

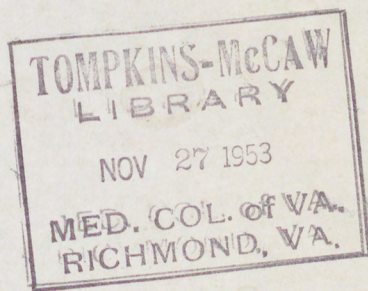
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THE *Bulletin* OF THE

VIRGINIA STATE
DENTAL
ASSOCIATION

VOLUME XXX

No. 3



OCTOBER, 1953

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THE
BULLETIN
OF THE
VIRGINIA STATE
DENTAL
ASSOCIATION

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THE BULLETIN

Virginia State Dental Association

VOLUME XXX

OCTOBER, 1953

NUMBER 3

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415 Shenandoah Building, Roanoke, Virginia

HENRY L. KENNETT, *Assistant-Editor*

118 Orchard Hill, S. E., Roanoke, Virginia

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A JOB WELL DONE

Retiring from the Virginia State Board of Dental Examiners this year is D. Blanton Allen. It is entirely fitting and proper that we pay him tribute in this manner. The Board of Examiners will miss Blanton because of his untiring work, keen interest and ceaseless perseverance to keep standards and efficiency on a high level. As President of the Board for the past three years his leadership and council have been invaluable. His knowledge of dentistry, his judgment of character and, above all, his ability to cope with adversity and accept success with humility, has endeared him to all his associates.

A list of his accomplishments since his graduation from the Medical College of Virginia in 1935, serve to emphasize those words of praise.

Blanton practiced dentistry at Colonial Beach for one year, since then his home and practice have been in Berryville. He was appointed to the Board in 1944 and again in 1948. He has served as

President of the Board since 1950. He was elected an honorary member of Omicron Kappa Upsilon in 1948 and has served as President of his Component Society as well as Counselor since 1948.

Besides his many duties and obligations with the profession, Blanton has had time to serve his Church and his Community. He has served the Baptist Church as Deacon and member of the Finance Committee. He was chairman of both of these groups at various times. He serves in the Choir and has taught the Men's Sunday School Class. He has served his fraternity in many capacities, as well as the local town council, Junior Chamber of Commerce, Lions Club and Parent Teachers Association, the latter three as President. He is now director of the Chamber of Commerce. This year he was honored by being elected a Fellow of the American College of Dentists. In addition to all these activities Blanton has found time to attend post-graduate sessions at Michigan on three occasions, Ohio State on two occasions and Columbia University once.

At home he is a Farmer, breeds Hereford cattle and lives happily with his wife Virginia and their two sons. May his success and happiness continue in full richness.

RELIEF FUND

THIS IS OUR RESPONSIBILITY—LET'S SUPPORT IT 100%

The annual fund drive of the American Dental Association Relief Fund has been formally opened this month with the distribution of the traditional Relief Fund Seals to all members of the dental profession throughout the nation.

Every member of the Virginia State Dental Association is asked to support the 1953-54 campaign as generously as possible.

The Council on Relief has urged that every effort be made to send the 1953-54 campaign well over its national quota of \$100,000 to match the achievement of last year, when contributions of \$103,461.89 marked for the first time in the history of the Fund that the national quota has been exceeded.

As an innovation in the 1953-54 campaign, contributions will be separated into two listings: those for state societies with quotas over \$900 and those with quotas of \$900 or less.

"We believe that this new method of reporting contributions will keep the various constituent societies more readily informed of the progress of the campaign among the larger and smaller societies," Dr. Leo W. Kremer, chairman of the A.D.A. Council on Relief said. He added:

"I am confident that the generosity shown last year by the dentists of the nation in response to the mounting appeals for aid from the Relief Fund will be more than matched this year.

"Accident and illness respect no one and there is an increasing number of dentists who through no fault of their own find themselves unable to meet the cost of the bare necessities of life for their families and themselves."

The quota for the Virginia State Dental Association has been set at \$1,130.00, a sum which state society officials are certain can be exceeded.

As in former years, contributions will be divided equally between the A.D.A. Relief Fund, which pays one-half of all relief grants, and the Virginia Relief Fund.

All contributions should be sent to the A.D.A. Relief Fund, 222 E. Superior St., Chicago 11. Each contribution will be recorded and one-half returned to our own state Relief Fund.

QUOTA OVER \$900.00

State	1953-54 Quota	1952-53 Contribution	1952-53 Per Cent
California	\$ 3,740.00	\$ 3,723.50	102.9
So. California	4,530.000	8,217.90	184.3
Colorado	920.00	991.00	103.2
Connecticut	1,930.00	1,889.00	96.9
Florida	1,270.00	1,495.00	122.5
Georgia	1,040.00	1,122.00	104.9
Illinois	7,370.00	7,661.50	101.2
Indiana	2,350.00	2,536.00	113.2
Iowa	1,860.00	1,594.00	84.8
Kansas	990.00	990.01	100.0
Kentucky	1,120.00	1,459.50	135.1
Louisiana	1,010.00	1,114.60	112.6
Maryland	1,060.00	1,071.00	99.2
Massachusetts	3,780.00	3,739.67	98.2
Michigan	4,010.00	4,162.65	104.3..
Minnesota	2,940.00	2,773.50	93.4
Missouri	2,530.00	2,627.00	101.4
Nebraska	1,060.00	1,125.50	103.3
New Jersey	4,070.00	5,098.60	123.2
New York	15,210.00	11,998.50	78.8
North Carolina	1,230.00	1,478.25	119.2
Ohio	4,980.00	4,825.30	97.1
Oregon	1,200.00	1,301.00	110.3
Pennsylvania	6,830.00	5,443.44	78.1
Tennessee	1,200.00	1,711.50	148.8
Texas	3,160.00	2,168.50	71.1
Virginia	1,130.00	1,033.50	90.7
Washington	1,780.00	2,082.00	117.0
Wisconsin	2,910.00	2,533.00	86.5
TOTAL	\$87,210.00	\$87,966.92	100.9

QUOTA OF \$900.00 OR UNDER

State	1953-54 Quota	1952-53 Contributions	1952-53 Per Cent
Air Force	\$ 600.00	\$ 528.50	94.4
Alabama	750.00	2,011.39	261.2
Alaska	50.00	155.00	310.0..

