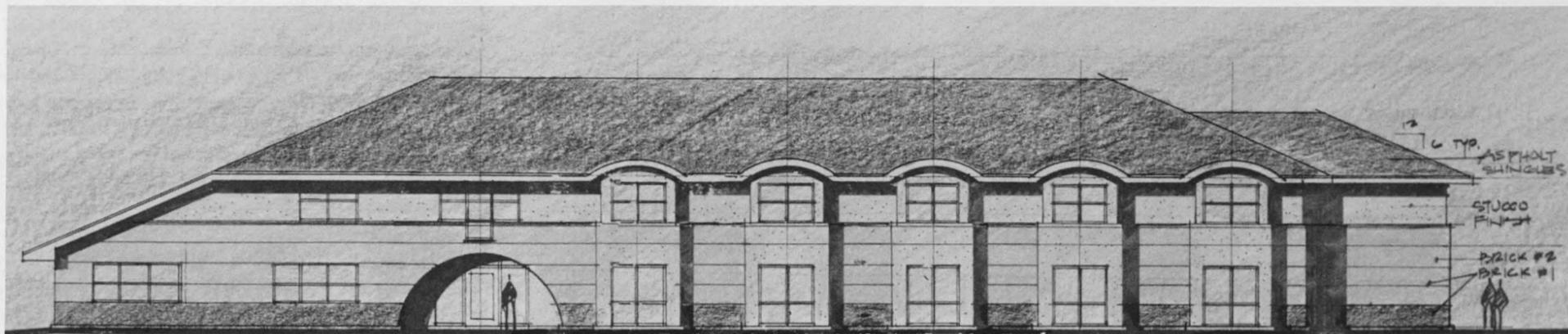


# BULLETIN

Barnes Hospital, St. Louis, MO  
December 1989, Vol. 43, No. 12



Mackey Associates, PC

## Barnes Lodge

*Groundbreaking expected in January*

## New Barnes Lodge will be innovation in healthcare

Just as Queeny Tower was a progressive concept when it was built in 1965, the new Barnes Lodge will be an innovation in healthcare that will meet the needs of Barnes patients into the 1990s.

Ground is scheduled to be broken for the new lodge in January. The 20-room, two-story lodge will provide affordable accommodations for extended-stay patients and their families. The homelike facility will be one of the first of its kind in the country to be built by a hospital.

Construction will be funded by a \$1.5 million

pledge from the Barnes Auxiliary. The lodge, scheduled to open next fall, will be built at 4535 Clayton Ave., on the site of a parking lot currently owned by Washington University.

The existing Barnes Lodge, a five-bedroom refurbished house on Clayton Ave., will be closed upon completion of the new facility.

When Queeny Tower opened in 1965, it represented the fulfillment of a vision in healthcare—a multi-purpose hospital tower that included a mix of hotel rooms, a fine restaurant, doctor's offices and modern patient

suites that was unheard of at the time.

Likewise, the concept of Barnes Lodge is an innovation in care for the 90s. The Auxiliary recognized the need for Barnes to develop a facility which would meet the needs of both patients and their families, especially those who come from throughout the Midwest for specialized treatment at Barnes.

"The lodge will fill a critical need—lodging for extended-stay patients and their families at an affordable rate," said Carol Weir, director of Social Work.

(continued on p. 2)

## Plans for Barnes West County announced; Dr. Korenblat appointed chief of staff

The acquisition of Barnes West County Hospital, formerly Faith Family Hospital, has been completed. The transfer of ownership became effective Nov. 13.

Planning and implementation of a full range of short-stay and diagnostic services will now proceed, according to Ken Smithmier, administrator.



Dr. Phillip E. Korenblat

"This is an exciting time. Over the next six months, many new services will open, and we will also implement marketing and public relations programs to inform the public about Barnes West County Hospital," Smithmier said.

Building of the medical staff has begun. Dr. Phillip E. Korenblat, an allergy and

immunology specialist, has been named chief of staff. Dr. Korenblat is president of the Barnes Hospital Society. He is a professor of clinical medicine at Washington University School of Medicine.

Smithmier said applications for medical staff are being accepted and reviewed. The staff will be predominantly Barnes doctors, with a mixture of full-time and private attending physicians, he said.

Services at Barnes West County Hospital will include emergency urgent care services, which have remained open throughout the transfer of ownership. The scope of emergency services and needs of the West County community continue to be evaluated.

Smithmier said other services will include an Asthma Center, a Sports Medicine Center and a cardiac/pulmonary rehabilitation service. A broad range of other services will include internal medicine, heart, cosmetic surgery and ophthalmology.

He added that the staffing requirements are also being reviewed. Additional planning includes a review of office space for physicians, general space requirements, and equipment.

## A MILESTONE

### *Barnes honors its 1,000th kidney recipient*

Barnes Hospital reached a milestone Oct. 9 when surgeons transplanted a kidney into the hospital's 1,000th recipient. Steven Alvey, 33, of Herod, Ill., was the history-making transplant recipient. The transplant team was led by Dr. Martin Jendrisak.

Alvey suffered from diabetic nephropathy, resulting in kidney failure. He had been on kidney dialysis since April 1988.

Dr. Douglas Hanto, Barnes director of transplantation, said that the transplant was not only a milestone for Barnes, but a benchmark of the prominence organ transplantation has gained as an accepted therapy.

Dr. William T. Newton performed the first kidney transplant at Barnes in 1963. "At that time, transplantation was still an unknown field," says Dr. Charles B. Anderson, Barnes general surgeon-in-chief, who served a residency under Dr. Newton beginning in 1971.

(continued on p. 2)

**Front Cover:** Cardinal shortstop Ozzie Smith was on hand Nov. 20 to help Barnes honor Steven Alvey as its 1000th kidney recipient. Ozzie presented Mr. Alvey, right, with an engraved bat and an autographed baseball. Observing the celebration is Dr. Douglas Hanto, director of transplantation.



Funding for construction of the new Barnes Lodge received a boost from Ada Kling, who donated \$5,000 to the new facility. Accepting the generous donation are Max Poll, Barnes president and CEO, and Norma Stern, president of the Auxiliary.

## Lodge (continued from p. 1)

"We found that most families who are here for less than a week could afford local accommodations or could stay at Queeny Tower. But for most patients undergoing transplants, radiation, chemotherapy and burn therapy, even the \$49 per night rate for Queeny Tower represents an impossible situation for the families," Ms. Weir said.

The average stay for patients in this group is about 25 days, according to Ms. Weir.

There is currently a waiting list for about 17 rooms for the existing lodge. That number is expected to grow with the increase in transplants being performed at Barnes.

Guests of the lodge will pay for their rooms on a sliding scale, with the highest rate covering the hospital's cost for the room. Guests also must live more than 50 miles from Barnes.

