hibernate just because it's cold outside or there's slush and snow on the ground. The three of us take long walks in Forest Park, toss snow at each other and just have simple fun. You don't have to spend a lot of money to enjoy the simple pleasures."

Enjoying the simple pleasures may be a good way to avoid the blues for some. Others go shopping to amuse themselves.

Safety coordinator Betty Falkenberg said, "Sometimes during this time of the year, I feel like the walls are starting to close in on me. That's when I just get out and do something. That usually means shopping!"

"Yes, winter can get you down but I don't sit and dream about last summer," said Bill Behrendt, vice-president of human resources. He beats the winter blues by doing what he does all year long . . . playing tennis. "I love to play tennis no matter what time of the year it is. If it's at least 35 degrees outside, I'll get out on the courts, and when it gets too cold, I play inside. Playing tennis is a great way to stay in shape throughout the year."

Some employees, like Gregg Blumenfeld, combine a hobby and a sport activity. Photography and bicycling are his main diversions during these cold months. Mr. Blumenfeld, Barnes media services manager in the department of education and training, said, "Sometimes it feels like things go into neutral during winter

while we wait for spring to arrive. It doesn't have to be that way, though, so I get out my camera and shoot some outdoor photos. Winter scenery is often beautiful and you can really get some good photos."

A winter vacation is the ideal for employee assistance coordinator Linda Billington. "Last year I went to Sanibel Island, Florida, to get away from winter's gloom." When she's here, though, Mrs. Billington enjoys walking outdoors. I go to Tower Grove Park three or four times a week to do some brisk walking. It's great exercise."

Helen Russell, head nurse on division 14300, also finds brisk walking a great way to beat winter. "I'm out walking three or four times a week. It's great for the cardiovascular system," Mrs. Russell said. "I do a lot more baking during the winter, too. It's nice and warm in the kitchen and that makes everything very cheery."

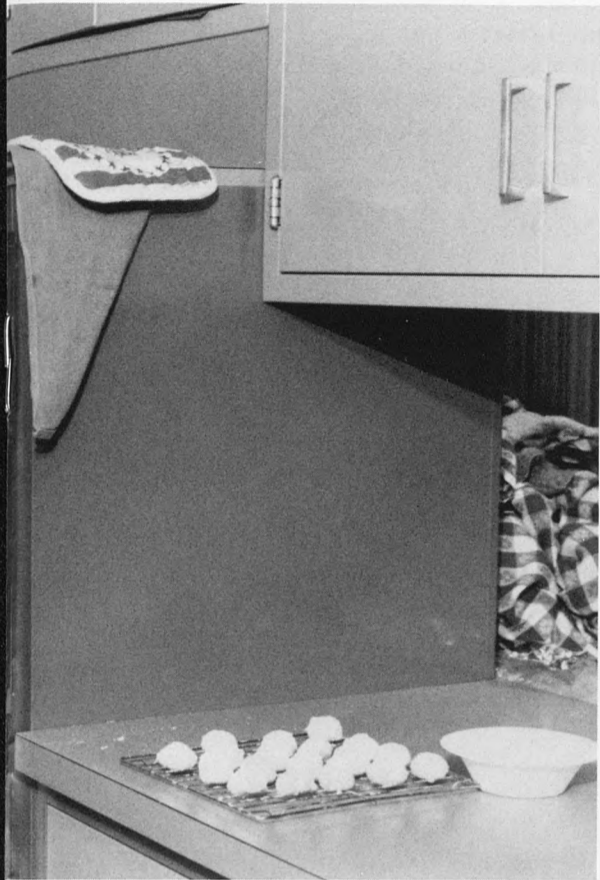
"It's also good to have plenty of friends around. I'm very active at my church. All of this combined sure helps me beat the winter blues."

"I'm busy visiting nursing homes in the winter," said OR certified technologist Thelma Stocking. "When the weather's bad, those folks can't get out and they count on me to bring them the things they need. I love to go as long as the streets aren't too icy," she said.

"I also like helping new folks in the OR. We hold workshops and educational activities once a month as part of our certified tech activities. So, I keep very busy during the winter months."

Like some of the other Barnes employees, sports is the answer for administrative systems manager Mark Drewel. "I fight winter melancholy by playing basketball, volleyball and soc-

Winter Blues



Gregg Blumenfeld rides his bicycle even in inclement weather.

cer. Staying active like that is a great remedy for the cold weather doldrums."