Arizona	280.00	504.00	186.7
Arkansas	560.00	639.65	120.7
Army	630.00	436.22	80.8
Delaware	160.00	153.00	102.0
District of Columbia	850.00	1,398.00	162.6
Hawaii	360.00	470.00	127.0
Idaho	260.00	516.00	198.5
Maine	450.00	358.25	79.6
Mississippi	520.00	546.20	105.0
Montana	370.00	507.50	133.6
Navy	830.00	517.50	65.5
Nevada	90.00	108.50	108.5
New Hampshire	290.00	342.50	118.1
New Mexico	250.00	272.50	123.9
North Dakota	340.00	477.55	136.4
Oklahoma	890.00	1,305.00	145.0
Panama Canal Zone	20.00	7.00	23.3
Public Health Service	260.00	157.00	58.1..
Puerto Rico	190.00	144.59	76.1
Rhode Island	580.00	375.00	65.8..
South Carolina	410.00	342.00	85.5
South Dakota	340.00	376.00	110.6
Utah	450.00	437.50	91.1
Vermont	190.00	157.50	82.9
Vet. Admin.	900.00	404.00	42.1
West Virginia	740.00	810.50	112.6
Wyoming	180.00	180.50	112.8
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TOTAL	\$12,790.00	\$14,638.85	114.5
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TOTALS			
Quotas of \$900 or Under ..	\$12,790.00	\$14,638.85	114.5
Quotas Over \$900	87,210.00	87,966.92	100.9
Students		834.62	
Miscellaneous		31.50	
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GRAND TOTAL	\$100,000.00	\$103,471.89	103.5

MEDICAL COLLEGE OF VIRGINIA

SCHOOL OF DENTISTRY, ANNUAL REPORT 1952-53

To President William T. Sanger
From Dean Harry Lyons

August 5, 1953

Dr. William T. Sanger, President
Medical College of Virginia
Richmond, Virginia

Dear Doctor Sanger:

I have the honor of submitting my annual report to you on the activities of our School of Dentistry for the fiscal year beginning July 1, 1952, and ending June 30, 1953.

ENROLLMENT

During the past academic session we were privileged to have the largest dental school enrollment in our history. Two hundred and five students were enrolled as noted in the following table:

Freshmen	53
Sophomores	51
Juniors	51
Seniors	50

Total 205

One hundred and eighty-two of our students this past session were from Virginia; seven were from North Carolina, fourteen from South Carolina and one each from Ohio and Oklahoma. Eighteen of our out-of-state students were admitted under provisions of the Southern Regional Education Board.

One hundred and twenty-six of our 1952-1953 students were veterans of World War II.

All of our 1952-1953 students had a minimum of ninety semester hours of academic credits, the equivalent of three years of college work. One hundred and fifty-four had academic degrees.

For the next session we have accepted fifty-six students for our freshmen class. These appointments were developed from seven hundred and fifty-four inquiries. One hundred and eighty-six completed applications were received. The dental aptitude test, sponsored by the

Council on Dental Education of the American Dental Association, was required of all applicants for admission to this class.

Two hundred and nine students are expected for the next session. This will set another record in our enrollment.

ACADEMIC RECORD

All of our 1952-1953 seniors were graduated and successfully passed the examinations for registration held by the Virginia State Board of Dental Examiners. During the course of the year one freshman student resigned because of illness and one freshman student failed to gain promotion. The high degree of success in student academic endeavors reflects, I hope, the care exercised by our Committee on Admissions in the selection of our students and the fine efforts of our faculty in their teaching activities.

THE FACULTY

Our faculty again labored this past year in a diligent and inspired fashion under continuing heavy teaching loads. Efforts to supplement our staff have met with only limited success. The search for teaching personnel is a continuous one. The recently revised salary schedule for our teachers should do much towards the solution of our staffing problem.

During the 1952-1953 fiscal year the dental members of our faculty contributed eleven papers to the published dental literature and presented fifty-five addresses and clinics before dental societies. The personnel of our basic science departments engaged in teaching dental students contributed twenty-five published papers and thirty-five addresses before various organizations during the year.

The new appointments to our faculty, promotions and resignations for the year 1952-1953 are summarized in the following table:

New Appointments:

F. A. Cavado, Jr., A.B., D.D.S., Instructor in Denture Prosthesis
C. L. Eubank, D.D.S., Instructor in Denture Prosthesis
S. P. Kayne, B.S., D.D.S., Instructor in Operative Dentistry
M. D. Largent, D. D.S., Instructor in Pedodontics
L. T. Rogers, B.S., D.D.S., Instructor in Denture Prosthesis
S. J. Horner, B.S., D. D.S., Associate Professor of Denture Prosthesis
H. M. Syrop, B. S., D.D.S., Associate Professor of Oral Diagnosis

Promotions:

S. E. Bear, D.D.S., Associate in Oral Surgery

G. W. Burke, Jr., B. S., D.D.S., Associate Professor of Operative Dentistry

W. C. French, D.D.S., Associate in Pedodontics

J. R. Lewis, B. S., D.D.S., Associate in Pedodontics

W. O. Powell, D.D.S., Associate in Crown and Bridge Prosthesis

C. D. Richardson, D.D.S., Associate in Oral Roentgenology

Resignations:

H. S. Powell, D.D.S., Associate in Operative Dentistry.

The following members of our faculty are on military leave:

R. H. Bruni, Jr.

W. C. French

L. C. Budwell

H. P. Riggs

N. B. Evens

J. R. Turnage

THE CURRICULUM

In addition to current appraisals of several phases of our curriculum a long term study of our curriculum in its broader aspects will be undertaken next session. A series of study conferences have already been scheduled. Teachers of both the basic and clinical sciences are to participate in these sessions.