The new lodge will feature 20 semi-private bedrooms (two will be handicapped accessible),

## Heart procedure performed here for the second time in the world

A 21-year-old man has returned to his college studies in Nebraska after undergoing a heart procedure at Barnes that was performed for only the second time in history.

Joel C. Robinson, of Cozad, Neb., was suffering from "automatic left atrial tachycardia," which usually affects young adults and teenagers. The result is a life-threatening arrhythmia, a type of rapid, irregular heart beat.

To correct Mr. Robinson's arrhythmia, Dr. James L. Cox, cardiothoracic surgeon-in-chief, performed a left atrial isolation procedure, which shuts down the left atrium (one of the heart's four chambers), and allows the heart's normal pacemaker, located in the right atrium, to resume its normal responsibility of stimulating the heart.

Automatic tachycardia occurs when an errant electrical pathway within the atrium, one of the heart's chambers, uncontrollably fires electrical impulses at a very rapid pace. The resulting

## Prudential designates Barnes/WUMC as bone marrow transplant center

Barnes Hospital and Washington University School of Medicine have been designated by Prudential Insurance Co. to perform bone marrow transplants for its policyholders.

Through this selection, Barnes becomes a member of Prudential's "Institutes of Quality" program—a system which limits payments for expensive operations to a few institutions which demonstrate expertise in those procedures. Prudential selects hospitals for their volume of procedures, patients' survival rates and physicians' experience.

Barnes is one of seven medical centers across the country designated by Prudential to perform bone marrow transplants.

The move by Prudential to identify high-quality transplant programs represents a trend in the industry.

each with its own bathroom. Guests will share a large living room, a kitchen with four separate cooking areas, two TV rooms with game tables, two laundry rooms and a quiet room.

The lodge was designed to allow expansion by eight rooms at a future date.

Transportation to and from the hospital will be provided by the Clayton Avenue Building shuttle bus.

"We've been very excited about being a part of this project since it originated several years ago" said Norma Stern, president of the auxiliary. "We were very interested in providing a place where patients and their families could go to get away from the hospital environment. Throughout the design process, we've tried to duplicate the home environment as much as possible."

The large kitchen facility is designed to encourage guests to interact and offer each other support, said Ms. Weir.

arrhythmia can be very debilitating.

"In Joel's case, his heart was beating very fast and wearing out," said Dr. Cox.

Under normal arrhythmia circumstances, the short circuit in the heart is located through electronic mapping and the source of the arrhythmia is frozen using the tip of a nitrous oxide probe.

In Mr. Robinson's case, the heart defect was located in an area that couldn't be frozen.

Dr. Cox performed the first left atrial isolation procedure in 1982 at Duke University. "It's a rare problem, one that we see approximately once a year, even though Barnes has the biggest arrhythmia surgery center in the world," said Dr. Cox.

Barnes is the leading hospital in the world in terms of the number of surgical corrections of cardiac arrhythmias, a condition that affects an estimated two million people a year.

"More and more insurance companies are including transplants as covered procedures," said Steven Gularte, Barnes manager of Alternate Delivery Service contracts. "Almost all of them cover kidney transplants because they have been performed for so long, but some carriers are just beginning to consider transplants of other organs."

An increasing number of insurance companies are establishing "Centers of Excellence" programs to identify sites demonstrating excellence in complicated procedures. Barnes is listed as a "Center of Excellence" by several national insurance companies and is negotiating with about 15 other carriers.

"The first thing insurance companies look for in this area is how long an institution has been performing transplants and the number of operations it performs," said Mr. Gularte. "Barnes has a long history of performing many transplants and performs enough of them annually to be attractive to most insurance companies."

But volume alone will not place a hospital on "Centers of Excellence" lists. Hospitals also must demonstrate excellence in protocol and technical ability, and Barnes is strong in those areas, Mr. Gularte said.

The liver transplant program at Barnes was approved in 1988 by CHAMPUS, the Civilian Health and Medical Program of the Uniformed Services, and the heart transplant program was among the first 12 centers in the nation approved by Medicare.

Dr. Dan Dragalin, Prudential's vice president, group medical services, said Barnes was selected to participate in the network "because of its experience and success rate in performing allogenic (from a genetically-similar donor) bone marrow transplants.

## Transplants (continued from p. 1)

But each transplant advanced the knowledge of surgical techniques, immunosuppression and patient care and doctors were encouraged.

"A reasonable number of patients did very well. The most successful patients had amazing results," Dr. Anderson said.

The Barnes kidney transplant service became established as the leading program in Missouri. One of the first Barnes patients, Rayetta Salchow, who received her transplant as a teenager in 1965, is the longest-surviving transplant patient in Missouri. She continues to live a normal, active life.

Barnes was among the first centers to perform transplants from living donors unrelated to the recipient. These transplants are based on donor-specific blood transfusions, which were pioneered at Barnes. In this procedure, blood from the living kidney donor is given to the recipient before the transplant to reduce the possibility of graft rejection. This procedure is also used to enhance the success of living related transplants.

Kidneys were the first organs to be successfully transplanted. Kidney transplants at Barnes and other medical centers laid the foundation for other vital organ transplants.

## Dr. Ralph Dacey named neurosurgeon-in-chief

Dr. Ralph G. Dacey Jr. has been named neurosurgeon-in-chief at Barnes and head of Neurologic Surgery and co-head of the Department of Neurology and Neurological Surgery at Washington University School of Medicine.

Dr. Dacey has been professor and chief of the division of neurological surgery at the University of North Carolina at Chapel Hill since 1987. He replaces Dr. Sidney Goldring, who headed the department since 1974. Dr. Goldring is retiring from administrative duties as department head and will concentrate full-time on patient care and research activities.

Dr. Dacey's major clinical interest is in the treatment of cerebral aneurysms, arteriovenous malformations and basal skull tumors. His research focuses on cerebral arterioles (minute blood vessels in the brain) and their responses to various injuries or diseases. Currently, he is investigating cellular changes that occur in these blood vessels with age and hypertension.

He is a diplomate of the American Board of Neurological Surgery and the American Board of Internal Medicine, a fellow of the American College of Surgeons and the Stroke Council of the American Heart Association, and a member of numerous other professional organizations, including the American Association of Neurological Surgeons and the Congress of Neurological Surgeons.

He received his medical degree from the University of Virginia in 1974. He completed a residency in medicine at Strong Memorial Hospital in Rochester, N.Y., and a residency in neurosurgery at the University of Virginia. His training also includes a year as a postdoctoral fellow in physiology at the University of Virginia as an American College of Surgeons Schering Scholar. He was a faculty member at the University of Washington and the University of Virginia before joining the University of North Carolina faculty.