Getting to a warmer climate as often as she can is how plant engineering secretary Jerri Jones beats the winter blahs. "I really love Las Vegas. In fact, I just got back from there a few weeks ago. The bright lights, the bustle of the city, the shows and the casinos are invigorating," Ms. Jones said.

"Get me a deck of cards and I'll play anytime!" says Janice Johnson, LPN on division 4400. "I always find time to go shopping with friends and stop and chat with other employees. Life is meant to be enjoyed."

Although keeping active is a key to beating the blues, occasional feelings of melancholy are natural. But it's important to distinguish such feelings from more serious episodes of depression, notes Dr. Hudgens. "It's as important to diagnose depression as it is to diagnose any other medical disorder. If left untreated, depression can have serious consequences in a person's life."

An awareness of possible symptoms of clinical depression can help lead to treatment if necessary, he adds. Such symptoms include a prolonged low mood or sadness; tearfulness or crying; indecisiveness and difficulty in concentrating; a focus on the past, brooding or thoughts of death; change in eating habits; indifference to friends, family, hobbies or job, and disturbance of sleep patterns.

Help for persons experiencing emotional problems is only a phone call away through a psychiatric information and evaluation phone line at Barnes Hospital. The service, available by calling (314) 362-6090, provides a convenient way to access Barnes' psychiatric expertise and locate resources through a free evaluation.



Jim Hodde spends winter evenings working on his model boats.

Media spotlight

As a national leader in patient care and medical research, Barnes serves as an information resource center. During 1988, more than 1,200 queries from broadcast and print media representatives were made to the public relations department requesting that Barnes medical and professional staff explain current healthcare concerns and discoveries. Highlights of the media's coverage of Barnes during the last month include the following:

Women have **fatal heart attacks** more often than men and die from the first attack more often, according to a study presented at the American Heart Association national meeting November 15. Dr. **Scott M. Nordlicht**, Barnes cardiologist, was asked by KSDK-TV health reporter Tom O'Neal for perspective. Dr. Nordlicht said the study points out that while younger women have a lower risk than men of heart disease, by the time women reach their late 40s, the risk is about the same. The good news, said Dr. Nordlicht, is that both women and men can greatly reduce their risk through exercise, diet and abstinence from smoking.

Hope for **patients who suffer from depression** was expressed by Dr. **Samuel B. Guze**, chief of psychiatry, in a special edition of the Public Broadcasting System (PBS) TV series, "The Mind," November 16. Depression that is abnormally severe or lingers may have a medical cause and can be successfully treated. Other psychiatrists interviewed included Drs. **David M. Conner** and **Daniel Dye**. A PBS film crew spent nearly two weeks at Barnes Hospital and Washington University School of Medicine in 1987 recording segments for the program.

Chronic wounds that patients may have kept hidden under bandages for many years are responding to therapy in the Barnes wound healing center, Dr. **Thomas A. Mustoe**, plastic/reconstructive surgeon and center director, told KTVI-TV reporter Lisa Allen November 17. Dr. Mustoe said the clinic's approach of educating the patient about self-care, application of medicine and surgery when necessary, has had dramatic results. Chronic wounds, especially in the legs and feet, can be a complication of diabetes or circulatory impairment. Dr. Mustoe said one patient who showed great improvement had had a lower leg wound for more than 20 years.

Diabetics can enjoy traditional holiday foods such as desserts and even turkey and dressing by altering recipes, **Mary Ellen Beindorff**, Barnes registered dietitian, explained in a special report on Cable News Network (CNN) November 20. A CNN news crew covered a special cooking class for diabetic patients. Ms. Beindorff explained that sugar substitutes and alterations in fat content of foods such as dressing and appetizers can produce tastefully pleasing results.

Dr. **Roy H. Petrie**, obstetrician/gynecologist and head of maternal/fetal medicine, was interviewed November 22 for a KSDK-TV "Cover Story." Dr. Petrie said 80 percent of **women who have had caesarean births** and wish to have the next child by vaginal delivery are successful at Barnes. He explained that vaginal delivery is preferable because it does not carry the risk of general anesthesia and surgery, and it also offers the intangible reward of natural birth.

Dr. **V. Leroy Young**, Barnes plastic and reconstructive surgeon, and Dr. **Judy Marie Destouet**, radiologist, discussed research to develop a **new type of breast implant** in an interview with Roger Signor of the *St. Louis Post-Dispatch* November 27. The doctors are investigating an

implant that would allow mammography x-rays to pass through it, unlike silicone, which can make a mammogram more difficult to interpret.