RESEARCH

The following record of achievement for the year 1952-1953 is reported for our Department of Dental Research:

1. Studies carried out under United States Public Health Service Grant D-93.

A. Completed for publication:

1. Prenatal Influences on Tooth Development. I. Alloxan Diabetes in Rats. Jour. Dent. Res., 32:246, 1953.

2. Prenatal Influences on Tooth Development II. Artificially Induced Fever in Rats. Jour. Dent. Res., 32:-, 1953. (now printing)

B. Completed. To be submitted for publication within the next several weeks:

1. Vaccinia Virus Infection in Pregnant Rabbits. 1. The Question of Transplacental Infection and Fetal Dental Development. Jour. Am. Dent. Assn.

2. Histopathologic Changes in the Teeth of Rabbits Infected with Vaccinia Virus. Jour. Dent. Res.

C. Studies nearing completion:

1. Lymphocytic Choriomeningitis in Pregnant Mice. I. Effect on Maternal and Fetal Dental Development.
2. The Morphology and Histology of the Rabbit Dentition.
3. Studies on Abnormal Odontogenesis in Human Teeth.

II. Studies supported by college funds.

A. Completed for publication:

1. The Effect of Tobacco on Epithelial Tissues of Mice. Jour. Am. Dent. Assn., 45:528, 1952.

B. Studies in progress:

1. The Effect of Vitamin B Complex and its Components on Tissue Response to Tobacco Irritants.
2. The Effect of Vitamin A and B Deficiencies on Tooth Development in Mice.

III. Plans for the future.

A. The following requests for Grants-in-Aid have been made:

1. To the Department of the Army for further studies on the effect of whole tobacco smoke on oral tissues. Requested budget: \$6,245.00.
2. To the Veterans Administration for clinical, bacteriologic and histopathologic studies of gingival and periodontal disease. Requested budget: \$11,550.00.

B. Request for continued support of our U.S.P.H.S. Grant will be made in order to permit continuation of studies beyond the present termination date of August 31, 1954.

In addition to the above research program under the able direction of Dr. S. J. Kreshover a number of investigative projects in clinical dental fields are under study by other members of our faculty.

HOSPITAL DENTAL SERVICE AND DENTAL INTERNSHIPS

During the past year our hospital dental service was approved by the Council on Hospital Dental Care of the American Dental Association and our dental internship program was fully accredited by the A. D. A. Council on Dental Education.

NAVY RESERVE COMPANY

Through the initiative of Dr. S. J. Horner a Navy Dental Reserve

- Company was established at our school. This offers our students many fine advantages in relation to their ultimate obligation to the military services.

MEDICAL COLLEGE OF VIRGINIA—CITY DENTAL CLINIC

We continue to operate the Medical College of Virginia-City Dental Clinic for indigent citizens of Richmond. The volume of service offered in this clinic is steadily increasing within the bounds set by policies and financial support from the City of Richmond through its Department of Health.

ALUMNI RELATIONS

Our Second Annual Dental Alumni Homecoming was held on February 2 and 3, 1953. This event was attended by three hundred and forty-one alumni, one hundred and sixty-one of whom were accompanied by their wives. The total attendance was five hundred and two. The scientific program for this occasion was well received and the subject of many fine statements of appreciation by alumni.

Plans for our 1954 Alumni Homecoming, scheduled for next February 1 and 2, are already well advanced.

The good reception which our alumni have accorded our Newsletter prompts us to continue its publication during the next session.

INVENTORY

A complete inventory of equipment and supplies in our clinics and laboratories was prepared at the end of the fiscal year and a copy is being submitted to our Comptroller.

DENTAL CLINIC DATA

Data on services rendered in our dental clinics during the past year have been compiled; a summary of these data is attached. It is gratifying to report that our students are receiving an ever-increasing variety and volume of clinical experiences.

NEW DENTAL SCHOOL BUILDING

Construction progress on our new dental school building has been delayed numerous times, due mainly to labor strikes. Several important crafts are currently on strike. It is, therefore, impossible to estimate the completion date for this building. It now appears certain that we shall not be able to occupy our new facility before the beginning of the second quarter, approximately December 1, 1953, at the earliest. We have also encountered delays in ordering many items of equipment

because of the uncertainty of funds for this purpose. We shall not be in a position to order numerous equipment items until the final reckoning of the construction cost for the building has been made.

RELATIONSHIP TO HOSPITAL DIVISION

The relationship of our dental school and certain members of our faculty to our Hospital Division has improved markedly during the past year. Our appreciation to Mr. C. P. Cardwell, Director, Mr. C. R. Parrish, Assistant Director, and the Hospital Staff is herewith recorded. Our relationships need to be still more clearly defined in connection with dental consultation and dental care for hospitalized and outpatient clinic patients. I feel confident that this will be done in due time. The benefits from such an extended relationship would accrue not only to patients but also (and of equal importance) to medical and dental students, interns and residents.

POSTGRADUATE AND GRADUATE PROGRAMS

Looking ahead to the inauguration of instruction at the postgraduate and graduate levels, Dr. Seymour J. Kreshover has been named Director of Postgraduate and Graduate Instruction for our dental school. Plans are now well advanced for a series of short postgraduate courses to be given next spring.

SEMINARS FOR DENTAL TEACHERS

In an effort to improve teaching methods in dentistry we joined the dental schools of the University of Pennsylvania and Columbia University in a petition to the Kellogg Foundation for financial support in sponsoring a series of three annual seminars on teaching technics in dental education. The Kellogg Foundation made a grant of \$3,000.00 for this project and the first of the seminars was held in Philadelphia on June 17, 18 and 19, 1953. Six full time members of our faculty attended and a report on the seminar was presented to all our full time dental teachers. We shall serve as hosts and arrange the program for the seminar in 1955.