Medical professionals from around the world attended a symposium on lung transplantation hosted by Dr. Joel D. Cooper and the Barnes Lung Transplant Team. Also attending were some of the recipients of transplants performed by Dr. Cooper. They are, left to right, Patsey Ruff, Ann Harrison and Tom Hall, recipient of the world's first successful lung transplant.

## Sound processor approved after trial here

A new sound processor for the cochlear implant that makes communication easier for profoundly deaf patients has received Food and Drug Administration approval after being successfully tested in the Barnes Hospital/Washington University Medical School cochlear implant program.

The Barnes/WUMS program was chosen from 185 centers nationwide to test the Nucleus Mini-System 22 Cochlear Implant. Patients in the trial, which began in August, have experienced significant improvement in their speech comprehension and hearing ability with the new device.

"It's a quantum leap forward from which we were with the previous processor," according to Margaret Skinner Ph.D., WUMS director of audiology. "With the new processor, communication is easier. It takes less effort to listen and the conversation is much more fluent."

The processor is part of an implantable system used for patients with severe or profound hearing loss. The system consists of a string of 22 electrode implanted in the inner ear, or cochlea; a receiver implanted in the mastoid bone behind the outer ear; and the processor, microphone and transmitter, which is worn externally.

The processor digitizes, or divides, sound waves into signals which are transmitted to the electrodes in the cochlea. The electrodes then stimulate hearing nerve cells in the cochlea, producing the sensation of sound.

The new processor digitizes each sound wave in 150 steps, as compared with the 30-step digitization in the previous device. One patient likened using the new processor to having "a waterfall of information rushing over [him]," said Skinner.

During the trial, seven profoundly deaf patients who had been previously fitted with the older processor were given the new processor. They experienced an average 20 percent improvement in recognition when they listened to a tape-recorded list of words. But the new device can improve the patient's ability to pick up on speech rhythms as well, which can make speech comprehension easier, said Skinner.

"Patients' families tell me that they notice a big difference in comprehension with the new processor," said Skinner. "Most patients adapt to the new processor in a few days. But it takes several weeks to appreciate it fully. The patients aren't as tired, are more relaxed, and don't have to work as hard to communicate."

In addition to being more effective, the new processor is about half the size and weight of the old model.

All new cochlear implant patients will receive the new processor. All previous implant patients will be given the option of purchasing the new processor.

For more information on the Barnes/WUMS cochlear implant program, call (314) 362-7596.



New members of the Barnes Auxiliary were welcomed with a tea party held at the home of Robbie Beaty. Talking with Project Chairperson Marilyn MacDonald are new members, left to right, Erma Wood, Virginia Feinberg and Janette Rogers.

# Focusing on a special group of cancers

by Sharon Pentland

You could call them the forgotten cancers: cervical, ovarian and endometrial (the lining of the uterus). In the wake of public concern about breast cancer, cancers of the reproductive system have been pushed out of the mainstream of women's health issues. But they are still serious, sometimes terminal illnesses.

At Barnes Hospital, malignancies of the female reproductive system are the prime concern of one group of physicians. The Division of Gynecologic/Oncology, within the Department of Obstetrics and Gynecology, is solely concerned with this area of women's health. In fact, the division is staffed by highly-trained subspecialists—gynecologic/oncologists—who provide total care to women with reproductive malignancies.

Dr. Ming-Shian Kao heads this specialized division. Other members of the team are Drs. Marvin H. Camel, David G. Mutch, and part-time staff member Dr. Andrew E. Galakatos—all gynecologic/oncologists. They are among just 354 board-certified gynecologic/oncologists in the United States. And Barnes Hospital itself is one of only 28 institutions in the country with a training program for this subspecialty.

## Total Care

Why do women need such specialized care? Because they receive a total healthcare approach to their problem and that, says Dr. Kao, is simply better health care. "In a subspecialty like this we are concentrating on a relatively small branch of medicine. We know the biological behavior of the tumor better than anybody else and are able to provide total care for the patient. A medical oncologist is specialized in providing chemotherapy but may not be totally familiar with the surgical aspect of the treatment.

"Without the gynecologist, many patients will see a medical oncologist for chemotherapy, a gynecologist for examinations and perhaps



Remote afterloading is one form of treatment for cancers of the reproductive system. Barnes is one of only three facilities in the country which owns this type of equipment.



Within the Department of Obstetrics and Gynecology is a group of doctors dedicated solely to the diagnosis and treatment of cancers of the reproductive system. Members of the group are, left to right, Dr. David Mutch, Dr. Ming-Shian Kao, director; Dr. Marvin Camel and Dr. Andrew Galakatos.

another surgeon for the operation. A patient often will be seen by three or four different physicians—with everyone looking after one area only."

Gyn/oncologists are trained to provide the entire scope of treatment for a pelvic malignancy, including surgery, chemotherapy and radiation therapy—fields usually assigned to other medical specialists.

The training they receive can only be described as extremely rigorous. It includes a two-to three-year gynecology/oncology fellowship training program, after completing a four-year obstetrics and gynecologic residency training. Two additional years of clinical experience in treating pelvic malignancies following the fellowship program, and successful completion of both written and oral exams administered by the American Board of Obstetrics and Gynecology also is required.

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*Doctors in this division are among just 354 board-certified gynecologic/oncologists in the country. Barnes is one of only 28 institutions in the country which trains doctors in this subspecialty.*

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Gyn/oncology is a relative new subspecialty. It wasn't established by the board until 1973, but in nearly two decades, its importance has grown. In fact, any woman admitted to the Obstetrics/Gynecology Department at Barnes with a diagnosis of invasive pelvic cancer must have a gynecologist consultation.

## Cancers of the Reproductive System

The service presently sees about 400 new cancer patients a year. Cervical cancer heads the list. About 150 women will be diagnosed with the disease at Barnes this year.

Although the outlook for cervical cancer has improved tremendously in the past two to three decades, approximately 7,000 women die from it annually in the United States. More women in younger age groups are being diagnosed with

cervical cancer, and now the disease is thought to have a link to a virus, the human papilloma virus (HPV).

Annual Pap smears are still the most effective way to detect cervical cancer early. In fact, the Pap smear can often pick up the disease in its preinvasive (pre-malignant) stage.

"If the disease process is discovered and treated at that stage, then treatment usually has a 100 percent success rate," says Dr. Kao.

Besides cervical cancer, the gyn/oncologist diagnoses and treats cancer of the endometrium, ovary, and other less common malignancies, such as cancer of the vagina and vulva.

The disease that troubles gynecologists the most is cancer of the ovaries. At Barnes, 70 to 80 women are treated every year for this insidious cancer; only 30 percent survive it.

In the United States, an estimated 18,000 new cases of ovarian cancer are diagnosed each year, causing more deaths—11,000 annually—than any other cancer of the female reproductive system. There are no early symptoms, no screening tests, like the Pap smear, for early detection and this cancer spreads with deadly speed, says Dr. Camel. "When symptoms do appear, usually bloating and vague abdominal discomfort, approximately 70 percent are already in an advanced stage of the disease."