Fireplaces are cozy but can be hazardous if ill-maintained.

Safe winter heating key to burn prevention

"Kerosene heaters, wood-burning stoves and other home heating equipment can be extremely dangerous if they are ill-maintained or used improperly," warns Bev Weber, head nurse in the Barnes burn center. "Many of the burn patients we treat in the winter are here because their heating equipment caught fire and ignited their homes. Or, the fuel they were using to operate the equipment exploded near them."

Whatever type of heating appliance is being used, from a space heater to a central home furnace, should be operated in compliance with the manufacturer's instructions, according to Ms. Weber. "Some of our patients are injured in gas explosions as they attempt to light the pilot light in the furnace. A lighted match can ignite the fumes around the pilot. Only a qualified service technician from the gas company should light the pilot," she said. "As for kerosene heaters, owners should read the accompanying instructions and only use the recommended grade of kerosene. Never use gasoline in kerosene-burning equipment. Gasoline can cause an explosion when lit."

Overloaded electrical wiring can also cause home fires. "This is especially true in older homes, where the insulation around the wiring becomes cracked and frayed with age. Care should be taken not to overload the wiring," says Ms. Weber. "Built-in fireplaces can also be dangerous if left unattended. Sparks can ignite the floor or the carpeting in front of the fireplace."

Hospital notes

Dr. **Martin Jendrisak**, transplant surgeon, has been awarded a research grant totaling more than \$330,000 from the National Institutes of Health (NIH). Dr. Jendrisak will use the five-year grant to study kidney transplantation rejection by focusing on how the body's immune system is affected by the molecules produced during fatty acid metabolism.

Dr. **Terry Early**, psychiatrist, will discuss "an integrated model of multi-leveled pathology in schizophrenia" as a guest speaker for the Missouri Institute of Psychiatry January 20 at the St. Louis State Hospital Complex. The lecture is part of a program sponsored by the Univer-

sity of Missouri at Columbia School of Medicine.

Diagnosis and management of diabetic retinopathy was the subject of a lecture by Dr. **M. Gilbert Grand**, ophthalmologist, October 27 at Blessing Hospital in Quincy, Illinois.

Terry Jo Gile, assistant administrative director of the laboratories, participated in a discussion on hospital toxic waste disposal last month at a St. Louis University Medical Center community health seminar. The discussion included an overview of the Hazardous Waste Bill.

Penny Neale, founder and president of the SHARE breast cancer support program, has been elected to the board of directors of the National Coalition of Cancer Survivorship.

Community calendar

Monday, January 9

"I'm Important Too!" sibling preparation classes help parents and their children ages 2-6 get ready for the new addition to the family. Children practice holding, feeding and diapering lifelike dolls and take a trip to the nursery during this one and one-half hour class taught by nurse-educators and social workers. Registration is \$6 per child. Call (314) 362-MOMS.

Tuesday, January 17

Prepared childbirth classes are offered at Barnes as a six-week program taught by registered nurses for mother and coach. The series includes information on Caesarean birth and a tour of Barnes' delivery and maternity facilities. Monday and Wednesday classes are also available throughout the year. Classes meet from 7 to 9 p.m. in room 228 of the Barnes Hospital School of Nursing. There is a \$40 registration fee. Call (314) 362-MOMS for more information.

Wednesday, January 18

The latest advances in heart surgery will be the topic of this month's free "Ask the Doctor" seminar at 7 p.m. in the East Pavilion Auditorium at Barnes. Dr. Michael Pasque, cardiothoracic surgeon, will discuss new technology in heart surgery, including procedures from bypass to transplant, as well as who is a candidate for surgery. Free parking is available in the Barnes subsurface garage. Reservations are required; call (314) 362-5290.

Wednesday, January 18

What every diabetic needs to know about foot care will launch the 1989 spring diabetes lecture series. Dr. Vilray P. Blair III, orthopedic surgeon, and Delores Drury, R.N. and foot care specialist, will be the speakers. The free lecture will begin at 7 p.m. at the Tesson Ferry Branch of the St. Louis County Library, located at 5676 S. Lindbergh in south St. Louis County. Call (314) 362-1390 to register.

Saturday, January 21

Grandparents anxiously awaiting arrival of the new baby in the family can refresh their child care skills at an informal two-hour class led by Barnes maternity nurses. Recent trends in prenatal care, childbirth and infant care are discussed and a tour of the childbirth area is included. Call (314) 362-MOMS for information about charges and registration.