ACKNOWLEDGMENTS

These brief statements concerning the many activities of our school fail, I am sure, to portray the diligence and the dedication to duty so characteristic of our faculty and our secretarial, clerical and technical staff. They merit our special commendation.

I am most appreciative of the invaluable help which so many

have given me in my administrative duties. The keen understanding of our problems and the help so generously given by you, General William F. Tompkins and our Board of Visitors have been indispensable to the conduct of our dental school.

Respectfully submitted

HARRY LYONS, Dean

FROM ADA NEWS LETTERS AND NEWS RELEASES**DR. LESLIE M. FITZGERALD, NEW PRESIDENT**

Dr. Leslie M. FitzGerald, of Dubuque, Ia., took office as president of the American Dental Association Thursday, Oct. 1, at the close of the 94th Annual Session in Cleveland. He succeeded Dr. Otto W. Brandhorst, of St. Louis. Dr. Daniel F. Lynch, of Washington, D. C., was chosen as president-elect. He won over Dr. Obed H. Moen, of Watertown, Wis., in a close vote. Final figures indicated an attendance of 9,037 at the four-day meeting.

DRS. WHITE, JESERICH, HIGGINS, NEW TRUSTEES

Three new members were elected to the Board of Trustees. Dr. Edward R. White, of Jersey City, N. J., is the new trustee for the 4th District, including the District of Columbia, Maryland, Delaware, New Jersey, Puerto Rico and the federal dental services. He replaced Dr. Lynch. Dr. Paul H. Jeserich, of Ann Arbor, Mich., succeeded Dr. Moen as trustee of the 9th District, including Michigan and Wisconsin. Dr. Howard B. Higgins, of Spartanburg, S. C., defeated Dr. William A. Garrett, of Atlanta, Ga., as new trustee of the 5th District, which includes Mississippi, Alabama, Georgia, Florida, South Carolina, North Carolina and Virginia. Dr. Higgins succeeded Dr. James E. John, of Roanoke.

AD CLAIMS SHARPLY ATTACKED AS**'DETRIMENTAL TO HEALTH'**

Misleading advertising claims, including the practice of actors posing as dentists to promote commercial products, were strongly attacked in a resolution unanimously adopted by the House of Delegates. The House condemned distorted advertising of dentifrices, mouth washes, chewing gum and other products as "detrimental to public health" and placed the Association on record to "call attention of the public in the strongest possible terms to the serious danger to health which arises out of the present flood of inaccurate and untruthful claims in advertising for dentifrices and other dental products." The resolution pointed out that many products are being promoted as effective in preventing dental caries and other diseases and declared: "Many of these advertising claims are based on inadequate scientific evidence and are detrimental to public health since they tend to discourage well-recognized and acceptable dental health procedures, such as proper toothbrushing and avoiding excessive exposure to sugar-containing substances." The resolution took sharp issue with advertising which "un-

truthfully suggests that members of the dental profession are participating in the advertising and promotion of these products of alleged health significance." The resolution called on manufacturers and their advertising agencies "to cease those practices which tend to destroy the confidence of the public in the integrity of all advertising and in the reliability of all advertised products and services." In another resolution adopted by the House, agencies of the Association were called on to continue to discourage motion picture and television programs detrimental to the dental profession. This resolution also urged an end to the practice of actors disguised as dentists appearing on television commercials.

V. A. APPROPRIATIONS BILL NEARS ENACTMENT

The appropriations bill for the Veterans Administration, including the dental program, neared final enactment this week. The bill was before a joint conference committee of the House of Representatives and Senate following approval of the measure in the Senate last Friday. The House previously had passed the bill June 18. The Senate made two changes affecting the dental program. First, the \$23 million earmarked for the outpatient dental program was specifically allocated to the "hometown" program. In testimony before the Senate Appropriations Committee, A.D.A. spokesmen had pointed out that the section was not clear on the specific purpose of the earmarked funds. Secondly, at the instance of Sen. Hunt (D., Wyo.) a House-approved provision limiting applications for dental care to within two years of a veteran's discharge from service was dropped, leaving as the sole provision that applications must be made within a year after enactment of the bill. It was pointed out that at the end of that time, a new bill will have to be enacted. Both the House and Senate, however, retained the provision that actual proof of service-connection would now have to be established for all veterans in the outpatient dental program. Under an old law, dental disabilities existing within a year of the veteran's discharge from military duty are presumed to have been incurred in service.

V. A. ORDERS READJUDICATION FOR THOUSANDS OF VETERANS

Pending final enactment of the appropriations bill, operation of the outpatient dental program of the Veterans Administration was ordered sharply curtailed last week. A directive issued by the V. A. apparently sought to carry out the measure as it appeared headed for enactment. Under the provision that a veteran's dental condition would have to

be proved to have been in existence at the time of his discharge, all applications for care under the hometown program now require adjudication for actual proof of service-connection. The V. A. ruling directly affects the vast backlog of cases awaiting treatment. An estimated 300,000 veterans whose applications for dental care have been approved but whose treatment has not yet been authorized to begin will now have to have their cases readjudicated. The ruling does not apply to veterans whose treatment has already been authorized. Individuals now receiving dental care are likewise not affected. Under the V. A. order, a halt is put to the practice of having hometown dentists give dental examinations to veterans for rating purposes. The provision requiring proof of service-connection applies to veterans of all wars, including the Spanish-American War.