However, women who have regular, at least annual, examinations, have a greater chance of detecting an ovarian malignancy early. A skilled gynecologist can detect enlargement of the ovaries, signaling the possibility of a tumor.

The disease also has a genetic link and women with a mother, sister or an aunt with ovarian

cancer are considered high risk and should be checked every six months for a malignancy, says Dr. Kao.

### Diagnosis and Treatment

The gyn/oncologist uses a battery of sophisticated technology for diagnosis and treatment. CAT scans and ultrasound can detect the extent of disease and the MRI—magnetic resonance imaging—is being explored as a new diagnostic tool.

The Division of Gynecologic/Oncology also participates in an NCI (National Cancer Institute)-sponsored nationwide clinical study group, which provide the most up-to-date treatment protocols and experimental drugs for its patients.

The newest form of radiation treatment for gynecologic patients is remote after-loading. Barnes is one of only three medical centers in the country to own this state-of-the-art equipment, which is used to treat a variety of cancers.

The radiation implant equipment was imported from Holland by the Mallinckrodt Institute of Radiology in 1988 and installed in two Barnes nursing divisions. Remote after-loading allows the radioactive implant to be controlled from outside the patient's room, thereby reducing exposure to the professional staff and visitors. Radioactive pellets stored in a shielded container at the patient's bedside are placed and withdrawn through catheters via a computer located in the hallway.

Patients benefit from the use of remote after-loading because they can receive adequate nursing care and extended visits from friends and families during treatment.

### New Treatments

In addition to traditional cancer treatments—chemotherapy, radiation and surgery—patients may also undergo a relatively new treatment, a form of immunotherapy that uses biological response modifiers.

"Presumably, your body has abnormal cells which are developing throughout your life," Dr. Mutch explains. "Your immune system surveys

## Women's support group offers help

Patients who are being treated for gynecological cancers need the support of family and friends. At Barnes, there is an additional source of support—"Together"—the first support group in the St. Louis area for women with malignancies of the reproductive system.

Why a specialized cancer support group? "Women who have had a gynecologic malignancy have special needs," says Karen Gorman, RN, head nurse of Barnes' gyn-gyn/oncology nursing division. "There hasn't been as much public recognition given to these diseases and their affect on women as there has been on breast cancer and some other diseases. Most of these women feel alone. It helps them to be with other women who have gone through the same ordeal."

Ms. Gorman coordinates the monthly meetings with Alberta Hitchings, a social worker.

Many women, says Ms. Gorman, describe feelings involving a loss or change in sexuality after surgery and treatment for pelvic cancers. Virtually all of these patients initially describe themselves as being in a state of shock.

"Usually, referral and treatment occurs quickly and for most patients, a cancer diagnosis is difficult to comprehend," says Ms. Gorman. "Sometimes they're not capable of asking the questions they need to ask or of even understanding fully what's happening at the time of treatment. Often they report that it isn't until later, sometimes six months, that they realize what's happened to them."

Each meeting starts with a 20- to 30-minute program on specific topics and is followed by a sharing session. Ms. Gorman, Ms. Hitchings and an attending physician conduct the sessions. The most important message that Ms. Gorman wants each patient to realize at the support group: "They're not alone."

"I want them to meet women who are in the same situation," she says. "Then they can begin to help each other share some ways of coping with the diagnosis."

If you or someone you know could benefit by attending "Together", call Karen Gorman at 362-4040. "Together" meets on the first Tuesday of each month at Barnes Hospital. The programs are offered free of charge.

all the normal cells, finds abnormal cells and perhaps kills them before they actually become malignant. At some point, some abnormal cells may escape that surveillance system and they develop into cancer.

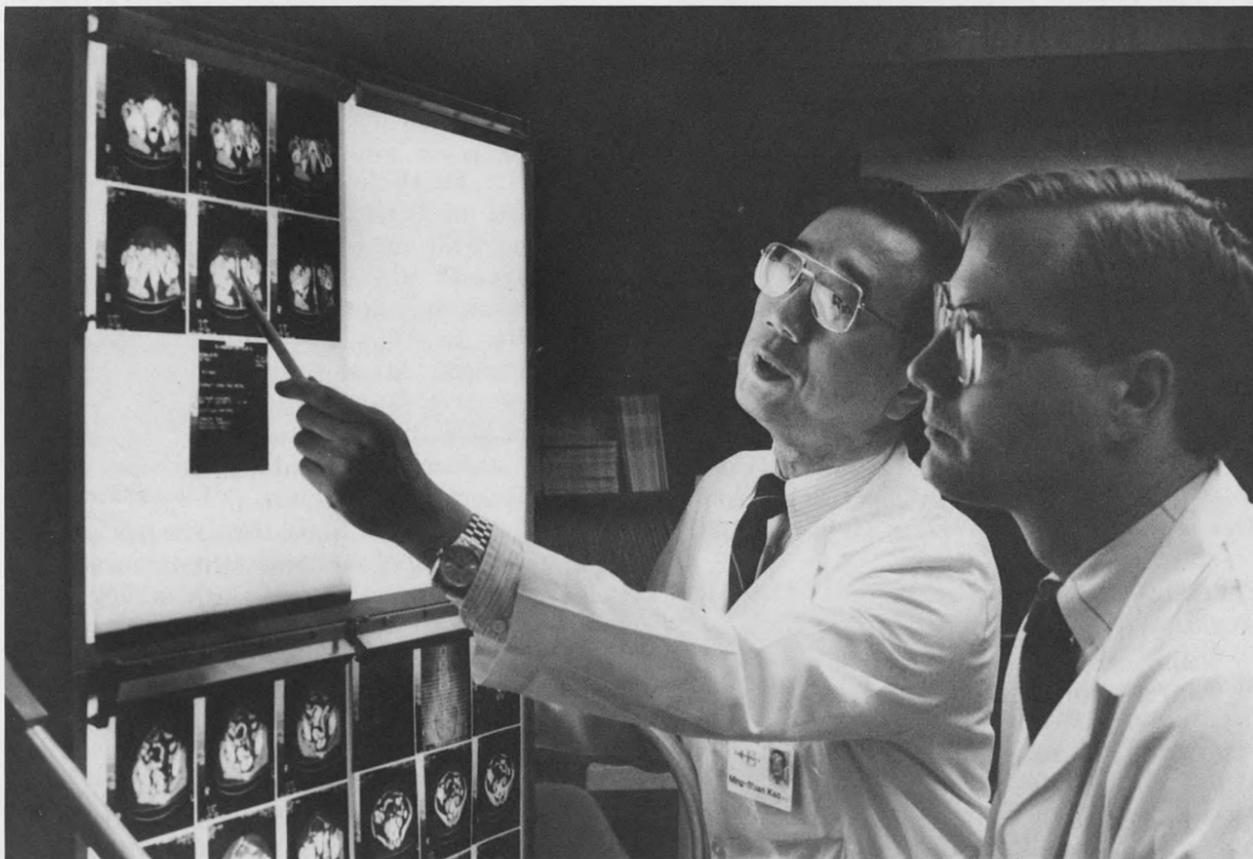
"We hope that by using biological response modifiers in large doses, perhaps we can improve the response rate by bringing in the body's own immune system to help us combat it," Dr. Kao said.