Tuesday, January 31

Coping with the stress of caring for a seriously ill family member will be the topic of a free community seminar presented by Barnes psychologist Mary Mondello, Ph.D. The seminar will begin at 7 p.m. at the Oak Bend Library, 842 S. Holmes in Kirkwood. Call (314) 362-5290 to register.

Friday-Sunday

February 3-5

The Working Women's Survival Show at the Cervantes Convention Center downtown will highlight Barnes' obstetrics, psychiatry, plastic surgery and nursing services at four booths. Barnes' professional staff will be on hand to answer questions. Each display will feature printed materials and workshops.

Monday, February 6

Prepared childbirth Monday series begins.

Tuesday, February 7

Male impotency is the topic of a monthly series of free, informal discussions hosted by Dr. John Daniels, male diagnostic specialist, at 7 p.m. in Barnes' East Pavilion Auditorium. The program includes a videotape and printed materials as well as time for individual questions and answers. Attendance is limited to allow ample time for discussion. Advance registration is required. Call (314) 362-5290.

Dr. Vilray Blair Jr. dies; surgeon emeritus

Dr. Vilray P. Blair Jr., orthopedic surgeon emeritus, died last month following a long illness. He was 75 years old.

Dr. Blair earned his medical degree in 1939 from Washington University School of Medicine and served in the Army during World War II. He joined the Barnes staff as an orthopedic surgeon in 1951, retiring with emeritus status in 1978.

Dr. Blair was the son of the late Dr. Vilray P. Blair Sr., a world-renowned pioneer in the field of plastic surgery. His son, Dr. Vilray P. Blair III, is a Barnes orthopedic surgeon.

Gifts to Barnes Hospital Funds

Listed below are the names of persons (honorees in **boldface**) who have made contributions during November 1988 to the funds at Barnes Hospital. Because Barnes is a private hospital and does not receive public funds, it relies on the gifts of individuals to continue providing quality patient care and to support research aimed at improving the lives of patients.

Donations to the hospital may be made through the Barnes Hospital Auxiliary or the development office. The Auxiliary coordinates the Tribute Fund, which is used for specific hospital projects.

Auxiliary Tribute Fund

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BULLETIN January 1989
Vol. 43, No. 1

Published monthly for employees, doctors, volunteers, Auxiliaries, donors, former and retired employees, patients and other friends of Barnes Hospital. Available at no charge by contacting the public relations department, Barnes Hospital, Barnes Hospital Plaza, St. Louis, Mo. 63110, (314) 362-5290. Circulation: 13,000 copies.

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Mr. Louis Schukar

Volunteers needed for hearing aid study

Determining the most appropriate amount of amplification needed to compensate for hearing loss is the goal of a new study by audiologists at Washington University School of Medicine. Persons who have worn an in-the-ear hearing aid for at least three months, either successfully or unsuccessfully, are needed to participate in the study.

Researchers say that several methods or formulas are currently used to measure the amount of volume amplification needed by hearing-impaired individuals, and because hearing aid manufacturers use various modifications of these formulas, it is possible for the same prescription to be interpreted in different ways by different manufacturers. Through the study, audiologists hope to find out which for-

mula provides the most accurate measure of the volume gain actually preferred by patients.

For more information, call (314) 362-7489.

Volunteers needed for hospice program

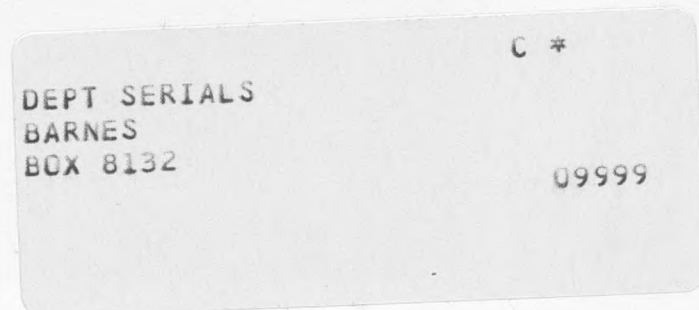
The Barnes Hospital hospice program needs volunteers to give emotional and respite support for several hours each week to terminally ill patients and their families, often in the patients' homes. The hospice program helps chronically ill patients and their families control the symptoms and pain of terminal illness and to accept the changes wrought by the dying process.

Volunteers will be trained over an eight-week period. For more information, call (314) 362-0838.

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One Barnes Hospital Plaza
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January 1989
Vol. 43, No. 1