A.D.A. TESTIFIES ON NEED FOR COMPLETE OVERHAUL OF PROGRAM

Meanwhile the whole question of the extent of care that should be provided for veterans, including outpatient dental care, was opened by the House Committee on Veterans Affairs. Testifying yesterday (July 14) for the A.D.A., Mr. Francis J. Garvey, of Chicago, secretary of the Council on Legislation, called for a realistic re-evaluation of the entire dental program. Pointing to the practice of providing unending dental care for a veteran, once service-connection is established for an initial carious lesion, he said: "The Association considers this philosophy to be unsound scientifically because, so far as anyone can tell, there is nothing peculiar about service conditions, which will cause an individual to have had more or fewer cavities than he would have had, had he not been in service . . . and the practice goes beyond the obligation of the government to the veteran." Noting that some 20 million veterans are theoretically eligible for dental treatment, Mr. Garvey pointed out that the liability assumed by the V. A. under the theory that each tooth is a service-connected entity means a costly program impossible of realization. The A.D.A. representative reported that the House of Delegates of the Association is expected to make specific recommendations on the V. A. program, pending which several alternatives appear to be open for consideration. Four suggestions as a basis for study and evaluation of the program were made: (1) that the "tooth-entity theory" be eliminated and treatment be limited to the original service-connected dental condition; (2) that a time limit be placed on the eligibility of a veteran for dental care; (3) that a "one complete treatment" mechanism be studied under which all dental defects of a veteran would be noted at the time of his discharge with treatment limited to those defects, and (4) that for present veterans, a

similar procedure be worked out by which corrective treatment for all current defects would be offered as a complete fulfillment of the government's obligation to the veteran. The committee is expected to hold extensive hearings, continuing into the January session of Congress.

V. A. URGED TO REVISE 'CONTINUING CARE' POLICY

The Veterans Administration was urged to revise its present policy of continuing dental care for war veterans during their lifetime once service-connection for a dental defect is established. A resolution adopted by the House of Delegates recommended that dental care for veterans should be limited to treatment of the dental disease or injury the veteran incurred in service. "The American Dental Association disagrees with the Veterans Administration's concept of a service-connected dental condition," the resolution said. "That any specific member or part of the human anatomy which has been infected or injured during military service must, thereafter, be treated and maintained in good function at federal expense when later unrelated diseases or injuries occur is patently an unreasonable extension of the federal government's obligation for service-connected conditions of the veteran." The House noted with approval information that the V. A. was issuing a regulation that would limit repeat treatments for veterans in the outpatient dental program. "The Veterans Administration should provide to the veteran the treatment necessary to correct any uncorrected dental disease or injury incurred in service or as a result of service," the House resolution said. "That treatment should be provided within a reasonable time after discharge, and, after correction of his service-incurred dental diseases or injuries, the veteran should be no longer entitled to the dental service provided by the Veterans Administration." The program of the federal government in promising unending dental care to millions of war veterans was termed unrealistic by Dr. Brandhorst in his president's report at the opening session of the House. "If the federal government continues to promise every veteran free dental care for the rest of his life at the expense of the federal treasury, virtually the entire profession would have to become part-time employees of the government," he said.

BAN ON SOFT DRINKS AND CANDY

URGED IN NATION'S SCHOOLS

Delegates also struck hard at sugar as a cause of dental decay and unanimously recommended that the sale of sweetened drinks and candy be banned in the nation's schools. The delegates pointed out that

"convincing evidence has been accumulated over many years concerning the hazards to dental health resulting from the consumption of sugar" and stressed "the responsibility of the manufacturers of sweetened beverages and confections for devising suitable methods to eliminate the dental health hazards associated with the consumption of their products." Action on the resolution came simultaneously with a report issued by the A.D.A. Councils on Dental Health and Dental Therapeutics in the October issue of *The Journal of the American Dental Association* which declared that a significant relationship between sweets and dental caries had been firmly established by dental research that began as early as 1867. In an editorial, *The Journal* charged producers of sweetened drinks with using unethical tactics in advertising that soft drink consumption does not contribute to dental decay. It cited as one example a recent advertisement by the American Bottlers of Carbonated Beverages which said "That a decalcifying concentration of acids does not persist in the saliva of humans after drinking acidulated beverages." *The Journal* declared: "Thus the bottlers employ the red herring technic of diverting attention from a major factor in the production of caries—the plaque—to one momentarily better suited to their purpose — the saliva."

NEW SURVEY SHOWS CONTINUING INCREASE IN FLUORIDATION OF WATER THROUGHOUT NATION; PROGRAM NOW IN OPERATION IN 771 COMMUNITIES

One out of every nine persons in the United States is routinely drinking water containing a beneficial fluoride content, according to a survey completed last week by the A.D.A. Council on Dental Health. The survey revealed that 14,266,351 persons in 771 communities—a gain of 117 since Jan. 1, 1953—are served by fluoridation programs. Additionally, 3,570,021 individuals live in areas served by water supplies naturally containing desirable amounts of fluorides to bring to a total of 17,836,372 the number of persons in the program or more than 11 per cent of the nation. Results of the survey were based on questionnaires sent to state and territorial health departments. Replies revealed that fluoridation is now in operation in every state but five—Arizona, Missouri, Nevada, New Mexico and Utah. The survey also revealed that the program had been discontinued in only six small communities, Mt. Dora, Fla.; Assumption, Ill.; Williamstown, Mass., and the Wisconsin towns of Elroy, La Crosse and Stevens Point. Fluoridation of local water supplies was first started in six communities in 1945. The number of communities which have adopted the procedure by years since 1945 are as follows: 1946, seven; 1947, four; 1948, seven; 1949, 19; 1950, 39; 1951, 225; 1952, 347; and 1953 (first six months) 117. Mary-

land leads the nation with 1,545,657 persons residing in 164 communities where local water supplies are fluoridated. Second is California with 1,280,144 residents of six communities routinely drinking fluoridated water. In Pennsylvania, fluoridation is in operation in 37 communities with a population of 903,000. Other areas where fluoridation is in operation for large numbers of persons include: District of Columbia, 890,000 persons; Virginia, 873,830; and Michigan, 859,040.