Working with the gyn/oncologists is John Collins, Ph.D., who is taking a close look at cancer immunology and its clinical applications. His current research projects are aimed at one of the biological response modifiers: tumor necrosis factors. These factors are produced by a group of cells called NC cells. About four years ago, Dr.

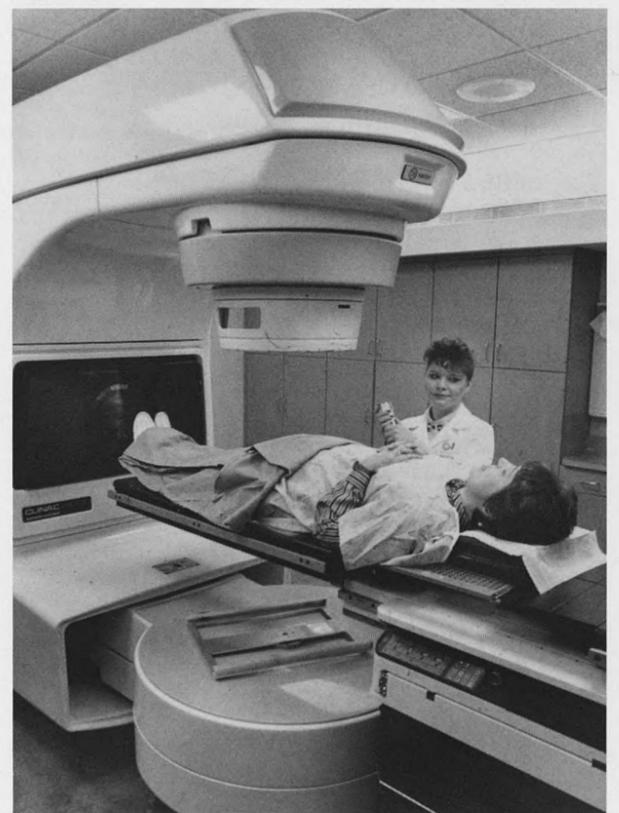
Collins and his associates in the division proved that human peripheral blood contains NC cells and that these cells killed tumor cells by using tumor necrosis factors.

"Right now we're looking at the different biological response modifiers like tumor necrosis factors and interferons and why some cells are more sensitive to it and others are not," says Dr. Kao. "If they're not sensitive to it, we want to know how we can overcome that resistance."

The investigations and clinical trials may open new avenues to understanding the nature of cancers of the female reproductive system. For thousands of women diagnosed with pelvic cancers, the work being pursued by the gyn/oncologists is crucial.



Dr. Ming-Shian Kao, left, and Dr. David Mutch are members of a special group of doctors who specialize in the diagnosis of pelvic malignancies.



Because of their specialized training, gynecologic oncologists are able to provide a wide scope of treatment, including surgery, chemotherapy and radiation therapy—fields usually assigned to other medical specialists.

# Community calendar

Wednesday, December 13

"Getting to the Heart of Diabetes" is the final topic in the 1989 free diabetes lecture series at the Oak Bend Library, 842 South Holmes, Webster Groves, Mo. Dr. Irl Hirsch, metabolic specialist, will talk about cardiovascular complications that can result from diabetes, and how to keep your heart healthy. To make reservations, call (314) DOC-TORS (362-8677).

Thursday, December 21

**Practical information on breast feeding** is provided in a two-hour class that teaches the art and techniques to new mothers. This program also is recommended for expectant parents who have not yet decided on breast or bottle feeding, as an aid in the decision-making process. Call (314) 362-MOMS for information.

Thursday, December 28

**The basics of caring for a newborn** are covered in a two-hour class for new parents. Information discussed includes bathing and dressing an infant, tips on how to soothe a fussy baby, infant safety issues, common concerns of new parents, and hints on how to play with and get to know the new addition to the family. Call (314) 362-MOMS for more information.

Tuesday, January 9

**Prepared childbirth classes** are taught by registered nurses at Barnes as a six-week program 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. Call (314) 362-MOMS for more information.

## Media Spotlight

### Liver transplant program in USA Today

The Barnes liver transplant service was depicted in USA Today Nov. 14. **Dr. Douglas W. Hanto**, organ transplant director, discussed a case involving a Tampa liver transplant recipient and his need for insurance coverage. Dr. Hanto said that the transplants are recognized by most, but not all, insurance companies as procedures which return people to active, productive lives. The recipient had returned to his job as a freight handler.

Morning rush hour drivers heard about the latest **cochlear implant** sound processor on KMOX radio Nov. 10. **Margaret Skinner**, Barnes audiologist, described the improvement in hear-

### Five honored with Knowlton Award

Five residents in internal medicine were honored Sept. 19 as the recipients of the Knowlton Incentive for Excellence Awards at a dinner at the Racquet Club. The 1989 recipients were Dr. Matthew A. Arquette and Dr. Thomas C. Bailey, infectious disease; Dr. Paul E. Buse and Dr. Michele C. Woodley, gastroenterology; and Dr. Mark H. Eaton, cardiology.

The annual awards program is in its fifth year. It was established by Charles C. Cella with a gift of \$750,000 to honor Barnes physician Dr. Norman P. Knowlton Jr. Recipients are recognized for extraordinary excellence in the practice of medicine and patient care.

## BULLETIN

December, 1989  
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**Kathy Holleman, Editor**  
**Scott Ragan, Managing Editor**

**BARNES** Barnes Hospital  
at Washington University  
Medical Center

ing for patients using the new sound processor, which the Food and Drug Administration approved in October based on the test results from Barnes.

Surgeons from around the world gathered at Barnes Hospital, Nov. 6 and 7, for a symposium on lung transplantation. KSDK-TV covered the event and interviewed **Dr. Joel D. Cooper**, head, thoracic surgery, Nov. 6 about the recent **advancements in lung transplantation**.

The health concerns of **women and AIDS** was addressed Nov. 2 by **Dr. Diane F. Merritt**, Barnes obstetrician/gynecologist on KSDK-TV. Dr. Merritt emphasized the need for sexually-active women to protect themselves from AIDS exposure by supplying their own prophylactics.