NATION-WIDE ADOPTION IS URGED BY JUNIOR CHAMBER OF COMMERCE

The U. S. Junior Chamber of Commerce has urged all state and local member organizations to adopt the fluoridation program as a project next year. In a resolution adopted at the organization's annual meeting June 11 in Minneapolis, the organization went on record "favoring the controlled fluoridation of municipal water supplies by said municipalities throughout the country."

STATE DENTAL DIRECTORS RE-AFFIRM FLUORIDATION

A reaffirmation of its original endorsement of the fluoridation procedure came last week from the Association of State and Territorial Dental Directors. The resolution, which was approved at the annual meeting of the organization in Washington, D. C., "commends local dental societies, health departments and lay groups for the splendid work they have done in bringing this beneficial measure to the people." At the meeting, Dr. James F. Owen, of Lexington, Ky., was named president and Dr. A. Harry Ostrow of Washington, D. C., secretary-treasurer, succeeding, respectively, Dr. Carl L. Sebelius, of Nashville, Tenn., and Dr. William A. Jordan, of Minneapolis.

BRITISH GOVERNMENT WHITE PAPER URGES FLUORIDATION FOR ENGLAND

Fluoridation of public water supplies was recommended for England in a British government White Paper issued last week. The report was based on findings of a five-man official British mission which made a month's study of the subject in the United States last year. The mission was headed by Dr. H. H. Stones, editor of the International Dental Journal and dean of the faculty of the University of Liverpool. The report declared that fluoridation as a method of reducing dental decay is beneficial. Noting that the procedure would have to be adapted to conditions in England, the report recommended that the program should first be conducted in selected areas "to allow a carefully controlled investigation to be carried out . . . in spite of the fact that the evidence of harmlessness is so strong as to be almost conclusive."

A.D.A. GOES ON RECORD AGAIN FOR FLUORIDATION

The House of Delegates reiterated its endorsement of the fluoridation of public water supplies. By unanimous action, the House restated its recommendation that the measure be adopted in all local communities when recommended by state and local health authorities. The action was taken following a report from the A.D.A. Councils on Dental Health, Dental Research and Dental Therapeutics. The councils, reporting scientific findings have served to substantiate further the effectiveness and safety of fluoridation under properly controlled conditions. This evidence continues to demonstrate that fluoridation will have no untoward effect on general health and will significantly improve health through the reduction of dental decay." The report added that adoption of the measure is a "direct responsibility of the local community where leadership should be shared by the dental profession, official health agencies and appropriate civic groups." The report also took sharp issues with those opposing fluoridation, charging that the opponents were using "false, misleading and emotional charges against fluoridation based on undocumented and unscientific supporting material." The complete text of the resolution follows:

Whereas, in 1950 the American Dental Association recommended the fluoridation of public water supplies as a safe and effective procedure for reducing the incidence of dental caries, and

Whereas, this recommendation was based on an accumulation of many years of careful study and scientific research by competent individuals and groups, and

Whereas, the Councils on Dental Health, Dental Research and Dental Therapeutics of the American Dental Association have continued to evaluate all available evidence relating to the fluoridation of communal water supplies, and

Whereas, all additional scientific findings have served to substantiate further the effectiveness and safety of fluoridation under properly controlled conditions and

Whereas, this evidence continues to demonstrate that fluoridation will have no untoward effect on general health and will significantly improve health through the reduction of dental decay, therefore be it

Resolved, that the American Dental Association reiterate its recommendation that all local communities be urged to adjust the fluoride content of their public water supplies to the level recommended by responsible state and local health authorities.

A.D.A. MEMBERSHIP REACHES ALL-TIME HIGH

Membership in the A.D.A. reached an all-time high of 78,304 on June 30, a gain of 3,009 over the total for the corresponding date a year ago and 582 more than the previous high total established on Dec. 31, 1952. The number of fully-privileged (dentist) members at the end of June was 68,568, an increase of 2,921 over 1952 and 4,663 over the total for 1951. The number of active members was 65,498 compared to 62,734 a year ago and the total of life members was 3,070, up 157 from a year ago. Every constituent society except North Dakota and the Panama Canal Zone showed an increase in membership over last year. North Dakota's total membership on June 30 was the same as a year ago. In the Canal Zone, membership dropped from 15 to nine. Among the federal dental services, gains in membership were reported for the Air Force and the Navy. A decrease in total membership occurred in the Army, U. S. Public Health Service and the Veterans Administration. Membership in categories other than active and life members on June 30 as compared to a year ago was: affiliate, 180 (down 33); associate, eight (up one); honorary, nine (up one), and student, 9,539 (up 119). Active members as of June 30, 1953, and 1952 by constituent societies follow:

	June 30 1953	June 30 1952
Alaska	39	34
Alabama	545	506
Arizona	214	192
Arkansas	360	345
California	2,546	2,418
California, Southern	3,114	3,009
Colorado	593	558
Connecticut	1,255	1,223
Delaware	104	99
District of Columbia	530	522
Florida	922	817
Georgia	676	643
Hawaii	246	241
Idaho	181	172
Illinois	4,729	4,650
Indiana	1,416	1,364
Iowa	1,097	1,047
Kansas	613	601
Kentucky	716	694
Louisiana	629	617

Maine	304	292
Maryland	719	704
Massachusetts	2,402	2,282
Michigan	2,632	2,429
Minnesota	1,881	1,849
Mississippi	331	323
Missouri	1,611	1,610
Montana	227	222
Nebraska	711	701
Nevada	66	62
New Hampshire	201	186
New Jersey	2,725	2,666
New Mexico	159	152
New York	9,947	9,349
North Carolina	822	779
North Dakota	211	211
Ohio	3,241	3,194
Oklahoma	623	595
Oregon	810	762
Panama	9	15
Pennsylvania	4,436	4,215
Puerto Rico	130	96
Rhode Island	354	342
South Carolina	238	222
South Dakota	229	218
Tennessee	875	794
Texas	2,117	2,030
Utah	311	275
Vermont	134	90
Virginia	764	732
Washington	1,172	1,119
West Virginia	488	424
Wisconsin	1,876	1,803
Wyoming	110	107
Air Force	415	390
Army	390	396
Navy	586	552
Public Health Service	145	188
Veterans Administration	559	598
Unorganized	12	8
TOTAL	65,498	62,734