### Retirements

Four long-term employees recently retired with a combined total of 78 years of service to the hospital. Odessa Pirtle, Central Service, Pat Hanick and Eileen Moehrle, nursing service, and Lilly Bemon, housekeeping, each received a certificate of appreciation from hospital president Max Poll at receptions in their honor.

Odessa Pirtle heard that Barnes needed summer help in 1973. Following that lead, she took a job in Central Services and liked it so well that she stayed for 16 years. Her sister joined Barnes a few years later. During those 16 years, Mrs. Pirtle said she "did a little bit of everything." During her retirement, Mrs. Pirtle said she plans to enjoy life and spend time with her 10 grandchildren and one soon-to-arrive great-grandchild.

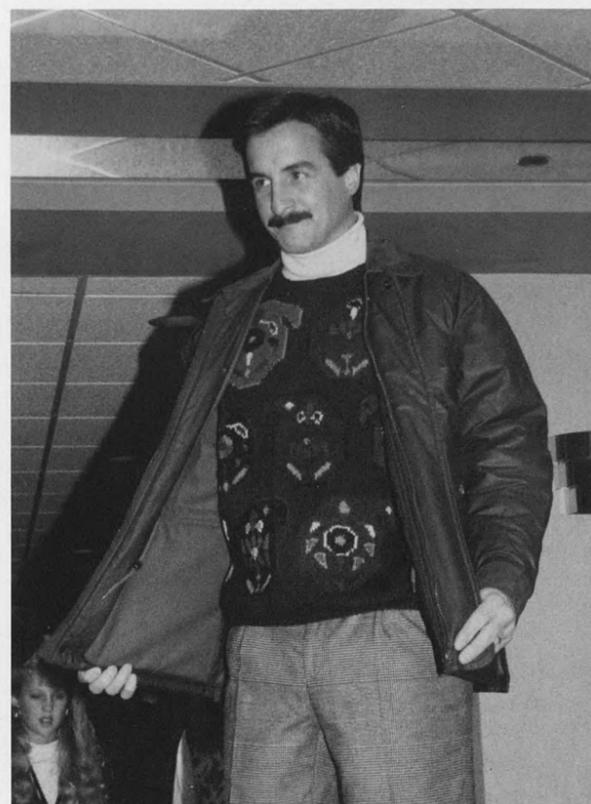
Pat Hanick, RN, started working in the delivery rooms 20 years ago and also taught natural childbirth classes. She also "delivered a few babies along the way." Most recently, Ms. Hanick was a nurse specialist in urology. She said there have been many fascinating and



Odessa Pirtle



Pat Hanick



Dr. Michael K. Pasque, assistant cardiothoracic surgeon, sported the latest in fall fashions at the LaVogue Fashion Show held at The Tower Restaurant Nov. 19. The fashion show was held to raise funds for the Lung Transplant Program.

Oct. 30, **Carla Patton**, Barnes registered nurse, took part in a taped interview for KWMU-FM's "Nutrition and Health Report." The topic was **postpartum depression** and described the support group Barnes offers to assist new mothers with this disorder.

**Dr. Phillip E. Korenblat**, Barnes allergy and immunology specialist, discussed the increased irritation to **asthma sufferers** brought on by the fall weather conditions, Oct. 17 on KMOV-TV.

KPLR-TV interviewed two Barnes' doctors, Oct. 25 as part of a three-part series on electrical applications and medicine. **Dr. John W. Miller**, Barnes neurologist, explained the **electronic mapping** procedure used to detect seizures in the brain and **Dr. George A. Gates**, Barnes otolaryngologist, explained how **cochlear implants** electronically process sound waves to improve hearing.

challenging changes at Barnes in 20 years, but she always felt lucky to have the supervisors she had. Ms. Hanick has a busy retirement planned. She plans to work as a photographer's assistant and will perform demonstrations of urology equipment for a manufacturer. Ms. Hanick also is an avid bingo player.

Eileen Moehrle had planned to retire from nursing after the birth of her second child. Her retirement only lasted six months. In 1964, Mrs. Moehrle was lured back into the profession when she was given the opportunity of starting the Operating Room Technician



Eileen Moehrle

program at Barnes. Since then, she has worked in several areas of the hospital, most recently in outpatient surgery. Mrs. Moehrle is very active and plans to remain that way after this retirement. She plans to bowl, play bingo, attend hockey games and do her daily crossword puzzle and cryptopquip.

Lilly Bemon has spent her nights at Barnes for the past 17 years. Mrs. Bemon has worked as a night housekeeper her since joining the staff in 1972. She plans to spend her retirement fishing and enjoying her four grandchildren.

## Gifts to Barnes Hospital

Listed below are the names of persons (honorees in **boldface**) who made contributions during October 1989 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.

### Barnes Hospital Tribute Fund

#### IN MEMORY OF

##### **Dr. Oliver Abel III**

Dr. and Mrs. Charles B. Anderson  
Mr. and Mrs. Arthur Baue

##### **August A. Busch Jr.**

Dr. and Mrs. Henry G. Schwartz

##### **Samuel Davis**

Barnes Hospital Auxiliary  
Dr. and Mrs. John L. Collins  
Mr. and Mrs. Charles Eyer mann

Mary Ann Fritschle

##### **Mary Ellen Dawes**

Leonard Levin

##### **James Files**

Mary Ann Fritschle

### Annual Fund

Margaret M. Allen  
Maryellen J. Anderson  
Beverly Arendall  
Laquita Ball  
Angelo Barillaro  
Katherine F. Bentley  
Ona M. Benwell  
Everett Berry  
Mr. & Mrs. James Birchett  
Emma A. Boyd  
Dolores E. Bowman  
Mildred N. Brandt  
Stanley G. Brown  
William L. Brown  
Warren J. Brunson  
Betty Buck  
Mr. & Mrs. Clarence Budde  
Marion H. Bullock  
Donald L. Burkett  
James A. Choate  
Joseph Christopher  
Charles E. Claggett  
Harlow Coolbaugh  
Sheila L. Cooper  
John P. Cordeal  
Lena Coulson  
Gertrude Davis  
Mr. & Mrs. Wilbur W. Davis  
Billie Decker  
Frances DiLeonardo  
May C. Di Maggio  
Catherine Doyle  
Melvin Dubinsky  
Earl Dunning  
Alpha M. Dwyer  
Geraldine Downey  
Ruth Ellis  
Mr. & Mrs. Laurence Emmert  
Bryon E. Emmons  
Elie L. Fayollat  
Stephanie Ferguson  
Margaret Finkeneller  
Mr. & Mrs. Larry Flaughter  
Harry C. Flavin  
Howard Flournoy  
Edward A. Gall  
Robert Gardener  
Raymond Geisman  
Roaslind E. Glasper  
Jack C. Golightly  
Elizabeth E. Gorman  
Mildred Gralnick  
Ozella Green  
Peter Greggersen  
Willette Gregory  
Alvin Griesdieck  
Richard J. Griffin  
Rose Grossberg  
Steven P. Grossman  
Mary Ann Guffey  
Hilda Guzikowska  
Rosemary B. Hagemann  
Lynn Hall  
Mr. & Mrs. Myron Hanna  
Floyd Hart  
Oliver Hasek  
Virginia Hawn  
Jack L. Henry  
Emily Herbert  
Wallace Herdlein