PRINCIPLES APPROVED FOR REPAYMENT PLANS

A nine-point statement of principles for measuring the acceptability of dental prepayment plans was adopted by the House. The statement of principles, as submitted by the Council on Dental Health, is designed to assist dental societies in determining the desirability and soundness of a prepayment dental care plan. A brochure has also been prepared by the council to provide dental societies with technical information on the subject. The House first took official action on prepayment dental programs in 1949 when it recommended that dental societies inaugurate pilot projects. The statement of principles as amended, includes the following: 1. The plan should be developed with advice of authorized representatives of the dental society. 2. The plan should foster a high quality dental treatment. 3. The dentist serving the patient must have complete freedom in recommending treatment. 4. There must be freedom of choice for the patient in applying for treatment and for the dentist in having the right to accept patients. 5. There should be provision for direct payment to the dentist. 6. All rules and policies related to dental aspects of the plan should be determined by official representatives of the dental profession. 7. Fees for dental services should be determined by authorized representatives of dentists providing the services and should be consistent with high-grade services. 8. The plan should be specific in detailing the type and amount of service to be provided. 9. Sound business practices should be used to assure low administrative costs.

OASI REJECTED, 312-64 FOR THIRD TIME BY HOUSE

For the third time since 1949, the House of Delegates rejected a resolution for inclusion of dentists in the Old Age and Survivors Insurance (OASI) program of the federal Social Security Act. The action was by a standing vote of 312 delegates against the measure to 64 delegates for the inclusion of dentists in OASI. The House directed the Council on Legislation to present to Congress the A.D.A. policy in connection with any proposed legislation for the extension of social security coverage. Last summer, President Eisenhower asked Congress to extend the program to dentists, physicians, lawyers and virtually all others now excluded from the OASI program.

HONORARY MEMBERSHIP IS CONFERRED ON SEN. HUNT

Honorary membership was unanimously conferred on Sen. Lester C. Hunt (D., Wyo.) by the House of Delegates. The award, top honor of the Association, was presented to the only dentist member of the U. S. Senate with a citation that read in part: "Sen. Hunt, in his capa-

city of governor, senator and member of the dental profession, has rendered distinguished service to his state, to dentistry and to his country. The dental profession and the Association are proud of the contributions he has made." Sen. Hunt was elected to the Senate in 1948. Previously he served as governor and secretary of state in Wyoming. He received his D.D.S. degree at St. Louis University in 1917 and began dental practice that same year at Lander, Wyo.

ATLANTIC CITY CHOSEN AS 1956 MEETING SITE

Atlantic City was chosen as the site of the 1956 Annual Sessions by the House of Delegates. Dates for the meeting will be selected by the Board of Trustees. Named as officials by the Board of Trustees for the 1954 meeting at Miami, to be held Nov. 8-11 are Drs. Robert A. Thoburn, T. A. Price, A. E. Rosenthal, L. S. Turner and James L. Armstrong, all designated as honorary officers; Drs. E. B. Penn, H. R. Turner, J. E. Edwards and Horace L. Cartee, named vice-chairmen, and Drs. S. H. Gordon, George J. Coleman, H. W. Stubb, R. J. Smith and Mrs. Curtis A. Haggard, chairmen of committees. Dr. Curtis A. Haggard is chairman of the General Committee on Local Arrangements. The Board appointed Dr. William B. Ryder Jr. as chairman of the general committee for the 96th Annual Sessions to be held in San Francisco October 17-20, 1955.

KELLOGG FUND UNDERWRITES \$250,000

FOR DENTAL SURVEY

Announcement that the W. K. Kellogg Foundation will provide a grant of \$250,000, or one-half the estimated cost of a comprehensive, two-year study of dentistry, was made by the Board of Trustees. The survey, which the House of Delegates authorized the Board of Trustees to investigate in 1948, will be launched when complete support for the project is secured. The Kellogg grant was made on the basis of a detailed prospectus for the survey prepared last year. Similar comprehensive studies have been made or are in progress in the fields of medicine, law, pharmacy and nursing. In order to assure that the study would be conducted under impartial auspices and produce the greatest benefit to the dental profession, the Board reported that arrangements have been made for the American Council on Education to sponsor the study. The organization, in agreeing to the study, said that "the survey presents a great opportunity for service to the profession of dentistry and to the people of the United States." The work and activities of the various agencies of the Association will be included in the study.

FEDERAL DENTAL SCHOOLS OPPOSED BY DELEGATES

The House went on record against the establishment by the federal government, including the military services, of professional undergraduate dental schools. At the same time, the delegates approved a general proposal for an armed forces scholarship plan for the procurement of regular dental corps officers during the period of emergency. The delegates also approved the principle of regional plans for dental education programs to serve residents of states which do not have dental schools within their borders.

URGE PARTICIPATION IN CIVIL DEFENSE PROGRAMS

Members of the dental profession were urged to prepare for participation in civil defense activities by taking special Red Cross first aid courses for dentists and by familiarizing themselves with the federal Civil Defense Administration manual, *The Dentist in Civil Defense*. The delegates also authorized the A.D.A. Subcommittee on Civil Defense to develop over-all policies for the participation of dentistry in civil defense programs and to keep constituent and component dental societies informed of civil defense activities.