#### Friends

Mary Delle Arthur

#### **Samuel Kozloff**

Mr. and Mrs. Louis Kozloff

#### **Russell Lortz**

Mary Delle Arthur

#### **M. J. Mathis**

Mrs. Marvin Harris

#### **Howard Park**

Mary Delle Arthur

#### **Daughter, Theta**

Mrs. Larry Tucker

#### IN HONOR OF

**Dr. Robert E. Kuhlman for 25 Years of Continuous Service at Barnes Hospital**  
Lillian Huetteman

Norman F. Hettenhausen

Jay E. Hinchcliffe

Florence J. Hoadley

Pamela Hoekstra

Myrtle B. Homsey

James F. Hornback

Eldred W. Hough

Elbert Hughes

Richard Hughes

Odessa A. Hulsey

Elias Hydar

Mr. & Mrs. Hyde

Regina Jackson

John Jehle

Mahalia Jenkins

Leslie G. Jerrell

Cathy Jiles

Howard Johnson

Michael T. Johnson

Donald Johnson

Robert Johnson

Mr. & Mrs. Johnson

Vivian M. Johnson

Vernice C. Jones

Sophie V. Kagels

Ethel C. Kallenbach

Florence F. Keck

Margaret Kesselring

Nobie T. Kitchens

Robert Klayman

Lucille Kleinstauber

Robert Knittel

Julianna Kovacs

Maude Lannan

Connie Lees

Dorothy L. Lehr

Irene R. Leibovitz

Ellen L. Leonard

Mr. & Mrs. Jack Lerner

Sally S. Lilly

Dorothy Loving

Corliss L. Macklin

Melvin Marcus

Lucy Marler

Lucille F. Marshall

Joseph McConnell

Lawrence J. McHenry

Michael McLaughlin

Otto R. Moench

Dorothy M. Montgomery

Ambrose A. Moss

Teresa Muehlberger

Thomas Murray

Ethel L. Nealy

Marguerite Newton

Rosa Mari Nieves-Blas

George Nolen

Mildred Nunn

Fred Obrock

Bernice L. Parker

Alexandra Pawlik

Donna D. Perkins

Mary Eileen Peters

Louis W. Pfeckl

Mary L. Phillips

Betty Pieper

Mavis Priestler

Mr. & Mrs. John E. Pryor

Zoe Pryor

Joseph C. Quinn

Rea W. Reid

Frank S. Riordan  
Odella Roberts  
Frances B. Robinson  
Ruth Roguski  
Sadie Rosen  
Mary Ross  
Lutwin Rotter  
Frank J. Rudis  
Alan Rudolph  
Mr. & Mrs. Anthony Rugowski  
Mary Schindler  
William Schroeder  
Kent D. Schuette  
Ella Smith  
Loretta M. Smith  
Anna Marie Spengeman  
Florence Staikoff  
Betty Stearns  
E.E. Steffey  
June Stewart  
Ada L. Straughter  
Margaret Stroud  
Patricia Tabor  
Michelle Tanner  
Gloria D. Tappin  
Jerome Tessler  
Weldon Tousand  
R. E. Towell

### Patient Care Fund

Mr. & Mrs. Leonard Adams

Robert E. Beitel

Almeda Bradley

Mildred Daley

Emily Darr

Marvin Falk

Chalmus Gray

Mr. & Mrs. William Hale

Kevin Hoffman

Donald Huddleston

Henrietta Hudson

Myrtle C. Johnson

Robert Kuske

R. Lesko

Hartwell Lowe

Florence J. Hoadley

George Mc Clure

F.D. McVey

Lucille Orf

Melody Patterson

David R. Pearce

Pamela Pickard

Fred S. Roth

Anne M. Schmidt

Mr. & Mrs. William Schneider

Mrs. Herbert Shotwell

E. E. Steffey

### Morton A. Binder Memorial Fund

Dr. & Mrs. Gerald Wool

### Bone Marrow Transplant Fund

Violet Gainey

### Cancer Research Fund

Laura Becherer

Clara Scaggs

Ruth M. Wheeler

#### IN MEMORY OF

**Judy Bass**

Mr. & Mrs. Tomlinson

#### **Harris C. Hepp**

Dennis Hepp

#### **Homer Howell**

Mr. & Mrs. Earl Miles

Suzanne Moore

### Clinical Heart Research Fund

#### IN MEMORY OF

**Vernelia Sprock**

Mr. & Mrs. Donald Kreutz

### Joseph C. Edwards, M.D. Care of the Patient Fund

#### IN HONOR OF

**Dr. Joseph C. Edwards**

Peggy K. Critz

### Grace Louise Potter Scholarship Fund

Patricia Potter

### Heart Transplant Association Endowment Fund

Archie Cushman

K. James Ferguson

Mary A. Kingery

### Sheryl Stern Nursing Scholarship

#### IN MEMORY OF

**Samuel Davis**

Norma Stern

Sheryl Stern Dobbin

#### IN HONOR OF

**Marilyn MacDonald's New Grandson, William Wade MacDonald**

Norma Stern

### Elizabeth Stevenson Endowment

Steve Turner

### Barnes Hospital Unrestricted Endowment

C. G. Eader

DeWitt T. Harris

Sophia Horowitz

Bettie S. Johnson

Permelley Jones

Ruth Lewin

Eleanor B. McClure

Darrell Plocher

Milton Spector

Irene Treske  
Jack K. Trotter  
Eugene H. Vale  
Emma Visor  
Peter R. Viviano  
Hutson E. Wadlow  
Esther L. Walker  
Mary K. Walker  
Pearlie Warren  
Jean V. Watson  
Virginia L. Watts  
Rose Weiner  
David Welch  
James Wells  
Virginia Whaling  
Willie Lee Wheeler  
Inez Yeager  
Leslie M. Young  
Melvin Zimmerman