BUDGET OF \$1,951,000 IS APPROVED FOR 1954

The House of Delegates approved a budget for 1954 totalling \$1,951,000. Of this, \$1,843,575 was appropriated for operating expenses of Association agencies and the balance of \$107,425 was earmarked for the restricted reserve fund. The latter as of June 30 totalled \$1,561,794.68. Membership dues account for the major portion of the Association's estimated income of \$1,951,000 for 1954. Receipts from dues next year were estimated at \$1,350,000. Other sources of income and the amounts estimated for each in 1954 are: advertising, \$232,000; subscriptions, \$58,000; earnings on investments, \$70,000; exhibit space rental, \$55,000; Council on Dental Education, Division of Educational Measurements, \$65,000; Council of the National Board of Dental Examiners, \$100,000; and sale of materials, \$21,000. Appropriations for 1954 were approved as follows: administrative \$569,726; annual session, \$66,805; bureaus, \$176,625; councils and divisions, \$504,285; publications, \$426,134; and contingent fund, \$100,000.

SUGGESTS FEWER DENTAL OFFICERS FOR MILITARY

In a speech October 1 before the House of Delegates on dental manpower needs of the military services, Dr. Howard A. Rusk, chairman of the Health Resources Advisory Committee of the Office of

Defense Mobilization, questioned the current established ratio of one dentist to every 500 men in the armed forces, while the ratio of medical officers is being reduced in half to three per thousand troops. "In terms of the available supply of dentists, the military utilization rate is high," he said. "In relation to supply, the military services make more liberal use of dentists than of physicians or nurses. The military services have proportionately almost four times as many dentists as does the civilian population in contrast to not quite three times as many physicians and one and one-half times as many nurses." Dr. Brandhorst, in his president's report to the House, took the nation's armed forces to task for their "continued squandering of dental manpower at the expense of essential health services for the civilian population." He called on the armed services for a "long overdue" evaluation of dental manpower needs in the armed forces. Meanwhile, Selective Service headquarters announced it was unlikely that additional dentists would be called on for military service for the remainder of the fiscal year, ending June 30, 1954. In a directive, Selective Service Director Lewis B. Hershey requested local boards to discontinue the processing of registrants under the dentist-physician draft law for physical examinations and induction.

PLANS DRAFTED FOR A.D.A. CENTENNIAL

In preparation for the 100th anniversary of the founding of the Association, delegates voted to request that the Postoffice issue a special commemorative stamp in 1959. The Board of Trustees is appointing a special committee to work out a program for the centennial. Philadelphia has put in a bid for the Association to mark its founding in that city at the Annual Sessions in 1959.

STUDENT DUES INCREASE OF 50 CENTS APPROVED

Because of postal regulations, delegates approved an increase in dues of student members from \$3 to \$3.50, beginning on Jan. 1, 1955. The resolution pointed out that the amendment to the A.D.A. bylaws was dictated solely by postal regulations stipulating that annual dues must be equal to at least one-half of the subscription price of a publication sent under second class mailing privileges.

DR. W. PHILIP PHAIR APPOINTED SECRETARY

OF COUNCIL ON DENTAL HEALTH

The appointment of Dr. W. Philip Phair as secretary of the A.D.A. Council on Dental Health was announced in Cleveland by Dr. Harold

Hillenbrand, Association secretary. Dr. Phair has been assistant secretary of the council since 1950. He succeeds Dr. Allen O. Gruebbel who resigned last June. Appointment of Dr. Phair was made upon recommendation of the council, headed by Dr. David W. Brock, of St. Louis. Prior to joining the Association staff, Dr. Phair served as head of the dental health section of the Washington State Department of Health. He is a graduate of the University of Iowa College of Dentistry and holds a master's degree from the University of Michigan School of Public Health.

PLANS DRAFTED FOR A.D.A. CENTENNIAL

In preparation for the 100th anniversary of the founding of the American Dental Association, the Board of Trustees is appointing a special committee to work on a program for the centennial. The committee has not yet decided on the program to mark the centennial in this city at the Washington Convention in 1959.

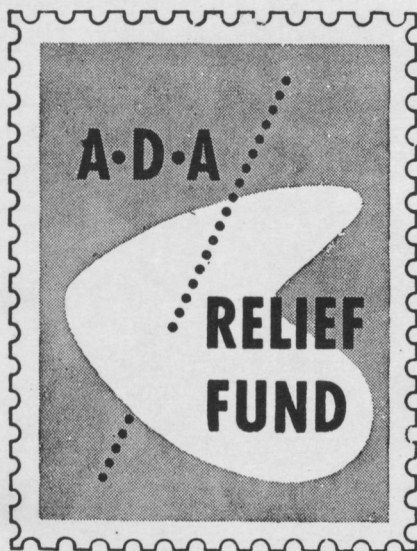
STUDENT DUES INCREASE OF 25 CENTS APPROVED

Because of local regulations, dentists engaged in business do not receive student numbers until the beginning of Jan. 1, 1959. The association pointed out that the amendment to the A.D.A. constitution was in effect in 1958, and that the association had no right to demand a student number until the beginning of 1959. The association has no right to demand a student number until the beginning of 1959.

DR. W. PHILIP PHAIR APPOINTED SECRETARY OF COUNCIL ON DENTAL HEALTH

The appointment of Dr. W. Philip Phair as secretary of the A.D.A. Council on Dental Health was announced in December of 1958.

GIVE NOW!



It is only through the voluntary support of dentists everywhere that the American Dental Association Relief Fund and the Relief Fund of *your* state society are able to provide vitally-needed help to dentists in distress.

The American Dental Association Relief Fund is a charitable trust perpetually dedicated to provide assistance to those members of the dental profession who, through accident or illness, are totally unable to help themselves.

The 1953-54 fund drive is now underway. Please mail your contribution today. Thanks.

AMERICAN DENTAL ASSOCIATION RELIEF FUND

222 East Superior Street, Chicago 11, Illinois