#### IN MEMORY OF

**Harry E. Morton**

Fannie L. Morton

#### **Edward Imo**

Lena Imo

#### IN HONOR OF

**Personnel Serving 8404 in 1988**

E. E. Steffey

#### IN MEMORY OF

**Dr. Oliver Abel III**

Ernest Waidmann

#### **James Hanick**

Jan Anschutz

Janet Burd

Colette Chase

Libby Hughes

Carol Latzel

Annette Lueckenotte

Mary Kay Machecha

Jill Malen

Patty Nast

Sandy Siehl

Anna Ikeda-Tabor

Joanne Tonn

#### **Melvin Reno**

Nathalie Reno

#### **Ronald Stillman**

Margaret Stoecklein

Marguerite Tyus

Eva Mae Victor

Esther G. Wilcke

Mr. & Mrs. Harry Wamser

Violet Wohlschlaeger

#### IN MEMORY OF

**Dr. Oliver Abel III**

Ernest Waidmann

#### **James Hanick**

Jan Anschutz

Janet Burd

Colette Chase

Libby Hughes

Carol Latzel

Annette Lueckenotte

Mary Kay Machecha

Jill Malen

Patty Nast

Sandy Siehl

Anna Ikeda-Tabor

Joanne Tonn

#### **Melvin Reno**

Nathalie Reno

## Hospice Fund

#### IN MEMORY OF

**Helvi Bell**

Faculty & Staff, Department of Speech, Communications, Sciences & Theatre  
Mr. & Mrs. George Harris  
Mr. & Mrs. Fred Henna  
Ms. Sandra Boffa  
Ms. Ruthy Kaiser

#### **Raymond Collins, Jr.**

Mr. & Mrs. Paul Maasen  
Singles Resource Organization

#### **Helen Friedrich**

Mr. & Mrs. Edward Friedrich  
Mr. & Mrs. George Griese  
Ms. Joyce R. Hill  
Mrs. Virginia Hollandsworth  
Ms. Maple Montgomery  
Mr. & Mrs. George C. Shaffrey  
Cleo Steffens  
Mr. Paul A. Thomas

### Jonathan Adam Jonas Cancer Research Fund

Mr. & Mrs. Elliott Alper

Braha Industries

Edie Brown

Mr. & Mrs. Roger Dierberg

Mr. & Mrs. Milton Engelman

Bruce Gordon

Allison U. Keenan/Esroh, Inc.

Louise Peatfield

#### IN MEMORY OF

**In Loving Tribute to Our Son and Brother, Jonathan Adam Jonas**

Debra & Stephen Jonas & Family

#### **August A. Busch Jr.**

Mr. & Mrs. Whitney R. Harris

#### **Father of Howard Glickman**

The Stephen Jonas Family

#### **Jacob M. Gross**

Mr. & Mrs. Kenneth Weisman

#### **Gussie Jacobson**

Susan, Alan, Elizabeth & Peter Witte

#### **Tom Malott**



The Heart Transplant Association at Barnes has donated \$21,000 to establish the Heart Transplant Association Endowment Fund. The endowment will pay for medications for transplant patients. The money was raised through a bike-a-thon, t-shirt and sweatshirt sales and other activities. The association is composed of heart transplant recipients, potential recipients and their families.

**BULLETIN**

One Barnes Hospital Plaza  
St. Louis, Missouri 63110

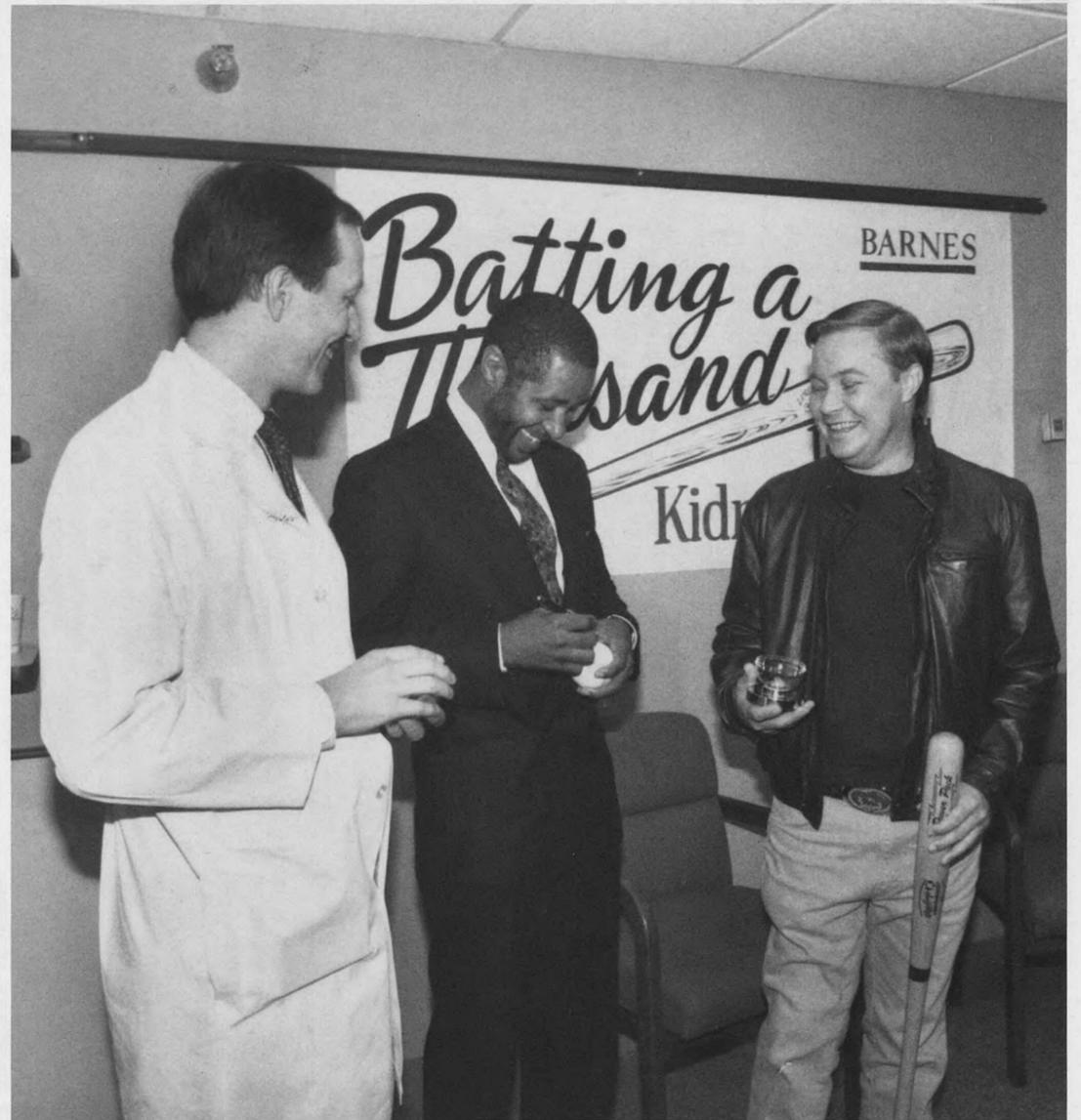
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**BARNES**

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## Barnes Honors 1,000th Kidney Recipient

December 1989  
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